RFA # 1604261137 / Grants Gateway # DOH01-HWRI1-2016

New York State Department of Health
Office of Primary Care and Health Systems Management
Center for Health Care Policy and Resource Development
Division of Workforce Transformation

Request for Applications

Health Workforce Retraining Program/Initiative

KEY DATES

Release Date:	**May 11, 2016**
Questions Due:	**May 23, 2016**
Questions, Answers and Updates Posted (on or about):	**May 31, 2016**
Applications Due:	**June 27, 2016 by 4:00 PM**
DOH Contact Name & Address:	**Susan Mitnick New York State Department of Health Room 1603, Corning Tower Empire State Plaza Albany, NY 12237 HWRI@health.ny.gov**

Table of Contents

I. Introduction

A. Background

The Health Workforce Retraining Program, also known as the Health Workforce Retraining Initiative (HWRI), supports the training and retraining of health and public health industry workers with the skills necessary in the public health and health care market today. Since its inception, the program has awarded nearly $352 million to 500 grantees and trained or retrained over 170,000 health care workers.

The New York State Department of Health, in consultation with the New York State Department of Labor, is soliciting applications from organizations proposing to train or retrain (hereafter referred to as "train") health industry workers to obtain new positions, meet the new job requirements of existing positions, or otherwise meet the requirements of the changing public health and health care market and the diversity of the populations seeking health care services.

All health care sectors, including public health, continue to face persistent challenges in recruiting and retaining employees in various health care occupations. Over half of the fastest growing occupations in the United States are in health care. Health care facilities face increasing pressures to operate more efficiently due to declining statewide and regional occupancy levels; a growing need to integrate emerging technologies into the health care delivery system; tight credit markets; revenue shortfalls; and the continued transition of resources from inpatient and tertiary care to primary care.

In addition, reform initiatives at both the State and Federal levels of government, including the Affordable Care Act, the Delivery System Reform Incentive Payment (DSRIP) Program and the State Health Innovation Program (SHIP), are encouraging providers to work collaboratively to achieve better health, better health care and lower costs through the development of models of integrated care management such as "patient centered medical homes," advanced primary care models and "health homes." These efforts will require the existing workforce to be trained in emerging models of collaborative care, understand how to focus on population health needs, work in interdisciplinary teams, maximize the use of health information technology and prepare for new value and outcome based payment systems.

Further, New York State's population is becoming increasingly more diverse and, therefore, it is important that health care system interactions are able to meet the needs of diverse populations at all levels. In addition, culture and language are vital factors in both health care delivery and receipt of health care services. The health care workforce should be equipped to provide services in culturally and linguistically appropriate ways and reflect the diversity of the populations being served.

B. Purpose and Availability of Funds

This program is intended to support such efforts as described above, and in particular addresses:

- Changes in the skills required for public health and health care workers to maintain current employment including meeting new job or certification/licensing requirements;
- Additional skills needed for a new job due to changes in the market, including new employment for laid off workers or workers at risk of being laid off;
- Occupational shortages;

- Changes in skills required to support models of integrated care management and interdisciplinary team based care;
- Changes in skills required to support the use of data, reports, analysis and standard quality improvement techniques to move toward better population health and health care services;
- Development of home and community based long term care and the need for long term care workers caring for individuals wishing to remain in their homes and communities;
- Additional skills needed to support the improvement of the care transition process to reduce avoidable hospital readmissions and emergency care usage;
- Diversity in the health care and public health workforce;
- Promotion of the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS Standards); and
- Additional skills needed to enhance providers' awareness of interventions, resources and tools for integrating health literacy into practice.

Up to **$24,200,000** is available to support this Request for Applications (RFA) for a two year period. Regional funding is available based on the amount raised in a region and will be awarded on a competitive basis within a region in accordance with the guidelines laid out in RFA Section V.C. (Review and Award Process).

The region in which funding is to be requested is determined by the county of the employer with participants to be trained or the county of residence of laid-off workers to be trained.

For this RFA, each project in each region is considered one application. All materials must be submitted for each project in each region. For example, an applicant that is proposing to train registered nurses (RNs) in the Western, Rochester and Syracuse regions and proposing to train licensed practical nurses (LPNs) in Western, Rochester and Syracuse will submit a total of <u>six</u> applications. Applicants may submit a minimum of one application and a maximum of 100 applications.

Table 1 details the counties included and amount available within each region.

Table 1 Maximum Funding Levels by Region							
Western	**Rochester**	**Central**	**Utica/ Watertown**	**Northeastern**	**Northern Metropolitan**	**New York City**	**Long Island**
Allegany Cattaraugus Chautauqua Erie Genesee Niagara Orleans Wyoming	Livingston Monroe Ontario Seneca Wayne Yates	Broome Cayuga Chemung Cortland Schuyler Steuben Tioga Tompkins Onondaga	Chenango Franklin Hamilton Herkimer Jefferson Lewis Madison Oneida Otsego Oswego St. Lawrence	Albany Clinton Essex Fulton Greene Montgomery Rensselaer Saratoga Schenectady Schoharie Warren Washington	Columbia Delaware Dutchess Orange Putnam Rockland Sullivan Ulster Westchester	Bronx Kings New York Queens Richmond	Nassau Suffolk
$716,320	**$1,427,800**	**$774,400**	**$84,700**	**$672,760**	**$1,161,600**	**$16,782,700**	**$2,579,720**

II. Who May Apply

Organizations eligible to apply for funding include:

- Health worker unions;
- General hospitals;
- Long term care facilities;
- Other health care facilities/agencies;
- Health care facilities trade associations;
- Labor-management committees;
- Joint labor-management training funds established pursuant to the provisions of the Federal Taft-Hartley Act; and
- Educational institutions.

A. Minimum Applicant/Application Requirements

1. Applicants must be legally existing organizations located in NYS capable of entering into a Master Grant Contract with the New York State Department of Health.
2. Applicants must be pre-qualified in the Grants Gateway, if not exempt, on the date applications are due.

Applications that do not meet the above minimum requirements will not be reviewed.

B. Preferred Application Requirements

Highest points will be awarded to applications that clearly and persuasively demonstrate a need for training in one or more of the following areas:

- Provide training in occupations with documented shortages;
- Provide training targeted for workers who have experienced or are likely to experience job loss, or are recipients of public assistance due to changes in the public health or health care system;
- Provide needed expansion of educational capacity in shortage occupations;
- Provide training for new job certification or licensing requirements; or
- Provide training in emerging technologies.

Additional points will be awarded to projects that, in addition to demonstrating one or more of the training needs listed above, also include one or more of the following objectives:

- Provide training which promotes the development of models of integrated care management such as medical homes, health homes, advanced primary care or interdisciplinary team based care;
- Provide training in managed long term care;
- Provide training to promote the provision of culturally competent, patient centered care;
- Provide training opportunities to increase awareness and understanding of health disparities, including enhancing the health care workforce's ability to meet the CLAS Standards or promoting the diversity of the health care workforce;
- Promote improved quality and outcomes of care through training in the effective reporting, analysis and use of data collected by health information technology (HIT) applications; or
- Provide training in telehealth.

III.   Project Narrative/Work Plan Outcomes

A. Contractor Expectations

Awards will be made to train public health and health care workers in skills that address evolving workforce demands, and will be made on a competitive basis by project and by region in accordance with Section V.C. (Review and Award Process).

Contractors will be expected to:

1. Develop and manage the administrative structure necessary to implement proposed projects in a timely manner. This includes commitment of staffing adequate to:
   - develop relationships and contracts with partners for assessments, training or other functions necessary for the successful implementation of the project;
   - manage and coordinate the project;
   - meet fiscal and programmatic contract requirements; and
   - evaluate the project.

2. Ensure the cost effective provision of assessment, training and placement services to the numbers of participants proposed in the application.

3. Provide the Department of Health with monthly or quarterly outcome and expenditure reports, and a two year final report, in a timely manner as described in Section IV. (Administrative Requirements).

4. Fully cooperate with Department of Health and Department of Labor representatives during contractor assistance program reviews, including the provision of supporting documentation of outcomes and expenditures and other data or information as may be necessary to help assess the success of the project and monitor project expectations.

B. Eligible Activities

Activities eligible for funding under HWRI training projects may include, but are not limited to those described below.

In-service training customarily provided by a staff development department will <u>not</u> be funded. Funds also may <u>not</u> be used to train physicians and physicians in training.

1. Assessment and Intake

As part of a training project, assessment and intake may include activities to determine training needs and class placement, including the use of such tools as:

- Test of Adult Basic Education (TABE) – to assess literacy, math/reading level and/or job skills;
- AHRQ Health Literacy Universal Precautions Tool Kit – to assess health literacy; and/or
- Other relevant assessment tools.

Activities may also include counseling and guidance activities related to pre-intake assessment, but not ongoing evaluation of progress during training.

2. Remediation

Remediation activities include preparation in English for speakers of other languages, taking into consideration limited English Proficiency (LEP) populations when developing instructions in basic reading or mathematics, or completion of requirements for a General Equivalency Diploma (GED). Remediation may be provided as part of a training project which includes health literacy, where it is necessary for redeployment to new jobs or required to maintain current employment.

3. Basic Skill Development

Basic skill development activities include training in such skills as word processing, data entry, computer based calendaring and scheduling, reception and customer service, language development and communication skills.

4. Reorientation

Reorientation activities include short-term preparation of public health and health care workers to transition to other health sectors. For example, this may include preparing a medical-surgical nurse as a public health nurse, or preparing bilingual community health workers as medical interpreters, or preparing a public health nurse to participate in emergency or disaster response.

5. Counseling

Counseling activities include culturally and linguistically appropriate counseling, mentoring, and precepting for employees who are learning new skills.

6. Skill Development and Enhancement

Skill development and enhancement activities include training that develops or enhances new skills in areas such as care coordination, team based care, chronic disease management, language development and communication skills, cultural competency and health literacy. This might include, for example, care coordination skills for outpatient medical assistants, communication skills to promote transfer between acute and post-acute facilities, or training to enhance skills among Community Health Workers/Promotoras.

7. Career Advancement

Career advancement activities includes training for public health or health care career ladder and degree programs, e.g., RN training or LPN training. Expenses may include tuition, books, fees, etc., paid to an accredited program.

8. Expansion of Educational Capacity

Includes support for faculty, clinical instructors, preceptors, and others to create added training slots that meet the educational, cultural, linguistic and health literacy needs of the public health and health care workforce.

C. Project Expectations

Applicants most likely to be selected for funding are those that best address the following areas:

1. Need for Training

Applicants should identify the training need or needs which will be addressed by the proposed project, document the existence of such need or needs and explain how the proposed project will meet such need or needs. Because of regional variations in job markets, applicants who cite local and regional employment trends will score higher than those who refer to national or statewide trends. Highest points will be awarded to applications that clearly and persuasively demonstrate a need for training in one or more of the following areas:

a. Training in Occupations with Documented Shortages

Applicants should demonstrate shortages in the occupations for which training is proposed. Such documentation may be through local, regional, or state labor statistics, vacancy rates, long recruitment times, local studies/surveys, letters from employers, or other appropriate mechanisms. Training for shortage occupations can include offering health care workers upgrades or enhanced skills through degree or non-degree educational programs or through tailored instructional programs.

b. Training for Workers Facing Job Loss

Applicants may propose to train workers who have experienced job loss, are likely to experience job loss, or are receiving public assistance due to changes in the health care system (e.g., facility closures) in areas either inside or outside the health care sector, and should document how the training will promote the employment of participants when training is completed. Applicants should identify the health care facilities where such workers are or were employed and, where applicable, document facility plans to downsize or close, such as by referencing Certificate of Need applications for reduced beds or approved hospital closure plans.

c. Expansion of Educational Capacity in Shortage Occupations

Applicants may propose to expand educational capacity for occupations where training opportunities have been limited by the lack of faculty, clinical instructors or clinical affiliation slots. The expansion of educational capacity can involve nursing, such as Master of Science in Nursing (MSN) programs with educational concentrations, or other occupations where opportunities have been limited. Applicants should document the need for additional capacity via waiting lists for training slots, numbers of applicants turned away, and other program specific statistics that indicate need for more training capacity. Projects requesting funding under this category should, in addition to expanding capacity, train participants during the grant cycle in the new training slots created.

d. Training for New Job Certification or Licensing Requirements

Applicants should document changes in certification, licensing requirements, or other upgraded job requirements of current positions or job titles. Applicants should describe how the training will benefit the employees and positively affect the patient population or quality of care at the facility. Training in this category may include, for example, cross-training of staff in multiple disciplines or other strategies that assist employees to meet new job requirements or upgraded credentials for a current position. It does not apply to all certificate training or licensed training, only to training that upgrades skills to meet new requirements of an existing position.

e. Training for Emerging Technologies

Applicants should document the needs of the facilities for training workers in emerging technologies. Such documentation can be project, facility or job specific. For example, an applicant could discuss specific job titles identified for training and why it is needed for those titles, or why the installation of a new hospital wide system creates a need for training for all titles. Training in this category may include new coding systems, upgrading to electronic health records, or training on a new hospital information system. HWRI funding will only support equipment directly associated with training and not equipment which will be used for ongoing operational activities.

Additional points may be awarded to projects that, in addition to demonstrating one or more of the training needs listed above, also include one or more of the following objectives:

a. Training which Promotes the Development of Models of Integrated Care Management

Applicants may demonstrate that the project supports the development of models of integrated care management, or interdisciplinary team based care and links between population health and health care. Projects may include:

- Preparing workers to work within a medical home or health home model;
- Preparing workers to work within an interdisciplinary care team; and/or
- Providing skills in care coordination, community health work, and/or chronic disease management

b. Training in Managed Long Term Care

Applicants may demonstrate that the project provides training in managed long term care.

c. Training in Culturally Competent Patient Centered Care

Applicants may demonstrate that the project provides training that will promote one or more of the following:

- A focus on diverse cultural beliefs and how to manage within different belief structures;

- A focus on recognizing patients' levels of health literacy and using that recognition to present a message that will be heard correctly and responded to appropriately;

- Providing skills in a needed foreign language; and/or

- Providing needed translation and interpretation skills.

Applicants should document how the proposed cultural competence training will go beyond the typical human resources in service training, which focuses on basic understanding of cultural differences. The application should delineate the additional skills that training will provide to overcome language and cultural barriers.

d. Training in Health Disparities

Applicants may demonstrate that the project proposes training to increase awareness and understanding of health disparities, including how the project will promote increased diversity in the public health and/or health care workforce. Such efforts should include a focus on promoting the use of the CLAS Standards, including:

- improving cultural and linguistic competency and the diversity of the health-related workforce;

- developing and supporting the health workforce and related industry workforces to promote the availability of cultural and linguistic competency training that is sensitive to the cultural and language variations of diverse communities;

- increasing diversity and competency of the health workforce and related industry workforces through recruitment, retention, and training of racially, ethnically, and culturally diverse individuals; and

- encouraging interpreters, translators, and bilingual staff providing services in languages other than English to follow codes of ethics and standards of practice for interpreting and translation.

Strategies in this category can include, for example, diversifying the health care workforce; training community health workers and/or Promotoras; providing a pipeline program to students to increase racial and ethnic diversity in public health and biomedical sciences; providing training opportunities to increase awareness and understanding of health disparities; or providing training to enhance the public health workforce's ability to meet the CLAS Standards in Health and Health Care.

e. Training in Effective Use of Health Information Technologies (HIT)

Applicants may demonstrate that the project proposes training that will promote improved quality and outcomes of care through effective reporting, analysis and use of HIT based data collection.

f. Training in Telehealth

Applicants may demonstrate that the project proposes training that will help increase access to care via telehealth.

2. Capability and Commitment of the Applicant to Implement the Project

a. Description of Capability

Applicants should clearly describe their ability to train the target population.

Applicants may subcontract or collaborate on components of the project. For those applicants that propose subcontracting or collaboration, it is expected that the application state the specific parts of the project to be performed through subcontracts or collaboration and identify all subcontracting or collaborating organizations. Applicants should note that the lead organization (contractor) will have overall responsibility for all contract activities, including those performed by subcontractors,

and will be the primary contact for the DOH. All subcontractors should be approved by the Department of Health.

If an applicant is relying upon subcontracting or collaborative relationships with other organizations or internal affiliates to help it conduct such training, it should upload a letter from each such organization that sufficiently describes the specific role of the organization in the proposed project, including the following:

- Applicants that are health care facilities should submit letters of participation from all training organizations that will conduct training as part of the proposed project, including a description of how training will be implemented and the number of students expected to be served by the organization;

- Applicants that conduct training should submit letters from all health care facilities and public health agencies for which it will conduct training, including a description of the job titles and skills of trainees proposed to participate in training, the rationale for selecting those trainees, and the institution's capacity to train the stated number of trainees; and

- All other applicants should submit letters of participation from all training organizations and health care facilities which include the descriptions listed above.

All subcontracting and collaborating organizations should be listed on the Application Transmittal Form (Attachment #1), including the type of organization.

b. **Description of Past Training Success**

Applicants should describe their experience in conducting training projects, including projects previously funding by HWRI, either in the area being proposed or other areas, and demonstrate that they have achieved measurable outcomes. Examples of how an applicant may demonstrate that it achieved measurable outcomes includes documenting:

- The number of workers trained and hiring rates for upgrading projects;

- The number of workers retained in health care facilities as a result of past training projects, such as:

  - number of school-based graduates that were hired by a facility or collaborative partners;
  - number of workers trained that are still employed in their field; and/or
  - statistics from employee satisfaction surveys that could be utilized as retention documentation for non-upgrading projects;

- Reductions in denied claims for a period after enhanced billing/coding training was conducted;

- Reductions in patient waiting times attributable to training projects; and/or

- Surveys or other means that demonstrate increases in patient satisfaction after training was conducted.

If applicants were unable to fully implement past training projects, they should explain

the reasons for the lack of implementation or challenges faced, and describe why they will not have similar issues with the implementation of their proposed project under this solicitation.

c. Ability to Meet Contract Requirements

Applicants should demonstrate their ability to implement the project within a three month period of time from the date of contract execution. Implementation may include time for planning activities such as curriculum development, participant selection, or structuring the training to reflect the academic calendar. Applicants should show that the organization's corporate structure is committed to the project and that there is an administrative structure that is adequate for the scope of the project, and include a brief description of staff responsible for the administration of the project and for complying with contractual requirements.

d. Labor Organization Support

Applicants whose project will train workers represented by labor organizations should provide letters of concurrence from relevant bargaining agent(s) or, if there are no labor organizations representing the proposed participants at the health care facilities, state such fact.

e. Leveraging Other Resources

Applicants should also describe any plans by themselves or their collaborating organizations to leverage other resources to make the project more cost effective. **Do not include specific costs in the technical proposal**.

3. Training Strategy

Applicants should describe how the strategy of the training project will facilitate training and assure employment for participants, including a description of:

a. The process to select training participants, as well as any other start-up activities such as curriculum development and the use of an assessment tool or process;

b. The proposed curriculum and how it provides participants with the skills that meet the employers' needs;

c. The length of training, its appropriateness to the curriculum, and how it will provide the targeted skills to meet project goals; and

d. Plans to monitor the progress of training participants while in training, including any mentoring, tutoring or counseling services to be provided.

Length of training is defined as the total number of hours in which any one participant should complete all modules of training, and only actual hours in training should be counted. Examples:

- One month of full time training in a 37.5 or 40 hour work week would be 160 to 170 hours; six weeks of training at one hour per day, four days per week, would be listed as 24 hours of training, NOT six weeks of training.
- Academic training programs on average equate 3 credits over a 15 week semester to 3 hours per week or 45 hours of classroom training per semester or trimester.

- If there are multiple components or modules of training, count hours for the entire series of training modules (e.g., if a dietary clerk receives 40 hours of computer training followed by 10 hours of on the job precepting, they are receiving 50 hours of training).

4. Work Plan and Performance Measures

Applicants should provide a detailed overview of project objectives, tasks and performance measures that are consistent with the objectives of the RFA, using the format in the Grants Gateway. The work plan should identify the objectives, tasks and performance measures that will be achieved during the project period; a feasible timeline for initiating and completing deliverables; and performance measures that will be used to assess the effectiveness of the project.

For training projects focused on upgrading or enhancing skills, such performance measures should, at a minimum, identify the number of participants who will enter training, the number who will complete training, and the number who will be hired or retained after successfully completing training.

For projects involving the expansion of educational capacity projects, such performance measures should include, at a minimum, the number of current slots, the number of qualified candidates turned away, the number of slots to be created by the expansion, and the number of participants who will enter and complete training as a result of the expansion.

Successful applicants may be asked to modify work plans prior to initiation of the contract to address issues identified during the review process and the amount of funding awarded.

IV. Administrative Requirements

A. Issuing Agency

This RFA is issued by the New York State Department of Health, Office of Primary Care and Health Systems Management, Center for Health Care Policy and Resource Development, Division of Workforce Transformation. The Department is responsible for the requirements specified herein and for the evaluation of all applications.

B. Question and Answer Phase

All substantive questions must be submitted in writing or via email to:

Susan Mitnick
New York State Department of Health
Corning Tower, Room 1603
Empire State Plaza
Albany, NY 12237
HWRI@health.ny.gov

To the degree possible, each inquiry should cite the RFA section and paragraph to which it refers. Written questions will be accepted until the date posted on the cover of this RFA. This includes Minority and Women Owned Business Enterprise (MWBE) questions and questions pertaining to the MWBE forms.

Questions of a technical nature can be addressed in writing or via telephone by calling **Susan Mitnick at 518-473-4700. Questions are of a technical nature if they are limited**

to how to prepare your application (e.g., formatting) rather than relating to the substance of the application.

Some helpful links for questions of a technical nature are below. Questions regarding specific opportunities or applications should be directed to the DOH contact listed on the cover of this RFA.

- www.grantsreform.ny.gov/grantees

- Grants Reform Videos (includes a document vault tutorial and an application tutorial) on YouTube: http://www.youtube.com/channel/UCYnWskVc7B3ajjOVfOHL6UA

- Agate Technical Support Help Desk
  Phone: 1-800-820-1890
  > Hours: Monday thru Friday 8am to 8pm
  > Email: helpdesk@agatesoftware.com
  > (Technical questions)

- Grants Team Email: Grantsreform@budget.ny.gov
  Phone: 518-474-5595
  > Hours: Monday thru Friday 9am to 5pm
  > (Application Completion, Policy, and Registration questions)

- www.grantsgateway.ny.gov

Prospective applicants should note that all clarifications and exceptions, including those relating to the terms and conditions of the contract, are to be raised prior to the submission of an application.

This RFA has been posted on the NYS Grants Gateway website at: https://www.grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx and the Department's public website at: http://www.health.ny.gov/funding/. Questions and answers, as well as any updates and/or modifications, will also be posted on these websites. All such updates will be posted by the date identified on the cover of this RFA.

C. Letter of Interest/Intent

Letters of Interest/Intent are **not** requested or required for this RFA

D. Applicant Conference

An Applicant Conference will **not** be held for this RFA.

E. How to File an Application

Applications must be submitted online via the Grants Gateway by the date and time posted on the cover of this RFA. Reference materials and videos are available for Grantees applying to funding opportunities on the NYS Grants Gateway. Please visit the Grants Reform website at the following web address: http://grantsreform.ny.gov/Grantees and select the "Grantee Quick Start Guide Applications" from the menu on the left. There is also a more detailed "Grantee User Guide" available on this page as well. Training webinars are also

provided by the Grants Reform Team. Dates and times for webinar instruction can be located at the following web address: http://grantsreform.ny.gov/training-calendar.

To apply for this opportunity:

1. Log into the Grants Gateway as either a "Grantee" or "Grantee Contract Signatory".
2. Click on the "View Opportunities" button under "View Available Opportunities".
3. In the Search Criteria, enter the Grant Opportunity name (INSERT NAME) and select the Department of Health as the Funding Agency.
4. Click on "Search" button to initiate the search.
5. Click on the name of the Grant Opportunity form the search results grid and then select the "APPLY FOR GRANT OPPORTUNITY" button located bottom left of the Main page of the Grant Opportunity.

Once the application is complete, prospective grantees are **strongly encouraged** to submit their applications at least 48 hours prior to the due date and time. This will allow sufficient opportunity for the applicant to obtain assistance and take corrective action should there be a technical issue with the submission process. Both DOH and Grants Reform staff are available to answer applicant's technical questions and provide technical assistance prior to the application due date and time. Contact information for the Grants Reform Team is available under Section IV. B. of this RFA.

PLEASE NOTE: Although DOH and the Grants Reform staff will do their best to address concerns that are identified less than 48 hours prior to the due date and time, there is no guarantee that they will be resolved in time for the application to be submitted and, therefore, considered for funding

The Grants Gateway will always notify applicants of successful submission. If a prospective grantee does not get a successful submission message assigning their application a unique ID number, it has not successfully submitted an applications. During the application process, please pay particular attention to the following:

- Not-for-profit applicants must be prequalified on the due date for this application submission. Be sure to maintain prequalification status between funding opportunities. Three of a not-for-profit's essential financial documents - the IRS990, Financial Statement and Charities Bureau filing - expire on an annual basis. If these documents are allowed to expire, the not-for-profit's prequalification status expires as well, and it will not be eligible for State grant funding until its documentation is updated and approved, and prequalified status is reinstated.
- Only individuals with the roles "Grantee Contract Signatory" or "Grantee System Administrator" can submit an application.
- Prior to submission, the system will automatically initiate a global error checking process to protect against incomplete applications. An applicant may need to attend to certain parts of the application prior to being able to submit the application successfully. You can also run the global error check at any time in the application process. (see p.66 of the Grantee User Guide).
- Grantees should use numbers, letters and underscores when naming their uploaded files. There cannot be any special characters in the uploaded file name. Also be aware of the restriction on file size (10 MB) when uploading documents.

The following table will provide a snapshot of which roles are allowed to Initiate, Complete, and Submit the Grant Application(s) in the Grants Gateway.

Role	Create and Maintain User Roles	Initiate Application	Complete Application	Submit Application	Only View the Application
Delegated Admin	X				
Grantee		X	X		
Grantee Contract Signatory		X	X	X	
Grantee Payment Signatory		X	X		
Grantee System Administrator		X	X	X	
Grantee View Only					X

Late applications will not be accepted. **Applications will not be accepted via fax, e-mail, hard copy or hand delivery.**

For this RFA, each project in each region is considered one application. All materials must be submitted for each project in each region. For example, an applicant proposing to train RNs in the Western, Rochester and Syracuse regions and proposing to train LPNs in Western, Rochester and Syracuse will submit a total of <u>six</u> applications. Applicants may submit a minimum of one application and a maximum of 100 applications.

F. Department of Health's Reserved Rights

The Department reserves the right to:

1. Reject any or all applications received in response to this RFA.

2. Withdraw the RFA at any time, at the Department's sole discretion.

3. Make an award under the RFA in whole or in part.

4. Disqualify any applicant whose conduct and/or proposal fails to conform to the requirements of the RFA.

5. Seek clarifications and revisions of applications.

6. Use application information obtained through site visits, management interviews and the state's investigation of an applicant's qualifications, experience, ability or financial standing, and any material or information submitted by the applicant in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFA.

7. Prior to application opening, amend the RFA specifications to correct errors or oversights, or to supply additional information, as it becomes available.

8. Prior to application opening, direct applicants to submit proposal modifications addressing subsequent RFA amendments.

9. Change any of the scheduled dates.

10. Waive any requirements that are not material.

11. Award more than one contract resulting from this RFA.

12. Conduct contract negotiations with the next responsible applicant, should the Department be unsuccessful in negotiating with the selected applicant.

13. Utilize any and all ideas submitted with the applications received.

14. Unless otherwise specified in the RFA, every offer is firm and not revocable for a period of 60 days from the bid opening.

15. Waive or modify minor irregularities in applications received after prior notification to the applicant.

16. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer's application and/or to determine an offerer's compliance with the requirements of the RFA.

17. Negotiate with successful applicants within the scope of the RFA in the best interests of the State.

18. Eliminate any mandatory, non-material specifications that cannot be complied with by all applicants.

19. Award grants based on geographic or regional considerations to serve the best interests of the state.

G. Term of Contract

Any contract resulting from this RFA will be effective only upon approval by the New York State Office of the Comptroller.

It is expected that contracts resulting from this RFA will have the following time period:

November 1, 2016 through October 31, 2018. Contracts will be a two year fixed term.

Continued funding throughout this two year period is contingent upon availability of funding and state budget appropriations. Discrete budgets are submitted for each year of the contract and funds awarded for year one cannot be rolled over and used in year two.

DOH reserves the right to revise the award amount as necessary due to changes in the availability of funding.

If an awarded applicant cannot provide the required contracting materials to the Department within 60 days of contract award, the Department reserves the right to withdraw the award and redistribute the funding to other responsible awardees.

A sample New York State Master Contract for Grants can be found in the Forms Menu once an application to this funding opportunity is started.

H. Payment & Reporting Requirements of Grant Awardees

1. The Department may, at its discretion, make an advance payment to not for profit grant contractors in an amount not to exceed 25 percent of the first year contract budget amount.

2. The grant contractor will be required to submit quarterly invoices and required reports of expenditures to the State's designated payment office (below) or, in the future, through the Grants Gateway:

   Office of Primary Care and Health Systems Management
   New York State Department of Health
   Corning Tower, Room 1695
   Empire State Plaza
   Albany, New York 12237

   Grant contractors must provide complete and accurate billing invoices in order to receive payment. Billing invoices submitted to the Department must contain all information and supporting documentation required by the Contract, the Department and the Office of the State Comptroller (OSC). Payment for invoices submitted by the CONTRACTOR shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with OSC's procedures and practices to authorize electronic payments. Authorization forms are available at OSC's website at: http://www.osc.state.ny.us/epay/index.htm, by email at: epayments@osc.state.ny.us or by telephone at 855-233-8363. CONTRACTOR acknowledges that it will not receive payment on any claims for reimbursement submitted under this contract if it does not comply with OSC's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

   Payment of such claims for reimbursement by the State (NYS Department of Health) shall be made in accordance with Article XI-A of the New York State Finance Law. Contractors will be reimbursed for actual expenses incurred as allowed in the Contract Budget and Work Plan.

3. The grant contractor will be required to submit the following reports to the Department of Health at the address above and, in the future, through the Grants Gateway:

   a. Narrative progress report;
   b. Expenditure report with narrative explanation;
   c. Voucher with documentation; and
   d. Final report.

   All payment and reporting requirements will be detailed in Attachment D of the final NYS Master Grant Contract.

I. Minority & Women-Owned Business Enterprise Requirements

Pursuant to New York State Executive Law Article 15-A, the New York State Department of Health ("DOH") recognizes its obligation to promote opportunities for maximum feasible participation of certified minority- and women-owned business enterprises and the

employment of minority group members and women in the performance of DOH contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" ("Disparity Study"). The report found evidence of statistically significant disparities between the level of participation of minority- and women-owned business enterprises in state procurement contracting versus the number of minority- and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that DOH establish goals for maximum feasible participation of New York State Certified minority- and women-owned business enterprises ("MWBE") and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, the New York State Department of Health hereby establishes a goal of **30%** as follows:

1) For Not-for Profit Applicants: Eligible Expenditures include any subcontracted labor or services, equipment, materials, or any combined purchase of the foregoing under a contract awarded from this solicitation.
2) For-Profit and Municipality Applicants: Eligible Expenditures include the value of the budget in total.

The goal on the eligible portion of this contract will be 15% for Minority-Owned Business Enterprises ("MBE") participation and 15% for Women-Owned Business Enterprises ("WBE") participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified MWBE firms). A contractor ("Contractor") on the subject contract ("Contract") must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract and Contractor agrees that DOH may withhold payment pending receipt of the required MWBE documentation. For guidance on how DOH will determine "good faith efforts," refer to 5 NYCRR §142.8.

The directory of New York State Certified MWBEs can be viewed at: https://ny.newnycontracts.com. The directory is found in the upper right hand side of the webpage under "Search for Certified Firms" and accessed by clicking on the link entitled "MWBE Directory". Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented.

By submitting an application, a grantee agrees to complete an MWBE Utilization plan as directed in Attachment #3 of this RFA. DOH will review the submitted MWBE Utilization Plan. If the plan is not accepted, DOH may issue a notice of deficiency.   If a notice of deficiency is issued, Grantee agrees that it shall respond to the notice of deficiency within seven (7) business days of receipt. DOH may disqualify a Grantee as being non-responsive under the following circumstances:

a) If a Grantee fails to submit a MWBE Utilization Plan;
b) If a Grantee fails to submit a written remedy to a notice of deficiency;

c) If a Grantee fails to submit a request for waiver (if applicable); or
d) If DOH determines that the Grantee has failed to document good-faith efforts to meet the established DOH MWBE participation goals for the procurement.

In addition, successful awardees will be required to certify they have an acceptable Equal Employment Opportunity policy statement.

J. Limits on Administrative Expenses and Executive Compensation

On July 1, 2013, limitations on administrative expenses and executive compensation contained within Governor Cuomo's Executive Order #38 and related regulations published by the Department (Part 1002 to 10 NYCRR – Limits on Administrative Expenses and Executive Compensation) went into effect. Applicants agree that all state funds dispersed under this procurement will, if applicable to them, be bound by the terms, conditions, obligations and regulations promulgated by the Department. To provide assistance with compliance regarding Executive Order #38 and the related regulations, please refer to Executive Order #38 website at: http://executiveorder38.ny.gov.

K. Vendor Identification Number

Effective January 1, 2012, in order to do business with New York State, you must have a vendor identification number. As part of the Statewide Financial System (SFS), the Office of the State Comptroller's Bureau of State Expenditures has created a centralized vendor repository called the New York State Vendor File.   In the event of an award and in order to initiate a contract with the New York State Department of Health, vendors must be registered in the New York State Vendor File and have a valid New York State Vendor ID.

If already enrolled in the Vendor File, please include the Vendor Identification number on the Application Transmittal Form (Attachment #1). If not enrolled, to request assignment of a Vendor Identification number, please submit a New York State Office of the State Comptroller Substitute Form W-9, which can be found on-line at:
http://www.osc.state.ny.us/vendor_management/issues_guidance.htm.

Additional information concerning the New York State Vendor File can be obtained on-line at: http://www.osc.state.ny.us/vendor_management/index.htm, by contacting the SFS Help Desk at 855-233-8363 or by emailing at helpdesk@sfs.ny.gov.

L. Vendor Responsibility Questionnaire

The New York State Department of Health recommends that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at http://www.osc.state.ny.us/vendrep/vendor_index.htm or go directly to the VendRep system online at https://portal.osc.state.ny.us.

Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672 or by email at ciohelpdesk@osc.state.ny.us.

Applicants should complete and submit the Vendor Responsibility Attestation (Attachment #2).

M. Vendor Prequalification for Not-for-Profits

All not-for-profit vendors subject to prequalification are required to prequalify prior to grant application and execution of contracts.

Pursuant to the New York State Division of Budget Bulletin H-1032, dated June 7, 2013, New York State has instituted key reform initiatives to the grant contract process which requires not-for-profits to register in the Grants Gateway and complete the Vendor Prequalification process in order for applications to be evaluated. Information on these initiatives can be found on the Grants Reform Website.

Applications received from not-for-profit applicants that have not Registered <u>and</u> are not Prequalified in the Grants Gateway on the application due date listed on the cover of this RFA cannot be evaluated. Such applications will be disqualified from further consideration.

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The Vendor Prequalification Manual on the Grants Reform Website details the requirements and an online tutorial are available to walk users through the process.

1. **Register for the Grants Gateway**

   On the Grants Reform Website, download a copy of the Registration Form for Administrator. A signed, notarized original form must be sent to the Division of Budget at the address provided in the instructions. You will be provided with a Username and Password allowing you to access the Grants Gateway.

   If you have previously registered and do not know your Username, please email grantsreform@budget.ny.gov . If you do not know your Password, please click the Forgot Password link from the main log in page and follow the prompts.

2. **Complete your Prequalification Application**

   - Log in to the Grants Gateway.   **If this is your first time logging in,** you will be prompted to change your password at the bottom of your Profile page. Enter a new password and click SAVE.

   - Click the *Organization(s)* link at the top of the page and complete the required fields including selecting the State agency you have the most grants with. This page should be completed in its entirety before you SAVE. A *Document Vault* link will become available near the top of the page. Click this link to access the main Document Vault page.

   - Answer the questions in the *Required Forms* and upload *Required Documents*. This constitutes your Prequalification Application. Optional Documents are not required unless specified in this Request for Application.

   - Specific questions about the prequalification process should be referred to your agency representative or to the Grants Reform Team at grantsreform@budget.ny.gov.

3. Submit Your Prequalification Application

- After completing your Prequalification Application, click the ***Submit Document Vault*** Link located below the Required Documents section to submit your Prequalification Application for State agency review. Once submitted the status of the Document Vault will change to *In Review*.

- If your Prequalification reviewer has questions or requests changes you will receive email notification from the Gateway system.

- Once your Prequalification Application has been approved, you will receive a Gateway notification that you are now prequalified to do business with New York State.

Vendors are strongly encouraged to begin the process as soon as possible in order to participate in this opportunity.

N. General Specifications

1. By submitting the "Application Transmittal Form" each applicant attests to its express authority to sign on behalf of the applicant.

2. Contractors will possess, at no cost to the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of this contract will possess the qualifications, training, licenses and permits as may be required within such jurisdiction.

3. Submission of an application indicates the applicant's acceptance of all conditions and terms contained in this RFA, including the terms and conditions of the contract. Any exceptions allowed by the Department during the Question and Answer Phase (see Section IV.B.) must be clearly noted in a cover letter attached to the application.

4. An applicant may be disqualified from receiving awards if such applicant or any subsidiary, affiliate, partner, officer, agent or principal thereof, or anyone in its employ, has previously failed to perform satisfactorily in connection with public bidding or contracts.

5. Provisions Upon Default

   a. The services to be performed by the Applicant shall be at all times subject to the direction and control of the Department as to all matters arising in connection with or relating to the contract resulting from this RFA.

   b. In the event that the Applicant, through any cause, fails to perform any of the terms, covenants or promises of any contract resulting from this RFA, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the contract by giving notice in writing of the fact and date of such termination to the Applicant.

   c. If, in the judgement of the Department, the Applicant acts in such a way which is likely to or does impair or prejudice the interests of the State, the Department acting on behalf of the State, shall thereupon have the right to terminate any

contract resulting from this RFA by giving notice in writing of the fact and date of such termination to the Contractor. In such case the Contractor shall receive equitable compensation for such services as shall, in the judgement of the State Comptroller, have been satisfactorily performed by the Contractor up to the date of the termination of this agreement, which such compensation shall not exceed the total cost incurred for the work which the Contractor was engaged in at the time of such termination, subject to audit by the State Comptroller.

V.   Completing the Application

A. Application Format/Content

Please refer to the Quick Start Guide for assistance in applying for this procurement through the NYS Grants Gateway. This guide is available on the Grants Reform website at: www.grantsreform.ny.gov/Grantees.

ALL APPLICATIONS SHOULD CONFORM TO THE FORMAT/CONTENT PRESCRIBED BELOW. POINTS WILL BE DEDUCTED FROM APPLICATIONS WHICH DEVIATE FROM THE PRESCRIBED FORMAT.

EACH PROJECT IN EACH REGION IS CONSIDERED ONE APPLICATION. ALL MATERIALS MUST BE SUBMITTED FOR EACH PROJECT IN EACH REGION. FOR EXAMPLE, AN APPLICANT THAT IS PROPOSING TO TRAIN RNs IN THE WESTERN, ROCHESTER AND CENTRAL REGIONS AND PROPOSING TO TRAIN LPNs IN WESTERN, ROCHESTER AND CENTRAL REGIONS WILL SUBMIT A TOTAL OF SIX APPLICATIONS. APPLICANTS MAY SUBMIT A MINIMUM OF ONE APPLICATION AND A MAXIMUM OF 100 APPLICATIONS.

1. Pre-Submission Uploads

The following attachments must be completed and uploaded with the application.

   a. Application Transmittal Form (See Attachment #1)
       The Application Transmittal Form should be used to provide the following information:
       i.   Applicant Information including name, address, vendor ID, charities status, contact person, and organization type;
       ii. Project information including project title, region, period, number of participants to be trained, and length of training; and
       iii. Collaborating Organization Information including name and type of organization
   b. Vendor Responsibility Attestation (See Attachment #2 and Section IV. L of the RFA); and
   c. MWBE forms (See Attachment #3 and Section IV. I. of the RFA).
   d. Year 2 Budget Forms (See Attachment #4)

2. Technical Proposal: Project Specific Questions (80 points maximum)

DO NOT INCLUDE ANY COST INFORMATION IN THE TECHNICAL PROPOSAL. INCLUDING COST INFORMATION IN THE TECHNICAL PROPOSAL MAY RESULT IN DISQUALIFICATION OF THE APPLICATION.

The following questions are to be answered in the format provided in the Grants Gateway. All questions require an answer. For questions that are not applicable to the

project being proposed, answer "Not Applicable". Some questions may allow and/or require documents to be uploaded.

Section 1: Project Summary (0 points)

1.   Project Summary – 0 points
Briefly summarize the proposed project, including all major activities that will be undertaken to meet the objectives of HWRI.

Section 2: Need For Training – Up to 29 points

2A. Need for Training (up to 16 points)
For at least one of the five areas listed below, identify the training need or needs which will be addressed by the proposed project, document the existence of such need or needs, and explain how the proposed project will meet such need. Applicants that cite local and regional employment trends will score higher than those who refer to national or statewide trends.

- Training in occupations with documented shortages
- Training for workers who have experienced job loss, are likely to experience job loss, or are recipients of public assistance due to changes in the public health or health care system
- Expanding educational capacity in shortage occupations
- Training for new job certification or licensing requirements
- Training for emerging technologies

In addition to the space provided in the Grants Gateway, applicants may upload up to three additional pages for this question.

2B. Integrated Care Management (Up to 3 pts)
Describe how the project will, in addition to meeting the needs identified in the response to Question 2A, provide training that promotes the development of new models of integrated care management.

2C. Managed Long Term Care (Up to 2 pts)
Describe how the project will, in addition to meeting the needs identified in the response to Question 2A, provide training in managed long term care.

2D. Culturally Competent Patient Centered Care (Up to 2 pts)
Describe how the project will, in addition to meeting the needs identified in the response to Question 2A, provide training in culturally competent patient centered care.

2E. Workforce Diversity (Up to 2 points)
Describe how the project will, in addition to meeting the needs identified in the response to Question 2A, provide training to increase awareness and understanding of health disparities, including how the project will promote increased diversity in the public health and/or health care workforce.

2F. Health Information Technology (Up to 2 pts)
Describe how the project will, in addition to meeting the needs identified in the response to Question 2A, provide training in effective use of health information technology.

2G. Telehealth (Up to 2 pts)
Describe how the project will, in addition to meeting the needs identified in the response to Question 2A, provide training in telehealth.

Section 3: Capability and Commitment of the Applicant to Implement the Project – Up to 20 points

3A. Description of Capability (Up to 7 points)
Describe the applicant's ability to train the target population, and upload letters of support from each collaborating or subcontracting organization that include the information required in Section C.III.2.a of the Request for Applications (RFA).

3B. Description of Past Training Success (Up to 5 points)
Describe the applicant's experience in conducting training projects, including projects previously funded by HWRI, either in the area being proposed or other areas, and demonstrate measurable outcomes for past training. Include a description of any implementation challenges and why similar challenges will not occur for the proposed project. See Section C.III.2.b of the RFA for examples of measurable outcomes.

In addition to the space provided in the Grants Gateway, applicants may upload one additional page for this question.

3C. Ability to Meet Contract Requirements (Up to 3 points)
Describe how the project will be implemented within three months of contract execution, including all planning activities such as curriculum development, participant selection, or structuring the training to reflect the academic calendar. Show that the organization's corporate structure is committed to the project and that there is an administrative structure that is adequate for the scope of the project, and include a brief description of staff responsible for the administration of the project and complying with contractual requirements.

In addition to the space provided in the Grants Gateway, applicants may upload one additional page for this question.

3D. Labor Organization Support (Up to 3 points)
Applicants whose project will train union workers represented by labor organizations should upload letters of labor union concurrence from relevant bargaining agent(s) or, if there are no labor organizations representing the proposed participants at the health care facilities, state such fact.

3E. Leverage Other Resources (Up to 2 points)
Describe plans of applicant or collaborating organizations to leverage other resources to make the project more cost effective, including the types of resources. Do not include specific costs in the response.

Section 4: Training Strategy – Up to 16 points

4A. Selection of Participants (Up to 4 points)
Describe the process to select training participants as well as any other start-up activities such as curriculum development and the use of an assessment tool or process.

4B. Proposed Curriculum (Up to 4 points)
Describe the proposed curriculum and how it provides participants with the skills that meet the employers' needs.

4C. Length of Training (Up to 4 points)
Describe the length of training, its appropriateness for the curriculum being presented, and how it will provide the targeted skills to result in job placement.

4D. Plans to Monitor Participants (Up to 4 points)
Describe the plans to monitor the progress of training participants while in training, including any mentoring, tutoring or counseling to be provided.

Section 5: Work Plan and Performance Measures – Up to 15 points

In the Grants Gateway format, provide a detailed overview of the project objectives, tasks and performance measures that are consistent with the objectives of the RFA. Please refer to Attachment 5 for a snapshot of entry instructions for the work plan. The work plan should identify:

5A. Objectives, Tasks and Deliverables (Up to 4 points)
Insert the objectives, tasks and performance measures that will be achieved during the length of the project.

5B. Timeline (Up to 3 points)
Include a timeline, within each task, for initiating and completing the task that can be assessed for reasonableness.

5C. Performance Measures (Up to 8 points)
For training projects focused on upgrading or enhancing skills, such performance measures should, at a minimum, identify the number of participants who will enter training, the number who will complete training, and the number who will be hired or retained after successfully completing training.

For projects involving the expansion of educational capacity projects, such performance measures should include, at a minimum, the number of current slots, the number of qualified candidates turned away, the number of slots to be created by the expansion, and the number of participants who will enter and complete training as a result of the expansion.

Successful applicants may be asked to modify work plans prior to initiation of the contract to address issues identified during the review process and the amount of funding awarded.

3. Cost Proposal (20 points maximum)

For **Year 1** of the project, applicants will be required to:
- Complete the expenditure based budget template in the Grants Gateway, which includes amounts requested for each budget line and a narrative justification of the purpose of each budget line and how it was derived.

For **Year 2** of the project, applicants will be required to:
- Complete the Year 2 Budget Forms located in the Pre-Submission Uploads section of the Grants Gateway (Attachment 4); and

- Be sure to include the budget justification detailing how the applicant arrived at each of the budget lines included in the Excel spreadsheet.

Discrete budgets are submitted for each year of the contract and funds awarded for Year 1 cannot be rolled over and used in Year 2.

All costs must be related to HWRI contractor activities, and adhere to the following guidelines:

a. Two year budget totals must not exceed the total regional amount as identified in Table 1 on page 2 of the RFA.

b. Differentiate between start-up costs and ongoing costs. If there are start-up costs or ongoing costs that the applicant proposes be paid for by alternative funding, this must be specified.

c. The amount requested in each budget year should be reasonable and cost effective, relate directly to the activities described in the application, and be consistent with the scope of services outlined in the RFA.

d. Eligible costs include, but are not limited to:

    i. Personal Services
        1. Salary and Fringe for the following types of personnel:
            a. Project Director
            b. Support Staff
            c. Training Coordinator
            d. Grant/Fiscal/MIS Staff
            e. Training Assessment Staff
            f. Instructors
            g. Curriculum Developer
            h. Counselor
    ii. Non-Personal Services
        1. Contractual Expenses
        2. Travel/Transportation
        3. Equipment
        4. Space/Property Expenses
        5. Operating Expenses
            a. Tuition/Fees
            b. Lost Staff Time
            c. Subsidies to Offset Wage Reduction or UIB
            d. Training Supplies/Equipment
            e. Dependent Care
            f. Transportation
            g. Training Space Rental
        5. Other

e. Ineligible costs include:
- Instruction and tuition requested for the same participants
- Lost Staff Time or Wage Subsidies that exceed the number of hours in training

- Fringe benefits for Lost Staff Time or Wage Subsidies
- Dependent Care request while participant is in training during normal work hours
- Professional licensure fees (examination fees to obtain the professional license *are* eligible)
- Purchase of major pieces of depreciable equipment, or remodeling or modification of structures
- Instruction costs related to in-service training

f. All budgeted positions should be consistent with the proposed services. The budget justifications must delineate how the percentage of staff time devoted to this initiative has been determined, provide a detailed description of role, responsibilities and experience, and describe how the staffing structure will support the activities of the proposed project. For partially funded positions, the percent effort being requested should be reasonable for the responsibilities being proposed in the project.

The budget justifications will not be used in scoring the application, but will be used for determination of eligible costs.

g. All subcontracting or consultant arrangements should include the contractual amounts and methodologies.

h. Budgeted items should be justified and fundable under state and federal guidelines.

i. Funding requested for administrative and management costs should adhere to the following guidelines:

   i. Indirect overhead costs are limited to a maximum of 10% of total direct costs.
   ii. Funds requested may NOT be used to supplant resources supporting existing services or activities.
   iii. Ineligible budget items will be removed from the budget prior to contracting.
   iv. Ineligible items are those determined by Department personnel to be inadequately justified in relation to the proposed project or are not fundable under existing state and federal guidance (OMB circulars). The budget amount requested will be reduced to reflect the removal of the ineligible items.
   v. Funding may support a portion of the overall organizational structure to an extent that it allows the funded applicant to implement project activities. This includes funding for administrative staff, supervisors and support personnel, and other-than-personnel costs such as a share of space, supplies, telephone, basic equipment such as computers and printers and other expenses associated with project implementation and service delivery.

B. Freedom of Information Law

All applications may be disclosed or used by DOH to the extent permitted by law. DOH may disclose an application to any person for the purpose of assisting in evaluating the application or for any other lawful purpose. All applications will become State agency records, which will be available to the public in accordance with the Freedom of Information Law. **Any portion of the**

application that an applicant believes constitutes proprietary information entitled to confidential handling, as an exception to the Freedom of Information Law, must be clearly and specifically designated in the application. If DOH agrees with the proprietary claim, the designated portion of the application will be withheld from public disclosure. Blanket assertions of proprietary material will not be accepted, and failure to specifically designate proprietary material may be deemed a waiver of any right to confidential handling of such material.

C. Review and Award Process

Applications meeting the guidelines set forth above will be reviewed and evaluated competitively by the New York State Department of Health. Applicants failing to provide all response requirements or failing to follow the prescribed format may be removed from consideration or points may be deducted.

Each application will be reviewed and scored competitively within the region in which funding is requested. See Table 1 on page 2 for a listing of regional funding levels and counties included in each region. The region is defined by either the facilities with workers to be trained or the county of residence for laid off workers to be trained. Applicants proposing to train workers from more than one facility where those facilities are in different regions must submit separate applications for each region.

Separate teams will review the Technical and Cost Proposals.

1. Technical Evaluation

Applicants most likely to be selected for funding will be those that best address the following technical criteria, for up to 80 points:

- Need for Training (maximum 29 points)
- Capability and Commitment of the Applicant to Implement the Project (maximum 20 points)
- Training Strategy (maximum 16 points)
- Work plan and Performance Measures (maximum 15 points)

2. Cost Evaluation

Applicants most likely to be selected for funding will be those that present a budget that, within a training type and region, has the lowest cost, for up to 20 points.

A cost evaluation team will evaluate each proposed project in its proposed region. The evaluation will be totally independent of the technical proposal evaluation; the cost evaluator will not participate in the review of the technical proposal.

Projects meeting the minimum requirements of the cost proposal will be assigned to a training type as defined in Table 2, and a cost score will be computed for each training type in each region.

For example, all projects proposing to train new LPNs (training type 3) in Western NY will be rated against all other new LPN projects in Western NY only. The cost scores are calculated based on the cost per participant over the life of the request. For a two year project, this will be the full two year cost divided by total number of trainees trained during the two years.

Cost Evaluation Score = (a/b)*20 where:
a = Lowest project per participant cost within the region and training type; and
b = Cost per participant within region and training type for the project being scored

Number	Type of Training (Skills to be Trained In)
	Table 2 **Training Types for Cost Evaluation**
1a	Nurse specialty, skill enhancement of short duration
1b	Nurse specialty, skill enhancement of longer duration
2	New C.N.A.
3	New LPN
4	New associate level RN (2-3 year training/associate of science in nursing (ASN)
5	New Bachelor of Science in Nursing (BSN); four year program
6	New mid-level practitioners: nurse practitioner (NP), physician assistant (PA), or nurse midwife (NMW), or other masters prepared nurses.
7	Nurse leadership
8a	Computer skills of short duration (across job titles)
8b	Computer skills of longer duration (across job titles)
9	Medical records, billing, coding, financial
10	Clerical, secretarial, ward clerk, unit secretary other office
11	Clinical/support: technicians
12	Clinical/support: technologists
13	Clinical/support: e.g., PCA, medical assistant, phlebotomist
14	Clinical/support: e.g., support assoc., food service, housekeeper, transport aide
15	Clinical/support: e.g. therapists – occupational, physical, respiratory, speech
16	Foreign language; medical interpretation; ESL
17	Home health: home health aide; personal care aide; home attendant
18	Long term care skill enhancement, e.g., gerontology, palliative care, Alzheimer's /dementia care; LTC resident assistant.
19	Mental health: direct care generalist
20	Substance abuse: CASAC, counselor
21	Social services: e.g., case worker, psycho-social technician, community health worker, CSW, outreach advocacy
22	Dental hygienist/assistant
23	Emergency: infectious/hazardous materials response, disaster readiness
24	Emergency: EMT, paramedic
25	Expansion of educational capacity
26	Culturally competent care (across job titles)
27	Team based interdisciplinary care (may train across job titles)
28	Care coordination and case management (may train across job titles)
29	Non health care

If variation in length of training within a training category exceeds a reasonable amount for cost grouping purposes (e.g., nurse leadership trainings are one/two weeks in length for some projects and six months in length for others within the region), the Department may split the group into two groups, one of longer and one of shorter duration.

3. Total Score

The technical and cost scores for each project and region will be summed for each reviewer for each project in each region, and an average total score will be calculated. Projects with an average total score of 70 or above (passing score) will receive an award up to the amount requested for eligible costs.

In regions where the eligible costs for projects with passing scores are equal to the amount

available, awards will be made in the amount of eligible costs.

In regions where the aggregate eligible costs for projects with passing scores exceed the regional amount available shown in Table 1 on page 2, awards will be calculated in a multi-step process as follows. The calculation will begin with the initial award amounts for each region listed below.

Initial Award Amount for Each Region for Two-Year Period							
Western	Rochester	Central	Utica/ Watertown	Northeastern	Northern Metropolitan	New York City	Long Island
$70,000	$90,000	$70,000	$15,000	$70,000	$85,000	$500,000	$175,000

Projects with eligible costs up to the initial award amount will be awarded the smaller of their eligible costs or the initial award amount. Projects with eligible costs above the initial award amount will be awarded the initial amount plus an additional percentage of any remaining funds (determined by the amount of funds remaining divided by the amount of eligible project costs remaining) until all regional funds have been awarded. If, after applying the initial award amount to projects with passing scores, the aggregate award amount still exceeds the amount available, the initial award amount will be reduced in $10,000 decrements until all projects are funded and the amount available is not exceeded.

Applications with minor issues (missing information that is not essential to timely review and would not impact review scores) MAY be processed, at the discretion of the State, but all issues need to be resolved prior to time of award. An application with unresolved issues at the time award recommendations are made will be determined to be non-responsive and will be disqualified.

If changes in funding amounts are necessary for this initiative or if additional funding becomes available, funding will be modified and awarded in the same manner as outlined in the award process described above.

4. Debriefing Requests

Once an award has been made, applicants may request a debriefing of their application. Please note the debriefing will be limited only to the strengths and weaknesses of the subject application and will not include any discussion of other applications. Requests must be received no later than fifteen (15) business days from date of award or non-award announcement.

To request a debriefing, please send an email to Susan Mitnick at HWRI@health.ny.gov. In the subject line, please write: *Debriefing request – Health Workforce Retraining Program/Initiative.*

In the event unsuccessful applicants wish to protest the award resulting from this RFA, applicants should follow the protest procedures established by the Office of the State Comptroller (OSC). These procedures can be found on the OSC website at http://www.osc.state.ny.us/agencies/guide/MyWebHelp.

VI.   Attachments

Please note that certain attachments are accessed in the "Pre-Submission Uploads" section of an online application and not included in the RFA document. In order to access the online application and other required documents such as the attachments, prospective applicants

must be registered and logged into the NYS Grants Gateway in the user role of either a "Grantee" or a "Grantee Contract Signatory".

*Attachment 1:   Application Transmittal Form
*Attachment 2:   Vendor Responsibility Attestation
*Attachment 3:   Minority and Women Owned Business Enterprise Required Forms
*Attachment 4:   Year 2 Budget Forms
Attachment 5:   General Work Plan Instructions

*These attachments are located/included in the Pre-Submission Upload section of the Grants Gateway on line application.

ATTACHMENT # 5

Gateway Work Plan Instructions

Please refer to Section 6.2.10.2 – Grantee Defined Work Plan of the Grantee User Guide (available at: http://grantsreform.ny.gov/Grantees and clicking on "Grantee User Guide" in the Quick Links Menu) for instructions on how to complete the Work Plan.

Below is a quick summary on completing the on line Work Plan:

- Click on the Work Plan Overview Form and complete all the mandatory fields. All the fields on the Work Plan Overview form are mandatory. Be sure to Click on the SAVE button after all information is entered.

- Click on the Objectives link to enter an Objective for this project. Be sure to Click on the SAVE button after all information is entered.

- After you save the Objective, hover over the Forms Menu and click on the Tasks link to enter task(s) for the Objective you created. Enter all the required information and click on the save button on the Tasks screen.

- Hover over the Forms Menu and click on the Performance Measure link to enter Performance Measure(s) for the Task(s) you created.

- Enter all the required information and click on the save button on the Performance Measure screen.

- Once one set of Objectives, Tasks, and Performance Measures are complete, you can add a second (or more) set. Click on the Add Button. Note: The system will allow adding more than one objective if not restricted by Funding Agency.

- Once a second set is created, you can toggle between the two to work on them by clicking the dropdown with the Go button (this will appear after the second set is created).