

RFA # 17842/ Grants Gateway # DOH01-HWRI2-2019

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

QUESTIONS AND ANSWERS

Questions below were received by the deadline announced in the RFA. The NYS Department of Health (DOH) is not responsible for any errors or misinterpretation of any questions received.

The responses to questions included herein are the official responses by the State to questions posted by potential bidders and are hereby incorporated into the RFA # **17842**. In the event of any conflict between the RFA and these responses, the requirements or information contained in these responses will prevail.

NUMBER	QUESTION	ANSWER
ELIGIBLE ORGANIZATIONS		
1.	I just want to verify, are local health departments eligible to apply?	Yes, if the applicant meets all minimum eligibility requirements listed in Section II.B. p.5 of the RFA.
2.	We represent over 1,000 job titles and many of them in health care. Our union education fund is not solely an educational institution or strictly health worker union. Can we still apply? We have multiple joint labor management committees throughout HHC across the 5 boroughs as well. Perhaps we can apply in partnership with them.	Yes, if the applicant partners with health care facilities that have workers in need of training and meet all other eligibility requirements listed in Section II.B. p.5 of the RFA.
3.	I'm asking for clarification on the classification of "educational institution" regarding organizational eligibility. My organization is a workforce development nonprofit that provides trainings, reskilling/upskilling, and is considered a school on <i>LinkedIn</i> . Would we qualify as eligible for this RFP based on that information?	The statutory definition of an Educational Institution is: Any organization that provides education or training to health care workers would generally be deemed eligible. The applicant must partner with health care facilities that have workers in need of training and meet all other eligibility requirements listed in Section II.B. p.5 of the RFA.
4.	Would The XYZ be eligible to apply for this opportunity?	Yes, if the applicant meets all minimum eligibility requirements listed in Section II.B. p.5 of the RFA.
5.	The College of New Rochelle is a unique institution. Our main campus is in New Rochelle but we have other campuses in Brooklyn, Harlem, and the Bronx where much of our healthcare training takes place. Can we apply as a New York City Region or do we have to stay with Northern Metropolitan?	A separate application must be submitted for each training program(s) in each region conducting the training. The region in which funding is to be requested is determined by: the county of the employer with the participants to be trained, or the county of residence of laid-off workers to be trained. See Section I.B. p.4 of the RFA.
6.	Are community based, OASAS-licensed, educational institutions that provide Credentialed Alcoholism and Substance	Yes, if the applicant meets all minimum eligibility requirements listed in Section II.B. p.5 of the RFA.

	Abuse (CASAC) training to behavioral health care workers eligible to apply for the funding?	
7	In regard to Section II. Who May Apply; Sub-Section A. Eligible Applicants: Are providers licensed by the Office of People with Developmental Disabilities eligible to apply?	Yes, if the applicant meets all minimum eligibility requirements listed in Section II.B. p.5 of the RFA.
8.	Can a consortium apply for the grant? If that consortium is statewide, how would the funding work and would we need to apply separately for each institution in the consortium?	No, A consortium would not be eligible for funding as per RFA Section II. Who May Apply, A. Eligible Applicants.
9.	Section II A. Eligible Applicants- “Preference will be given to geographic areas and organizations that have experienced or are likely to experience job loss because of changes in the health care system.” How will this preference factor into the review process? Will additional points be given, and if so, how many?	Applicants that identify specific job reductions or system transformation affecting the training participants in their description of how the proposed project will address training needs will score higher than those who refer to generalized threat of reductions or transformation. See Section I.B p.3-4 for the intent of this RFA.
10.	Minimum Eligibility 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. Does an online education company that focuses on competency based, healthcare workforce development solutions with partners in New York meet the eligibility requirement? Can we submit a joint response with a New York based hospital/healthcare partner?	Yes, if the applicant partners with health care facilities that have workers in need of training and meet all other eligibility requirements listed in Section II.B. p.5 of the RFA.
11.	Can an organization apply to both the HWRI (NYS DOH RFA #: 17842) and the Ladders to Value RFP (1199)?	All applicants must meet all minimum eligibility requirements listed in Section II.B. p.5 of the RFA #17842. The requirements of the <i>Ladders to Value</i> RFP are not known to the Department of Health.
12.	Our question refers to Section II a. of the RFA (page 5). Our organization, XYZ, provides job training, including preparation for employment in healthcare (www.XYZHealthcare.org). Does our organization fit your definition of “Educational institutions” as listed below? Are we eligible to apply? If not, would we be eligible to partner with an applicant that fits one of categories listed below?	Yes, if the applicant partners with health care facilities that have workers in need of training and meet all other eligibility requirements listed in Section II.B. p.5 of the RFA.
13.	Are 501c3 registered non-profit organizations, incorporated in the state of New York eligible to apply? We are a non-profit training,	Yes, if the applicant partners with health care facilities that have workers in need of training

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	education and workforce development organization. Are we eligible?	and meet all other eligibility requirements listed in Section II.B. p.5 of the RFA.
14.	Will IDD (Intellectual and Developmental Disability) agencies be considered eligible for this opportunity?	Yes, if the applicant meets all minimum eligibility requirements listed in Section II.B. p.5 of the RFA.
ELIGIBLE TRAINING ACTIVITIES		
15.	We have an RN to BS program with low attendance, nurses prefer to take their classes online. We would like to revise the curriculum to an online format and offer tuition scholarships to students. Is this an appropriate funding request? Funding would support: The consultant to revise the curriculum, the company that transitions the material to the online format, recruitment expenses, scholarships.	All funding is contingent upon an award made by the Department. An on-line training program is an acceptable HWRI project if the proposed project meets all minimum eligibility requirements listed in Section II.B.p.5 of the RFA as well as the eligible costs in Section V.A.p.25-26 of the RFA. Tuition assistance provided by the applicant must be made to the approved educational institution, not the training participant.
16.	We are a current grantee of the Health Workforce Retraining Initiative, providing CASAC training and re-training for behavioral healthcare workers. We are also very interested in applying for the new round of funding under the newly issued RFA and are seeking guidance. Namely, while there is still a documented occupational shortage of behavioral health care workers to deal with the growing opioid epidemic, we did not see CASAC training specifically listed as preferred occupations in the RFP. Would that exclude our application altogether, or diminish our chances of receiving funding to provide CASAC training to behavioral healthcare workers?	Applicants training participants other than the disciplines listed in Section II.C. p.6 of the RFA are not excluded from applying.
17.	Is CASAC training an approved project under the RFP to meet the documented shortage of workers in the behavioral health care field?	CASAC training is an eligible project if the applicant provides documentation of the need for training. See section V.A.2. p.22 of the RFA.
18.	If we are training for an anticipated shortage, do the trainees already have to be considered to be health care workers or can we train those with no prior health care experience?	The participants must have prior health care/public health industry experience. See Section I.A and I.B. on p. 3 of the RFA.
19.	What is the distinction around in-service training? For example, if we proposed to provide a chronic disease management program to existing home care workers as a new skills upgrade as per your example, but they are currently working in the field, would that be allowable?	A skills development course which is not currently mandated or is a new mandate required by law enacted since January 1, 2016 is allowed. See section III.B. p.8 of the RFA.
20.	Would ESOL classes be an allowable expense under Expansion of Educational Capacity if we were offering contextualized	Yes, if the applicant meets the minimum eligibility requirements listed in Section II.B. p.5 of the RFA and in Section III.C.1.c p.9 of the RFA.

	classes to monolingual Spanish speaking home health aides?	
21.	Regarding the RFA 17842, the XYZ is in the process of developing a training program for Certified Nursing Assistants. We are training 8 students at a time and hope to run the training on a quarterly basis, for a total of 32 students trained to be a CNA on an annual basis. The training will be open to the community and the ___XYZ_ will hire from the pool of students completing the certification. My question is, if the program is in process, are we still eligible to apply for the RFA? Are the number of people we will be training sufficient to apply for funding?	Yes, if the applicant meets the minimum eligibility requirements listed in Section II.B. p.5 of the RFA. The number of participants being trained directly correlates to the cost of the training program. See Section V.C.3. p.28 of the RFA. Funds are available only for the training and retraining of existing and prior health and public health industry workers. See Section I.A and I.B. on p. 3 of the RFA.
22.	Does training have to be done by an outside trainer?	No.
23.	Can in-house trainers be used?	Yes.
24.	Activities eligible for funding under HWRI training projects may include, but are not limited to those described below. In-service training provided by a staff development department will not be funded including training required by accreditation organizations e.g. The Joint Commission (JCAHO). PLEASE NOTE: Training for new mandates required by laws enacted since January 1, 2016 are eligible for funding. Is BSN in 10 legislation covered under this RFA?	Training for RNs to acquire a BSN within 10 years of their initial licensure is an eligible training program under this RFA.
25.	Will this program fund the re-training of Direct Support Professionals (DSPs) working in long term care residences working with individuals with intellectual and developmental disabilities (I/DD)?	Yes, if the applicant meets all minimum eligibility requirements listed in Section II.B. p.5 of the RFA.
26.	Question regarding: II. Who May Apply, C. Preferred Application Requirements We do not see any disciplines listed that are related to dental services. Would the training of dental assistants to become certified assistants be an eligible training need?	The training of dental assistants to become certified assistants is an eligible training need if the applicant provides documentation of the need for training (see Section V.A.2 of the RFA. All applicants must meet the minimum eligibility requirements listed in Section II.B. p.5 of the RFA
27.	This skilled nursing facility will be proposing a retraining program to meet the new job requirements of existing positions, related to	Lost Staff Time is an eligible expense when it is used to cover the wages of a worker brought in at an additional expense to replace

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	the changing health care market. We plan to hire consultants to work with staff on site. Could this funding be used to pay for over-staffing our direct care positions while other staff attend training?	an employee while they attend training during their work hours. All effort should be made by the employer to enable participants to attend during their normal work hours.
28.	Behavioral health positions were left out of the list of shortage occupations, such as mental health counselor or behavioral health technician. Does that mean the state does not view these occupations as having shortages? Other occupations for which there is a shortage, such as medical assistants and community health workers, where also left out. Does that mean the state does not consider these as shortage areas?	Applicants training participants other than the disciplines listed in Section II.C. p.6 of the RFA are not excluded from applying. See Section V.A.2A. p.22 of the RFA.
29.	Can grant funding be used to reimburse training expenses that occur in 2018 or must the training expenses be prospective only (2019-2020)? We are planning to begin conducting much-needed training for our mental health practitioners this fall (2018).	Retrospective expenses are not reimbursable.
30.	Is Medical Assistant Training an eligible training program? I see that it is not listed as a preferred occupation, but it is a growth occupation in our region.	Applicants training participants other than the disciplines listed in Section II.C. p.6 of the RFA are not excluded from applying.
31.	Certified Nurse Assistant is listed as a shortage area, but Patient Care Technician, which is a CNA plus EKG and Phlebotomy. Should PCT be categorized as CNA? Or as a non-shortage area according to the state's list.	Only the disciplines listed in Section II.C. p.6 of the RFA are considered preferred application requirements. Disciplines/titles should not be recategorized.
32.	We are an approved DOH Home Health Aide Training Program; can we use these funds for our existing workforce training program?	Yes.
33.	Do trainees have to be current workers in the healthcare field? Or can trainees be prospective workers in a healthcare occupation with documented shortages?	The participants must have prior health care/public health industry experience. See Section I.A and I.B. on p. 3 of the RFA.
34.	If we would like to propose 3 different certification training programs for RNs do we need to submit 3 separate applications?	Yes.
35.	Can these funds be used to conduct and English as a Second Language Program?	Yes.
36.	If we would like to seek training for CT, MRI and Ultrasound Technologists do we need to submit separate applications? If there are different training programs we would like to offer CT technologists do we need to submit separate applications?	Yes, a separate application must be submitted for each individual training project.

37.	We are a hospital that owns medical practices, the employees in these practices are not hospital employees. Would we be able to propose to offer a training course for both our hospital employees and practice employees in the same application? If not, could we propose this in 2 separate applications?	A separate application must be submitted for each training program. If the training being offered is the same training for the hospital employees and the practice employees and they are in the same region then only one application is required.
38.	If a project is delivering the same training program with the same curriculum to two different target populations, is this one project or two projects?	This question does not provide enough information to offer an adequate response.
39.	Is it allowable to have all curriculum outlined and a portion of the curriculum implemented by the 3- month start-up period with additional curriculum development beyond the 3-month period for purposes of updating curriculum in alignment with current health care changes?	No. Curriculum development must be completed within three months of the contract execution.
40.	On page 5, Section II, B. Minimum Eligibility Requirements, #4, the RFP states "Applicants must identify a need for training in one or more of these areas for which they propose to train..." It goes on to describe what should be provided. Our question is in regard to the individuals attending training. Do they need to be currently employed in a healthcare profession or can they be unemployed and seeking employment in healthcare fields?	The participants must have prior health care/public health industry experience. Refer to Section I.A on page 3 of the RFA, where it states: "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".
41.	Are agencies able to hire subcontractors as part of program development and execution?	Yes. See Section III.C.2.a p.9-10.
42.	Are we allowed to partner with other organizations?	Yes. See Section III.C.2.a p.9-10.
43.	Are Direct Support Professionals (DSP) who work with individuals with developmental disabilities considered to be home health aides as mentioned in this grant? DSP's already provide personal care and light household duties to individuals.	No.
44.	I was not able to find anywhere in the RFA that specifically indicated whether or not we are allowed to apply for funding for a HWRI program that is currently being funded (with a new cohort of participants)? Since the last (2017-2018) funding cycle included 2 years, it is not typically enough time for our participants to complete our program. Most students complete the program between 2-3 years. I wanted to know if I can apply to continue the same program.	Yes, applications may be submitted for continuing training programs.

45.	The RFA does not reference specific priority areas for training projects. The RFA does, however, reference the need for 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 value and outcome payment systems.” Are these the priority areas for DOH under this RFA? Does every project need to address one of these areas?	The workforce needs list addressed in Section I.B. p.3 of the RFA is not exclusive. The applicant should demonstrate the need for the proposed training.
46.	The first bullet references the need to “maintain current employment including meeting new job or certification/licensing requirements” (emphasis added). Then, on page 5, under section (B)(4) (Minimum Eligibility Requirements), it says applicants must meet a need for training in one of the listed items, including “provide training for new job certification or licensing requirements.” Then, on page 7, under section (B)(6) (Skill Development and Enhancement), it seems to imply that new licensing or certification is not a minimum requirement to be considered as a skills enhancement project. The question is, is a project that provides training to assist an employee with meeting current employment requirement but does not lead to new job certification or license eligible for consideration and will it be reviewed?	A project that provides training to provide an employee with new skills to meet the new job requirements of existing positions, including meeting new job or certification/licensing requirements will meet the minimum eligibility requirements in Section II.B.4. of the RFA.
47.	If the applicant has several years’ experience conducting a home health aide training program in one location/county, is funding for the opening of a training program in another location/county that is in another region (as defined by the RFA) contingent upon any additional approval/licensing regulatory requirements being met?	The applicant must be able to demonstrate the ability to implement training within three months of contract execution, including meeting any approval/licensing regulatory requirements.
REGIONAL AVAILABLE AMOUNTS /MAXIMUM REGIONAL AWARDS		
48.	On page 4, table 2 of the RFP, the “Maximum Regional Award Amounts,” I understand this to mean that each application in that region	That is correct. Table 1. designates the total amount of funding available for the two-year period to each of the eight regions. Table 2.

	can be up to the maximum amount. And we can submit several applications in the same region up to the available amount in table 1. In summary, we are able to submit several projects within the same region up to the table 1 amounts as long as the individual applications do not exceed the amounts in table 2. Given it is the same applicant submitting all the applications. For example, if we are applying in Western, we can submit three applications (EMR, BSN, LPN) for the \$67,784 each.	specifies the maximum amount that will be awarded for each application within that region. An application may be submitted for less than the maximum award amount(s) per region as well.
49.	On page 4, Section I, B. Availability of Funds, Table 2, the RFP states that for the Northeastern Region the max award amount is \$63,662. Is this the total amount to be awarded per year, for a total award of \$127,324, or is \$63,662 the total amount for the two-year period?	The Maximum Award Amount(s) is the total amount of funding per application in that region for two years.
50.	Is the maximum funding levels by region and regional award amounts per year or over the 2 year period? For example, Northern Metropolitan is \$861,535 for the region and \$109,920 for the award amount. Are those amounts per year or for the two years?	Two-year.
51.	The maximum award amount in some regions is insufficient for some cohort programs. For instance, the maximum award for some regions will not support one nurse practitioner program. Can the maximum award be increased for shortage areas?	No.
52.	Is the region amount \$1.5...per provider for the region or per submission?	Table 1. designates the total amount of funding available for the two-year period to each of the eight regions. Table 2. specifies the maximum amount that will be awarded for each application within that region. An application may be submitted for less than the maximum award amount(s) per region as well.
53.	Page 25, 3.a. Two-year budget totals must not exceed the maximum regional award amount as identified in Table 2 on page 4 of the RFA. To confirm, are the amounts identified in Table 2 on page 4 of the RFA for two years or for one year? For example, is Utica/Watertown limited to a maximum award of \$8,015 for two years or \$16,030 for two years?	The Maximum Regional Award Amounts are for two years, as is the proposed project(s).
54.	On page 4, Table 2, Maximum Regional Award Amounts: is this the maximum award amount per application for each region for a two-year period? For example, in the RFA for this initiative issued in 2016, the Initial Award	Yes, that is correct.

	Amount for New York City, for a Two-Year Period was \$500,000. In this RFA, Table 2 reflects a figure of \$1,588,115. Are we to read this as the maximum award per application for New York City would be \$1,588,115 over a two-year period?	
COST PROPOSAL		
55.	Submitting request under Career Advancement. (RN to BSN program) can the budget include: personnel, tuition/fees, and tutoring?	Yes. See section V.A.3. p.25 of the RFA.
56.	Is tuition support for participants an allowable expense?	Yes. See section V.A.3. p.26 of the RFA.
57.	Can you define "equipment" in non-personal services (page 25)?	Equipment which will be used for training purposes would be an allowable expense. Ineligible costs include the purchase of major pieces of depreciable equipment. See Section V.A.3. p.26 of the RFA.
58.	Can we buy new training equipment for our labs so we can train participants in new technology/techniques?	Equipment which will be used for training purposes would be an allowable expense. Ineligible costs include the purchase of major pieces of depreciable equipment. See Section V.A.3. p.26 of the RFA.
59.	Is placement support for externships an allowable expense?	No.
60.	On page 27, d (II) it states that Administrative Costs including indirect costs are limited to a maximum of 15% of each project. This does not include salaries and benefits for staff who directly work on the projects, correct?	Yes. See Section V.A.3.a)-d) p.26-27 of the RFA.
61.	Ineligible costs: Promotional/marketing/advertising costs are excluded. Are outreach materials to recruit participants allowable costs?	No. See Section V.A.3d.p. 26, ineligible costs of the RFA.
62.	Administrative costs: Administrative costs are limited to a maximum of 15%. Do administrative costs exclude program personnel such as teachers, tutors, case managers, etc.?	Yes. See Section V.A.3.a)-d) p.26-27 of the RFA.
63.	Is minor (\$5,000) classroom renovation an eligible expense?	No. See Section V.A.3d.p. 26, ineligible costs of the RFA.
64.	Can postage charges be included in the grant application as eligible costs for marketing purposes?	No. See Section V.A.3d.p. 26, ineligible costs of the RFA.
65.	The RFA specifies that "meeting space owned by the applicant or space at facilities not owned by the applicant but where training participants are employed" are not eligible costs. If a facility owns a meeting space but	A facility/program that has participants in a training program and owns a meeting space may not charge the project for the meeting space if participants from other facilities also attend the training. The facility/program may

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	opens up the training to training participants beyond itself (Hospital X hosts a training but opens the training to employees of Hospitals A, B, and C also), is the meeting space an eligible cost?	not charge for meeting space for other facilities at another time if they are holding the same training for participants from their own facility at any time.
66.	Will supplies such as books, training materials such as DVDs be covered?	Yes. See Section V.A.3c. p.25 eligible costs of the RFA.
67.	We are considering renting an additional new training space that could be used for both recruitment and training of new home health aides. Would the rental of such a space be an eligible expense?	Yes. See Section V.A.3c. p.25 eligible costs of the RFA.
68.	Are other recruitment costs eligible?	No. See Section V.A.3d.p. 26, ineligible costs of the RFA.
69.	Can the grant cover the cost of training that has already been planned and/or is scheduled for a specific future date? One program under consideration has ongoing training sessions, and we would like to apply to cover the cost of future ones.	A training program that has already been planned is eligible as long as it will be implemented within the period covered by the RFA and meets all minimum eligibility requirements listed in Section II.B. p.5 of the RFA.
70.	Can the applicant seek funds to support training for its staff at a number of different educational institutions? Do those institutions need to be specified? For example, to upgrade nurses to a system-wide RN credential?	Yes, multiple educational institutions can be used for training. Collaborating organization information should be provided on Attachment 1, Application Cover Page.
71.	On page 26, the RFA states: Instruction and tuition requested for the same participants. Applicants may request either tuition for training or contractual services for instruction, not both. Please explain what this means.	Tuition paid by an applicant to an educational institution for an individual applicant to attend training is an eligible expense. Payment to a contractor to provide training (i.e., instruction) is an eligible expense. Tuition and contractual service for the same individuals for the same training is not allowed. Projects that have multiple components, some entailing the payment of tuition, some provided through a contractor, may include both, as long as they are separate components.
APPLICATION		
72.	If an organization is headquarter (<i>sic</i>) in Westchester County and is proposing to do training for employees both in its Westchester location and its Bronx County location, must it do two separate applications?	Yes. See Section I.B. p.4 of the RFA.
73.	Can a hospital submit more than one application, if the projects are in different departments and not related?	Yes. See Section I.B. of the RFA.
74.	Section II C, Preferred Application Requirements-	Four (4) Preference Points are assigned to Section II.C. p.5 of the RFA.

	<p>“Additional preference points will be awarded to projects that, in addition to demonstrating one or more of the training needs in Section II.B.4., also provide training that will result in an increase in the supply of the following disciplines where there is reported difficulty in recruitment that is related to a shortage of workers, and/or significant growth is projected.”</p> <p>How many preference points will be given for projects training in the identified disciplines?</p>	
75.	Should we specify the training category anywhere in the application, either on the Technical or Cost Proposal?	Yes. Attachment 1- Application Cover Page, requires specified training information be provided.
76.	The sentence states that all start-up activities, including participant selection, have to be completed within three months of contract execution. We anticipate conducting recruitment and participant selection several weeks before short-term training programs are implemented. Some training will begin immediately and participant selection will occur within the 3 months. But other training will be later in the year and we have discovered that it is best to wait to recruit and select as we get closer to the training date. That participant selection will not occur within three months of contract execution. Can you please clarify the statement on page 6?	It is expected that the Contractor complete project start-up activities, including curriculum development and participant selection for the initial training, within three months of contract execution. New participants will need to be recruited throughout the project if the same training is offered several times a year.
77.	How can participant selection be complete within three months of contract execution when we plan to offer training in category 2 (non-college mid-term training) many times throughout the 2-year period?	It is expected that the Contractor complete project start-up activities, including curriculum development and participant selection for the initial training, within three months of contract execution. New participants will need to be recruited throughout the project if the same training is offered several times a year.
78.	We are a private career school that teach (sic) Medical Assistant, Phlebotomy, EKG and other health allied programs so we've a question about how can we apply to participate in the Grant Opportunity below: Grant Opportunity ID DOH01-HWRI2-2019	To Apply see Section IV. Administrative Requirements; E. How to file an application p. 13 and Section V. Completing the Application p.21 of the RFA.
79.	If applying for multiple grants (i.e. multiple trainings proposed), must each application be entered completely separately in the Grants Gateway (along with attachments, assurance,	Yes.

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	etc.) -- even those which may be redundant in relation to the applicant's other training proposals?	
80.	We see that the maximum score for Capability and Commitment is 20 points. Specifically, how many points are awarded to a project for gathering labor organization support?	Two points will be awarded when an applicant either provides required documentation of support from labor organizations or, where applicable, provides a statement indicating that workers are not represented by a labor organization.
81.	Does the DOH have a standard definition for "successfully complete" or "satisfaction"? If not, would it be appropriate for us to explain why we feel that our program was successful?	Applicants previously awarded HWRI grant funding are expected to have reasonably met the training objectives identified in their contract. Applicants can address prior experience in conducting training projects in Section V.A.3B. p.23 of the RFA; Description of Past Training Success.
82.	Under the third bullet, it specifies that "all other applicants should submit letters of participation from all training organizations and health care facilities..." We are a foundation that is an affiliate of a health care facilities trade association. Please confirm that a letter of participation from the health facilities trade association is sufficient to meet this requirement. In other words, please confirm that individual letters from individual participating health care facilities is not necessary to be submitted as part of our application.	Applicants may submit, in lieu of letters from individual health care organizations, a letter from a trade organization on behalf of multiple member health care organizations that includes, by facility, the information listed on Page 10 of the RFA.
83.	Because of similar trainings that were offered by PPSs as part of the Delivery System Reform Incentive Payment (DSRIP) program, we were unable to hit our target number of training participants in the most recent cycle. Since DSRIP will still be continuing as of January 1, 2019 (the beginning of the contract for the current RFA), do we need to explicitly address or demonstrate how we are going to ensure that our projects do not conflict with PPS workforce goals and projects?	Applicants should only submit applications for projects for which they can meet their stated participant levels. It is the responsibility of the applicant to ensure that they can meet their projected participant goals. Activities within the proposed project that are otherwise reimbursed or supported by other grants or programs are not eligible for reimbursement.
84.	The RFA states that the contractor must demonstrate that it can implement the project within a three-month period of time from the	Evidence of the ability to implement the project should include all steps involved in implementation, including the development of a curriculum. This includes, but is not limited

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	date of the contract. Is the development of a curriculum sufficient evidence of implementation? Is there a time limit? Will consultants only have the first three months to create curriculum development?	to: coordinating with training partners; hiring staff; recruiting participants; screening participants; etc.
85.	In previous cycles, we have included curriculum costs for almost the entire duration of the project, on the theory that changes are often needed based on the feedback of participants. Is there a limit in the time period for which curriculum costs can be included?	Curriculum development costs will be limited to the first three months of the contract execution. Costs associated with repeated modifications of a curriculum will not be allowed.
86.	<p>We are considering developing one program that includes a clinical experience in addition to didactic coursework. If we match participants with local clinical sites for these experiences, would we consider them subcontractors or collaborators?</p> <p>We may not be able to set up all of these by the application deadline of June 22, 2018. Would it be ok to provide information and some letters with the application and continue to develop other sites at a later time?</p>	<p>If local clinical sites are receiving HWRI grant funding from the applicant through a contractual arrangement they would be considered subcontractors.</p> <p>Details of project implementation are required within three months of contract execution.</p>
87.	We currently have DOH funding for a program that is totally online and doesn't have a clinical component. In the past, we obtained letters of support from clinical sites where PAs work. These sites do refer PAs to our program and hire them as well, but are not involved in their training within the HWRI program. In this excerpt from the RFA section noted above, the wording seems to indicate that letters are needed from affiliates who help to conduct training. If these clinical affiliates don't conduct training, do we need to obtain letters from them as well?	Organizations that provide training participants are considered collaborating organizations for purpose of RFA Section III.2.a.
88.	Typically, the impact of the occupational shortage or skill gap ("need") is included in the body of the need statement. Does this new requirement give us an extra page to describe it, or is there something more required? Also, what does the following phrase mean: "sustainability used during this shortage"? Is this referring to how the shortage is being handled while the training to address the shortage takes place?	The phrase "sustainability used during this shortage" does refer to how the shortage is currently being addressed. One additional page is allowed for the applicant's response to questions 2A-E. See Section V.A.2.A-E. p.22-23 for the detailed requirements for each of the Program Specific Questions.

	<p>2C. Typically, the project's ability to address the need is contained in the application. Is this an extra page to explain it?</p> <p>2D. Same as above.</p>	
TRAINING LENGTH CATEGORY		
89.	<p>On page 28, Table 3, Training Length Category: It appears as if the listing of training types (Nurse specialty, computer skills, CASACs) previously featured in prior HWRI RFAs, has been replaced entirely by training length. Please confirm that training length categories will only be competing against those in that training category within a specific region. For example, if we were to submit an application to provide Non-college long term training in New York City that grants a certification, and we were to also submit a separate application to provide Non-college short term training in New York City that supports continuing educational hours of those in the field who are already certified, would they not be rated against each other due to the difference in training length category?</p>	<p>That is correct, applications for training proposals within the same region and the same training length category will compete against each other</p>
90.	<p>Regarding the length of training (as explained on page 11), can you offer more clarity on the distinction between trainings that do and do not result in a college degree? For the College Training distinction, is it the expectation that trainings encompass credits towards a college degree, or is it the expectation that a college degree is granted when a participant completes training in a HWRI-funded training project?</p>	<p>The length of training is based on the number of years it would take to complete the degree if the participants attend full time. It is not required that all participants will complete the degree within the HWRI grant period, however, applicants who have a higher percentage of completing participants will score higher.</p>
91.	<p>On page 28, Table 3, Training Length Category: category 4 characterizes a college program that is one year or less. Is it the expectation that following participation of training in a college training project that is 1 year or less, a college degree is granted? What college degree is there for participation that is one or less years in length?</p>	<p>See question 90, above. There are one-year post-baccalaureate programs.</p>
92.	<p>We have a training program that is 350 hours in length. Participants who complete this training program are eligible to receive up to 32 credits by a State SUNY College, and can submit for college credit consideration on an individualized basis to other colleges. Would</p>	<p>Non-college long term. See Section III.C.3. p. 11 of the RFA.</p>

	we submit under training length category 3 (Non-college long term training) or category 5 (long term college training)? Our concern with category 3 is that a 350-hour training program will be rated against a non-college long term training that is as little as 70 or so hours.	
93.	Table 3 indicates that the minimum number of training hours allowed is four hours. Is that correct?	That is correct.
94.	If a webinar series totals more than 4 hours, would it fit into Category 1, even though each webinar is only 90 minutes? Participation in all 4 webinars would be required for a completion certificate, and the webinars would be connected as one program.	Yes. See Section III.C.3. p. 11 of the RFA.
95.	Our project has a number of training programs. They each are different lengths of time, but all of them fit into the range of hours in one of the Categories listed on page 28, Table 3. We are assuming that the total number of hours of all of the training programs will not be used to determine the Training Length Category, but the individual programs within the project. (For example, Program A is 10 hours, Program B is 24 hours, Program C is 12 hours, etc. All of the training programs in the project fit within the Category 1 range of 4-30 hours -- so our project would be assigned to Category 1). Is that a correct assumption?	Yes, that is correct. An individual application is required to be submitted for each project.
96.	Can one-day be allotted for a 90-minute webinar, to include production, preparation and instruction, and PowerPoint development (not curriculum development).	Cost determinations will be made during the contracting period.
97.	Can one 8-hour day be allotted for a 2-hour webinar, to include instructor, production costs, power point preparation, and marketing?	Cost determinations will be made during the contracting period.
GENERAL		
98.	Grant award begins January 1. First three months we can revise curriculum and we can select the students, but the students will begin their training in the summer 2019 semester	That is correct. The Contractor is expected to complete start-up activities, including curriculum development and participant

	which begins on May 6, 2019. Please confirm that the three-month limitation is for selection and not for participants to begin training.	selection, within three months of contract execution.
99.	For the additional one-page document that may be uploaded, is there a particular font size we should be using? Single or double spaced? Margins?	For uploads formatting should be Arial 11 font, single spaced with one-inch margins.
100.	How do I determine if my agency is pre-qualified through the Grants Gateway?	To be registered and prequalified through the Grants Gateway, an organization must have submitted a registration form, identified a grantee delegated administrator, entered required documents into the document vault, and submitted the document vault for review. Please note the documents in the vault must be submitted with sufficient time to be reviewed and approved - waiting until the last minute is not advised. If your agency vault is in review status and not yet prequalified, please send an email to the mail log for this solicitation at HWRI2019@health.ny.gov in order to request expedited handling of your document vault. Your organization's status can be viewed by accessing your document vault and observing the current status noted in the details panel at the top of your document vault main menu. The status can also be obtained by running the "State Prequalification Application Status Report" under the Management Screens section of your vault.
101.	Do we need to secure the MWBE as a part of our application? The proposal guidelines is somewhat confusing indicating "0%" required.	This RFA does not establish minimum goals for participation of minority or woman-owned business. Therefore, completion of the MWBE Utilization Plan (Attachment 6) is optional. Funded applicants are encouraged to engage with firms found in the directory for the acquisition of required product(s) and/or service(s) associated with this grant.
102.	Could you please provide Attachment 1 Application Cover Page as a word document?	The Grants Gateway only permits pdf documents to be uploaded.
103.	If we met the requirement to submit a response, may I contact you after May 15 for technical questions?	Yes, 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.
104.	How many organizations received awards in the most recent cycle of the Health Workforce Retraining Program?	This question is not relevant to the development of an application under this RFA.

105.	How many Performing Provider Systems (PPSs), or organizations representing PPSs, received awards in the most recent cycle?	This question is not relevant to the development of an application under this RFA.
106.	Is DOH going to share the list of awardees under the most recent cycle?	This question is not relevant to the development of an application under this RFA.
107.	Is it allowable for my organization to be included as a subcontract entity on more than one application? While we will not be applying directly, we may work with more than one applicant, and we want to know if there is any prohibition of this.	Yes.
108.	Does training have to be offered during work hours?	The RFA does not specify or designate a timeframe for the applicants' training program. The applicants are expected to determine what best supports their proposal(s).
109.	Are grantees required to serve the entire region it is in, or just the constituency areas that the agency serves?	The RFA does not require that an entire region be served by the applicant.
110.	Can employees reside in a different region than where they will work? E.g. reside in New York City but work in Northern Metropolitan (Westchester)?	Yes.
111.	Is there a minimum number of health care workers that must be trained as part of the Program?	The number of participants being trained directly correlates to the cost of the training program. See Section V.C.3. p.28 of the RFA.
112.	Can unused funds from Year 1 be carried over into Year 2?	No, funds budgeted for Year 1 can only be used for Year 1 expenses and will not be made available for Year 2.
113.	Can Lost Staff Time be used for overtime for participants not scheduled to work during days/shifts when training is provided?	Lost Staff Time is the mechanism for allowing the employer to continue operations while enabling staff to attend training. Lost Staff Time is intended for an additional cost to the employer to replace staff, not for staff to attend training. Overtime can only be used as an exception when there is no better or less costly alternative to achieve training goals. Use of Lost Staff Time for overtime should be approved by DOH prior to implementation.