



Governor's Workforce Board

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NURSING FACILITY TRAINING

GRANT PROGRAM GUIDE

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GOVERNOR'S WORKFORCE BOARD RI

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An equal opportunity employer program. Auxiliary aids and devices are available upon request to individuals with disabilities.

TABLE OF CONTENTS

OVERVIEW 3

KEY TERMS 3

NURSING FACILITY ELIGIBILITY 3

REIMBURSEMENT RATES & PROGRAM CAPS..... 4

ELIGIBLE TRAINING 4

COSTS ELIGIBLE FOR REIMBURSEMENT 4

APPLICATION PROCESS 4

AWARD PROCESS 5

APPLICATION DENIALS 5

APPEAL PROCESS FOR DENIED APPLICATIONS..... 5

REIMBURSEMENT PROCESS 5

CHECKING REIMBURSEMENT STATUS..... 7

TECHNICAL ASSISTANCE..... 7

OVERVIEW

The Nursing Facility Training Grant Program was established pursuant to Rhode Island General Law § 23-17.5-36 and is designed to help licensed nursing facilities provide enhanced healthcare training for employees. The program is intended to support behavioral health care, dementia care, and/or training(s) that otherwise improve quality of care for patients/residents with cognitive impairments.

The program is administered by the Governor's Workforce Board (GWB) at the Rhode Island Department of Labor and Training and provides a 100% cost reimbursement for eligible costs on eligible training activities.

Licensed nursing facilities that meet the eligibility requirements outlined in this guide may apply.

KEY TERMS

For the purposes of this program the following definition applies:

- **Nursing Facility (also referred to as the Employer)** — Nursing facilities licensed by the Rhode Island Department of Health and subject to compliance with the minimum staffing requirements of Rhode Island General Laws § 23-17.5-32.

NURSING FACILITY ELIGIBILITY

Licensed nursing facilities must meet seven (7) eligibility requirements to participate in the program:

- 1) Classified as a for-profit or private non-profit entity doing business in Rhode Island.
- 2) In good standing with the Rhode Island Division of Taxation, all divisions of the Rhode Island Department of Labor and Training, and not prohibited from contracting with an agency that administers federal funds.
- 3) Staff retention is above the statewide median and the facility is compliant with the minimum staffing requirements outlined in Rhode Island General Laws § 23-17.5-32
- 4) The hourly wage rate paid to the employees to be trained is currently \$15.00 per hour or more.
- 5) Facilities with organized staff have communicated with the appropriate collective bargaining unit representatives and followed all relevant protocols established in bargained agreements.
- 6) In compliance with COVID-related regulations and protocols issued by the Rhode Island Department of Health and the Centers for Medicare and Medicaid Services.
- 7) Registered in the Ocean State Procures system ('OSP'). **If the employer is not currently registered with OSP, registration must be completed prior to applying for Nursing Facility Training Grants.**
 - **NOTE:** Ocean State Procures is a NEW supplier management system. Accounts did not automatically transfer from the previous RIFANS system so applicants must register with Ocean State Procures even if they had a previous RIFANS registration.

Please visit the [Vendor Self Registration Guide](#) or [click here](#) to be directed to the OSP application.

For assistance, please contact WebProcure.Support@perfect.com or call 1(866)889-8533.

REIMBURSEMENT RATES & PROGRAM CAPS

Licensed nursing facilities that meet the eligibility criteria outlined above may receive 100% cost reimbursement for eligible costs on eligible training activities (up to \$30,000 per calendar year).

Multiple training grants may be awarded to a facility until the \$30,000 program cap is reached.

Nursing facilities (employers) with more than one location in Rhode Island may be treated as either one employer or separate employers depending on the Federal Employer Identification Number(s) (FEINs). Employers with locations operating under different FEINs will be considered separate entities and each location may submit its own application(s). Employers with more than one location operating under a single FEIN are considered one entity.

Reimbursable training dollars are capped at a per-trainee, per year amount of \$5,000.

ELIGIBLE TRAINING

Nursing facilities may utilize this program to provide enhanced healthcare training for employees. Training(s) should provide employees with competencies above the baseline skillsets (i.e., not pre-employment training or basic onboarding). The program is intended to support behavioral health care, dementia care, and/or training(s) that otherwise improve quality of care for patients/residents with cognitive impairments. Employers are encouraged to work with community-based organizations and training funds that offer relevant training programs.

Employers may **NOT** utilize this program to provide training to personnel hired as independent contractors under a 1099.

COSTS ELIGIBLE FOR REIMBURSEMENT

Costs eligible for reimbursement include:

- Tuition and fees for college courses
- Trainers/Instructors (or training provider fees)
- Conference registration fees
- Training materials and supplies
- Software or subscriptions (if directly related to training and used exclusively for training)
- Curriculum development (if necessary)
- Staff and other administrative costs related to development or delivery of training (up to 10% of total requested funds)

The following costs are **NOT** reimbursable:

- Employee wages
- Employee mileage (or other travel costs)
- Equipment (including hardware and software) that is not exclusively for training
- Grant preparation or administration costs
- Food and beverage
- Costs being reimbursed through Medicaid, Medicare or ARPA/CARES Act funding

NOTE: Reimbursable training dollars are capped at a per-trainee, per year amount of \$5,000.

APPLICATION PROCESS

Before training begins, an application must be submitted by the nursing facility (employer) and

approved by GWB staff. The Nursing Facility Training Grant application is available online at www.gwb.ri.gov and can be submitted at any time. Applications are currently accepted online only. Paper-based applications are not presently available.

When an application is successfully submitted, the applicant will receive an email confirmation. This is the employer's receipt and counts as proof that the application was submitted. If you do not receive an email confirmation after applying, please contact the GWB within 24 hours for assistance.

Applications are typically processed within seven (7) days of receipt. Each submission is reviewed by GWB staff for accuracy and to determine eligibility. If any issues are identified in the application, the point of contact listed on the application will be notified.

Employers should submit one (1) application for each unique training activity.

AWARD PROCESS

After an application is reviewed and approved, the employer will receive a contract for review and signature. Once signed by both parties, the employer will receive a copy of the contract. A copy of the contract will also be sent to the Rhode Island Department of Administration's Purchasing Division for so that a **Purchase Order**¹ can be issued to the employer. The GWB cannot provide reimbursement for any training costs incurred prior to the start date on the contract and Purchase Order.

APPLICATION DENIALS

Applications will be denied if the information provided by the employer is deemed to be inaccurate or if the request does not meet the eligibility criteria outlined in this guide. Employers will be notified via e-mail if their application is denied. The e-mail will contain the reason for the denial and instructions for filing an appeal.

APPEAL PROCESS FOR DENIED APPLICATIONS

Denied applications may be appealed by writing to the Executive Director of the Governor's Workforce Board within two weeks (10 business days) of the notification of denial. Appeals may be sent via mail or via e-mail to dlt.gwbinfo@dlt.ri.gov and addressed to:

Executive Director
Governor's Workforce Board
1511 Pontiac Avenue, Building 73-1
Cranston, RI 02920

The appeal must include the name and contact information for the employer representative (please include a mailing address and phone number) and a description of the issue.

The Executive Director will issue a decision within ten (10) business days of receiving the appeal.

REIMBURSEMENT PROCESS

All payments in the Nursing Facility Training Grant Program are made on a cost reimbursement basis in which the employer pays the training costs up front and requests reimbursement at the conclusion of

¹ A **Purchase Order** is a document that formalizes a transaction with a vendor.

the contract performance period. At the conclusion of the contract performance period, the employer is required to submit the Nursing Facility Training Grant Request for Reimbursement Form and evidence of completed training and costs incurred to dlt.invoice@dlt.ri.gov within 60 days.

If proper documentation is not received within 60 days of the conclusion of the contract performance period, the reimbursement will not be processed, and the contract will be closed.

The following items are required to request reimbursement:

1. Nursing Facility Training Grant Request for Reimbursement Form

At the time of award, employers will receive a copy of the Nursing Facility Training Grant Request for Reimbursement Form. It may also be downloaded from the GWB website www.gwb.ri.gov.

The form must be completed with the following information:

- Contract Number
- Employer Name
- Training Name
- Total Funding Utilized
- Employer Signature

2. Supporting Documentation (Evidence of Completed Training and Costs Incurred)

The following types of documents may be submitted as verification of completed training:

- Final Transcript(s) or Certificate(s) of Completion
- Training Sign-in Sheets
- Completion Reports
- Post-Training Vendor E-mails

Training Type	Acceptable Documentation						
	Final Course Transcript	Certificate of Completion	Sign-in Sheets	Confirmation of Travel*	Post-Training Vendor E-mail	Completion Report	Completion Page Printout
Tuition	✓	✓					
Live Training Event		✓	✓	✓	✓		
Online Course	✓	✓				✓	✓
Training Webinar			✓		✓		
Conference				✓	✓		
On-Site Training		✓	✓		✓		

*Travel is not reimbursable, but validates attendance

The following types of documents may be submitted as verification of costs incurred:

- Itemized invoices from training vendors accompanied by copies of processed checks

- Itemized receipts with dates

NOTE: Supporting documents must identify the dates that training occurred/costs were incurred.

If any of the above items are not present or are incorrect, the Governor's Workforce Board will deny the request for payment and outline the reason for denial. The Employer will have ten (10) business days to rectify any issues and resubmit for payment.

CHECKING REIMBURSEMENT STATUS

Payments will be issued within 30 days of receipt of the Request for Reimbursement Form and evidence of wages paid. Employers may check [RIPAY](#) for payment information. As a state supplier, employers may look up payments submitted to their organization by conducting a vendor search or check number search if they would like to inquire what the payment amount of a check included.

TECHNICAL ASSISTANCE

GWB Staff is available to provide technical assistance throughout the process from the application stage through final reporting. For assistance, please call (401) 462-8860 or e-mail dlt.gwbinfo@dlt.ri.gov.

