**Child Care Workforce Grant (CCWG)**

**State Fiscal Years 2024 and 2025 as of January 2, 2024**

***Document is subject to updates due to errors, omissions or changes***

**Applications may be submitted from December 4, 2023 – January 19, 2024 @ 4:30 PM**

**Questions and queries email CCWGgrant@dhhs.nh.gov**

**Program Overview**

What is the Child Care Workforce Grant program?

The Child Care Workforce Grant (CCWG) program’s purpose is to finance recruitment and retention bonus and benefit grants for New Hampshire child care programs.

**Who is eligible?**

CCWG eligible child care programs shall be programs operating in New Hampshire with an active child care license or that are license-exempt facilities. They must be enrolled in the Department of Health and Human Services Child Care Scholarship Program. These programs shall include those who serve children from birth through age 12 and are referred to as center-based, family-based, early childhood education, early learning, outside of school time, before and after school, and summer camp programs, as well as non-profit and privately owned center-based and family-based child care programs.

* Have a valid State of New Hampshire Vendor Number;
* Have authorization to apply from the program owner or Board of Directors as appropriate;
* Have an active New Hampshire Connections Information System (NHCIS) account for the Director and all staff members;
* Have and maintain an updated program profile and valid email address in NHCIS;
* Agree to participate in the annual workforce and market rate surveys as requested;
* Agree to designate a grant manager; and
* Agree to submit an interim and final report.

**What programs are not eligible to apply for a DHHS CCWG award?**

* Programs that are closed;
* Head Start or Early Start programs, with the exception of Head Start or Early Head Start with wrap-around child care portion of the program;
* Public school early childhood programs; and
* Programs outside of New Hampshire.
1. **Amount of Grant Funding**

$15 million in general funds, through SB237/HB2, has been appropriated for the CCWG program through **June 30, 2025**. Individual program grant amounts shall be determined by NH DHHS/DES/Bureau of Child Development and Head Start Collaboration after all applications have been received and approved.

1. **Allowable Use of Grant Funds**

Grants received by the program may be used in the following ways:

* Deposit into an eligible, tax-advantaged Health Savings Account or Flexible Spending Account;
* Mentor credentialing and support networks for mentors;
* Sign-on and/or retention incentives and/or wage increases;
* Professional costs such as training hours, CPR, or memberships in professional organizations;
* Child care tuition assistance or discount;
* Credit towards the employee’s share of the cost of their health insurance plan;
* Paid time off equivalent;
* Student loan repayment;
* Telemedicine coverage; or
* Payment towards a physical, first-aid certification, CPR certification, background check, or other credential required for the child care position.
* A percentage of the funds may be used to cover the payroll of the person(s) administering the grant funds.

Funds are not retroactive and cannot be applied to expenses prior to the date the agreement is signed.

Funding ***may not be used for***:

* Operating expenses;
* Facility improvements;
* Tuition for families; Current college tuition;
* Marketing and job postings;
* Staff parties or outings;
* Income losses or debt repayment;
* Any allowable expenses prior to the agreement date;
* Regular staff wages, only increases are permitted;
* Activities ordinarily provided “free” by the Department or partner entities; or
* Expenses covered by other grants or funding programs provided by the Department or partner entities.

If grant application requests exceed available funding, preference shall be given to eligible child care programs which are: (a) Enrolled in New Hampshire's child care scholarship program; and (b) Connected to the work of their related early childhood regional network, as determined by the department.

1. **How will the child care programs access the grant funds and document their use?**

CCWG applications will be accepted between **December 4 – December 29, 2023 @ 4:30 PM**

 Applications will not be accepted after the closing date. The Department’s issuance of awards is conditional based on the approval of Governor and Council. Programs will be required to:

1. ***Complete the application:*** The link to the Survey Monkey based application will be available on <https://www.nh-connections.org/new-hampshire-provider-grant-funds/>
2. ***Receive an award notification and agreement:*** Grant awards will be determined using the award formula described below Programs whose grant application is approved will be sent a “grant notification and agreement” via email. The agreement must be signed electronically and submitted to the Department within 10 days of receipt. If a program has difficulty signing electronically, a paper copy may be signed and submitted to the Department. No funds are released until the agreement is received and approved by the Department.
3. ***Submission of Interim and Final Reports:*** Each program will be required to submit documentation on use of funds and demonstrate whether the workforce improved. These reports will include important outcome data along with detailed documentation related to the use of the funds.
4. **How much grant money will each program receive?**

The formula for the grant award will be based on the number of full time equivalent staff currently employed at the program along with the current full time equivalent openings at the time of application.

***Child Care Workforce Grant Formula****:*

*Grant awards will be based on the combined number of Full Time Equivalent (FTE) positions that are currently filled and currently vacant ‘as of’ the date of application.*

**Notes:**

* The State of NH Department of Labor defines a Full Time Equivalent (FTE) as 35 hours per week.
* Any W-2 regular employee may be included in the calculation.
* Temporary or seasonal employees will NOT be used to calculate the FTE Equivalent.
* If the FT or PT hours of an employee varies, please use an ***‘average’*** number of hours for the position.

*For example,* if a FT teacher works 42 hours some weeks and 37 another then the average would be 39.5 hours; if a PT receptionist works 17 hours some weeks and 22 others then the average would be 19.5

**Calculating the Full Time Equivalents**

**Step one:**

Add up all AVERAGE Full Time (FT) and AVERAGE Part Time (PT) Employee hours for one week.  Include filled and open positions.

*Example:  6 FT and PT Employees*

*Employee 1 = 40 hours a week*

*Employee 2 = 15 hours a week*

*Employee 3 = 32 hours a week*

*Employee 4 = 17 hours a week*

*Employee 5 (open position) = 37 hours a week*

*Employee 6 (open position) = 15 hours a week*

*Total hours = 156*

                **Step two:**

Divide the Total hours by the State of NH Department of Labor Full Time

Equivalent (FTE) of 35 hours per week to determine the total FTE positions

*Example:  156 divided by 35 = 4.45 FTE positions*

**Step three:**

Round up the FTE to the nearest whole number

*Example 4.45 FTE = 5 FTE positions*

**Final determinate of actual $’s per FTE:**

Once all programs have submitted an application, the actual value of dollars per FTE will be determined by dividing the FTE equivalents of ***all programs*** into the total dollars of the Child Care Workforce Grant (CCWG).

**Part Two - Program Application Procedures**

1. **How will providers apply for funding?**

The application will be available on Survey Monkey through both custom links (sent to programs) and a general link available on NH Connections. A template for reference will also be available. All applications must be submitted electronically. Technical assistance will be made available through the Department’s contractors, ACROSSNH and Child Care Aware of NH. The application will include basic information is requested to ensure programs qualify for funding. The application will also include questions regarding program data, staffing, wages and benefits, enrollment and capacity.

Specific instructions are available on the <https://www.nh-connections.org/new-hampshire-provider-grant-funds/>

**2. What happens after the application is submitted?**

**Initial Review -** Initially, each application will be downloaded from Survey Monkey, placed in an electronic file and reviewed for completeness by the Grant Program Coordinator. A confirmation of receipt will be emailed to the applicant. The initial review includes verification of their license status and standing through a master CCLU list on the NH Connections Information System (NHCIS). In the event there is a question about status, an outreach email will be sent to the Child Care Licensing Unit for further clarification.

In the case of incomplete applications, programs will be contacted and resubmissions or corrections requested. In addition, programs will be encouraged to send changes/additions to their application via email. This usually occurs when the program realizes, after the submission, but before the deadline, or because of the initial review, they left out or incompletely answered a question(s).

**Award Decisions -** Once the full review is complete the grant award amount is confirmed and approved.

**Award Notification and Agreement/Attestation Distribution –** Following the approval process,award letters will be customized and sent to each awardee via email with a read receipt.

Each award notification letter and agreement includes the customized award letter with award amount, a Provider Agreement with digital or hardcopy signature a section for attesting to the acceptance of the approved expense use along with other grant performance and reporting requirements. The award packet will include the final report template with a detailed list of the final report accountability with a tab for each expense line item. The instructional page will indicate the required documentation.

The award letter and agreement clearly states the following:

* The award amount
* The approval of the proposed plan
* The allowable use
* The basics of the invoicing and payment process
* Next steps instructions, including submission of signed documents..
* Instructions for doing a digital or hardcopy signature and applying for a vendor number are included
* The invoice and payment process
* Grant fulfillment requirements including metrics and reporting

Programs have 10 business days from the date the award letter is emailed to the program, to accept sign and submit the agreement. Failure to submit the agreement will nullify the award.

**Submission of Provider Agreement and Attestation -** Once the award notification is made, each provider must submit a signed Provider Agreement. Although the preferred method for submission is electronically by email, mail-in documents and documents dropped off at the DHHS Brown Building will be accepted to ensure equitable access for providers. All documents must be received by email, postmarked or dropped off within 10 business days of the grant notification letter. No photographed or JPEG documents will be accepted.

After receipt, the DHHS representative reviews and signs the agreement, a copy is mailed to the grant recipient.

Once the agreement is signed and approved for payment, the request for payment is submitted by the BCDHSC staff.

 **3. How will I report how I used the funds**

Each awardee will complete an **interim report** by June 28, 2024 and a **final progress report** by June 30, 2025 on a template provided by BCDHSC. The report will give an overview of the expenditures, the impact of the funding on their program operations and staff, basics statics and future needs. Specific documentation for verification will be required in the report.

**CCWG Timeline Plan as of December 4, 2023**

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| --- | --- |
| **Date** | **Activity/Task** |
| **Mon, December 4, 2023 to Fri, December 29, 2023**  | * Application Period
 |
| **Mon, December 11, 2023** | * Host webinar 12:00 noon – record
 |
| **Wed, January 24, 2024** | * All award letters out
 |
| **Fri, Feb 2, 2024** | * All agreements due
 |
| **Fri, Jun 28, 2024** | * Interim Report Due
 |
| **Mon, Jun 30, 2025** | * Final Report Due
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**Virtual Office Hours**

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| --- | --- |
| **Mon, Dec 13, 18 and Wed, Dec 20****12:00 -1:00 PM Virtual Office Hours** **Tue, Dec 19****6:30 -7:30 PM Virtual Office Hours** | Microsoft Teams meeting **Join on your computer, mobile app or room device** [Click here to join the meeting](https://teams.microsoft.com/l/meetup-join/19%3Ameeting_ZWY3ZGI2YWItMWJkZC00MTE5LTgxMjEtM2FkNGMwMjBiMzBm%40thread.v2/0?context=%7b%22Tid%22%3a%22992deae9-1c4c-42c8-a310-5088af55ba74%22%2c%22Oid%22%3a%224bc1ac8c-5499-465c-b763-9f4774809880%22%7d) Meeting ID: 212 163 700 01 Passcode: FtNPPD [Download Teams](https://www.microsoft.com/en-us/microsoft-teams/download-app) | [Join on the web](https://www.microsoft.com/microsoft-teams/join-a-meeting)**Join with a video conferencing device** nhgov@m.webex.com Video Conference ID: 115 954 105 8 [Alternate VTC instructions](https://www.webex.com/msteams?confid=1159541058&tenantkey=nhgov&domain=m.webex.com) **Or call in (audio only)** +1 603-931-4944,,658301479#   United States, Concord Phone Conference ID: 658 301 479# [Find a local number](https://dialin.teams.microsoft.com/f7a647af-ea74-46b0-81b7-19cbfe838a27?id=658301479) | [Reset PIN](https://dialin.teams.microsoft.com/usp/pstnconferencing) [Learn More](https://aka.ms/JoinTeamsMeeting) | [Meeting options](https://teams.microsoft.com/meetingOptions/?organizerId=4bc1ac8c-5499-465c-b763-9f4774809880&tenantId=992deae9-1c4c-42c8-a310-5088af55ba74&threadId=19_meeting_ZWY3ZGI2YWItMWJkZC00MTE5LTgxMjEtM2FkNGMwMjBiMzBm@thread.v2&messageId=0&language=en-US) Microsoft Teams meeting **Join on your computer, mobile app or room device** [Click here to join the meeting](https://teams.microsoft.com/l/meetup-join/19%3Ameeting_NDIwN2QwY2MtN2MxNS00YzZlLWI3NDgtYTlmNTBkZTA5MzZi%40thread.v2/0?context=%7b%22Tid%22%3a%22992deae9-1c4c-42c8-a310-5088af55ba74%22%2c%22Oid%22%3a%224bc1ac8c-5499-465c-b763-9f4774809880%22%7d) Meeting ID: 296 783 324 290 Passcode: YU2DTw [Download Teams](https://www.microsoft.com/en-us/microsoft-teams/download-app) | [Join on the web](https://www.microsoft.com/microsoft-teams/join-a-meeting)**Join with a video conferencing device** nhgov@m.webex.com Video Conference ID: 119 239 125 9 [Alternate VTC instructions](https://www.webex.com/msteams?confid=1192391259&tenantkey=nhgov&domain=m.webex.com) **Or call in (audio only)** +1 603-931-4944,,522249621#   United States, Concord Phone Conference ID: 522 249 621# [Find a local number](https://dialin.teams.microsoft.com/f7a647af-ea74-46b0-81b7-19cbfe838a27?id=522249621) | [Reset PIN](https://dialin.teams.microsoft.com/usp/pstnconferencing) [Learn More](https://aka.ms/JoinTeamsMeeting) | [Meeting options](https://teams.microsoft.com/meetingOptions/?organizerId=4bc1ac8c-5499-465c-b763-9f4774809880&tenantId=992deae9-1c4c-42c8-a310-5088af55ba74&threadId=19_meeting_NDIwN2QwY2MtN2MxNS00YzZlLWI3NDgtYTlmNTBkZTA5MzZi@thread.v2&messageId=0&language=en-US)  |