**Supporting Statement for OMB Clearance Request**

**Instrument 20: HPOG 2.0 National Evaluation Program Cost Survey**

**National and Tribal Evaluation of the 2nd Generation of the Health Profession Opportunity Grants (HPOG)**

0970-0462

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*Submitted by:*

Office of Planning,
Research & Evaluation

Administration for Children & Families

U.S. Department of Health
and Human Services

*Federal Project Officers:*

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**Introduction**

This survey is sponsored by the Administration for Children and Families in the U.S. Department of Health and Human Services and is part of the evaluation of the second round of Health Profession Opportunity Grants (HPOG 2.0). The survey asks about costs associated with different activities that are part of operating your HPOG 2.0 program. Thank you in advance for completing the survey.

The purpose of this survey is to gather information about costs associated with your HPOG 2.0 program for the HPOG 2.0 evaluation’s Cost-Benefit Analysis (CBA). The CBA will use this information to estimate the cost of the HPOG 2.0 Program relative to the benefits of the Program. The survey is organized to collect information for the CBA in an efficient and consistent manner across multiple HPOG 2.0 programs, while attempting to be as minimally burdensome to you as possible. This survey is intended to be filled out at the HPOG program level. As a reminder, an HPOG program is a unique set of services, training courses, and personnel; a single grantee may fund one or more programs. As a general rule, each HPOG program would have a separate Evaluation Design and Implemendation Plan (EDIP). In some cases, the grantee and program are one and the same. In other cases, the grantee may have multiple programs. In these cases, the survey will be sent to the lead grantee, who may choose to report all the information aggregated across programs in one survey, or may work with each of their programs to complete separate surveys. If completing separate surveys, the programs should be careful not to double count any costs.

An overview webinar walked through the survey questions and how to answer them. Given differences among HPOG programs, you may have questions about how to report information specific to your program structure. The evaluation team will arrange a phone call with you to go over any questions as you review and prepare to fill out the survey.

We estimate the survey should take 4 to 8 hours to complete. Most of this time will be used to collect the information necessary to enter into the survey cost worksheet. Once collected, actual entry of the data into the worksheet should be fairly quick. We expect that you will need to consult your program’s accounting records in order to collect the necessary information for the survey.

You have been identified as the person most appropriate to complete the survey, but you may need to consult with others to gather information. Your responses to these questions are completely voluntary. Your answers will be kept private. Information you provide will not be shared with other staff at your program or organization.

Please try to respond as completely and accurately as possible. Where exact figures are not available, an informed estimate is fine.

The cost worksheet does not need to be completed in one sitting. You will be able to save any progress and reopen the worksheet to complete data entry.

After you have completed and submitted the cost worksheet, the evaluation team may schedule a follow-up phone call to clarify information you reported.

We greatly appreciate your contributions to the CBA.

*According to the Paperwork Reduction Act, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 0970-0462 and it expires XX/XX/XXXX. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Gretchen Locke at Gretchen\_Locke@abtassoc.com; Attn: OMB-PRA (0970-0462).*

**Overall Instructions for Completing the Program Cost Survey**

The survey is divided into the following sections:

* staff costs (by type of activity);
* nonstaff overhead (indirect) costs;
* other nonstaff direct costs of services and supports;
* healthcare training costs;
* other HPOG 2.0 costs; and
* variation in HPOG 2.0 across years.

**Which costs to include.** We are interested in collecting information on the total expenditures your HPOG 2.0 program makes in serving participants. For many programs, these expenditures go beyond the HPOG 2.0 grant and include funding you have received from other sources, such as additional grants, philanthropic contributions, public funds, or contributions from other organizations with which you partnered. In order for us to fully understand how much it cost to provide services to HPOG 2.0 participants, *we need you to include these other costs to the fullest extent possible*. This means you may need to gather information from your program partners. We do not expect you to report costs for all services for which participants were referred to community resources, especially when those resources are available to all members of the community (including control group members). Please see specific instructions under each category for further clarification.

**Contractor costs.** Many HPOG 2.0 programs have contracts with partner organizations or vendors. Please include these costs in the appropriate section. Depending on the nature of the activities covered by the contract, you may be able to report the total expenditure or you may need to break out contract costs. If a contract includes staff who carry out multiple activities across the categories discussed in Section A, you will need to separate contract costs as detailed in the survey sections and report these together with your main program costs.

**Time frame of costs to include.** In completing the survey,*please only include costs for HPOG 2.0 Program Year 4, September 30, 2018–September 29, 2019*.To reduce your burden, we are only collecting costs for this one program year. We will consider these costs representative of the fully operational HPOG 2.0 program. At the end of the survey you will have an opportunity to report whether Program Year 4 involves substantially different costs from costs in other years and to report how Year 4 costs differ.

**Survey time frame.** This survey is being distributed for completion in November 2019. We understand that some grantees will not have complete program year expenditure information until January 2020. *Please complete this survey by the end of February 2020*. After we review your completed surveys, we will set up follow-up clarification phone calls as necessary.

Remember, if at any point you have a question about where or how to report a particular cost or expenditure in the survey or about definitions we are using, please contact us at HPOGSurvey@urban.org.

**Individual Section Instructions**

**Section A: Staff Costs**

**Instructions for Table A:** For HPOG 2.0 Program Year 4 (*September 30, 2018, through September 29, 2019*), we are interested in collecting the staff costs (salary and fringe benefits) of individuals in your organization or partner organizations who worked on HPOG 2.0-related to activities in each of the following five areas:

* ***Management/administration***. Activities necessary to support the operation of your HPOG 2.0 program. This includes program development, oversight, staff management, performance management and reporting, data oversight, and evaluation activities.
* ***Recruitment/eligibility***. Activities necessary to recruit, assess, and determine eligibility of participants. This includes all activities surrounding recruitment, application, and determining eligibility for participants.
* ***Academic supports/other skills development****.* Services that support individuals to participate in or continue participation in education or training but are neither occupational nor basic skills training. Academic supports include all case management, academic advising, bootcamps, mentoring, peer support, post-eligibility assessments, and tutoring. Other skills development activities include college readiness workshops, CPR training, digital literacy, introduction to healthcare careers workshops, and work readiness. Include time staff spent in any of these activities in this category.
* ***Basic skills instruction.*** Basic skills instruction includes time staff spent providing adult basic education, adult secondary education (such as GED preparation), college developmental education, or English language acquisition training for HPOG 2.0 students. If case managers/navigators spend time tutoring participants in basic skills in the course of their regular duties or as part of a bootcamp, you do not need to break out that time here. It can be included in the previous category. If basic skills training is integrated as part of healthcare training, do not include those staff costs here. These will be addressed in Section D. If you pay fees/tuition for participants to take basic skills classes from a vendor, you can include those costs in Section C.
* ***Employment assistance/development***. Time staff spent in activities that assist participants in finding and keeping jobs. Employment assistance supports include job search assistance, job placement assistance, and job retention services.

You should include total staff costs (salary and fringe) for all staff involved in HPOG 2.0 Program Year 4. Include actual staff expenditures by activity, whether the individual worked full year or part year, full time or part time. However, do not include staff time spent on providing healthcare training. These costs are covered in later sections.

If you contract with another organization to provide some of these activities, please include the relevant staff expenditures for Program Year 4 in each appropriate category in Table A.

For further assistance in developing the appropriate entries for Table A, please see Appendix B. This appendix provides additional steps, examples, and worksheets to assist you in developing these expenditure numbers. This appendix is optional. *You do not need to complete the steps in Appendix B if you are able to calculate the totals for Table A in a different manner.*

**Section B: Overhead/Indirect Costs**

**Instructions for Table B:** We are interested in gathering overhead costs necessary for administering your HPOG 2.0 program for Program Year 4 (*September 30, 2018, through September 29, 2019*). For most programs, these costs are embodied in the indirect rate that you apply to staff costs in budgeting. (Please note that fringe benefits were included in Section A. If you include fringe benefits in your overhead rate, contact us to discuss how to proceed.)

You should only include indirect expenditures as applied to HPOG 2.0 activities. Please also report in Table B the indirect rate for contracts for which you are separating out expenditures across different sections of the survey.

**Section C: Other Direct Costs for HPOG 2.0 Program**

**Instructions for Table C:** In this section, you will report all other nonstaff direct costs involved in supporting HPOG participants during HPOG Program Year 4 (*September 30, 2018, through September 29, 2019*). **Do not include costs for providing healthcare instruction, such as tuition or fees.**

We are interested in collecting other direct costs in the following categories: academic/other skills development, personal and logistical supports, basic skills instruction, employment assistance/development, and all other direct costs not categorized. Under the first two categories we would like you to report separately on assistance with training-related costs (not including tuition) and transportation. Definitions for each category are provided in Appendix A. We list below some examples for each category:

* *Academic supports/other skills development:* materials for bootcamp, contracts for work readiness workshops or tutoring
* *Training-related costs assistance (other than tuition):* books, equipment, materials for training; license certification fees; exam/exam preparation fees; computers/technology; work or training supplies or uniforms; required health exams for training or work
* *Personal and logistical supports:* direct emergency assistance payments to fix a car or pay rent/utilities
* *Transportation assistance*: bus/subway cards, gas vouchers/cards, or van/carpool arrangements
* *Basic skills:* tuition or fees for ABE or ESL classes provided in the community, fees for GED test, basic skills assessment test fees
* *Employment assistance/development*: mileage for employer developer, nonstaff costs for job fairs
* *Other direct costs not included above:* office supplies, travel to HPOG conferences, background checks for eligibility determination, and contract for marketing/communications. Do **not** include costs related to basic skills or healthcare instruction.

In Table C, please enter other direct nonstaff expenditures you incurred in the rows under the appropriate category and add a brief description. Within these categories, *use whatever groupings/itemization is easiest for your program*. We are interested in **totals**, except for transportation assistance and training-related supplies (entered as separate lines in Table C) which we would like to collect separately. Do your best to separate costs by category. If you are unsure which category to use or if a cost is not easily separated across these categories (e.g., “office supplies”), please enter it under the “other” category. *You may not have any other nonstaff direct costs to report in a given category.*

Include in Table C payments made to other providers or vendors for a service, even if that includes staff time, if the cost falls completely within one of these categories. For example, if you have a contract with a vendor to provide tutoring, include that cost under academic supports here with the description “tutoring.” You do not need to break out staff or nonstaff costs within this contract. If you contract with an organization and reported that staff time in Table A, please report the relevant other direct cost expenditures from that contract in Table C.

**Section D: Cost of Providing Healthcare Training**

**Instructions for Table D1:** We would like to gather information on the costs of healthcare training provided to HPOG participants in Program Year 4 (*September 30, 2018, through September 29, 2019*). In order to collect information on control group as well as treatment group members, we are mainly relying on total costs of training available in the Delta Cost Project Database (DCPD). DCPD is a publicly available database of the revenues and expenditures postsecondary institutions provide to the U.S. Department of Education’s Integrated Postsecondary Education Data System. The database includes information on more than 6,000 public, private not-for-profit, and private for-profit institutions in a consistent format.

Not all training organizations providing training for HPOG 2.0 are included in the DCPD. In particular, community-based organizations, employers, and some for-profit institutions are not included. Therefore, we would like to collect from you information on the cost of training by such organizations.

Table D1 provides a list of your program’s training offerings that are not included in the DCPD. Information listed is from the Participant Accomplishment and Grant Evaluation System (PAGES), including type (occupational code), provider name, organization type, and average number of hours/credits per training. If “provider organization type” is blank or incorrect, please enter the correct type (community-based organization, for-profit organization, employer, other). If average hours/credits per training is incorrect, please correct. (Note: Columns with headers in light colored font are prefilled or will be automatically calculated in the worksheet.)

We are seeking the total cost of providing training per student for each listed training. By “cost of training” we mean all associated costs (instruction, materials, and overhead). This will often exceed the tuition a student or the HPOG 2.0 program would pay. We would like to gather the training provider’s total per participant cost of providing the training. You may need to collect this information directly from the training provider.

Using previously reported information from PAGES on average number of hours/credits per training, Table D1 will automatically calculate the average cost per hour/credit of training. If you are unable to gather information for a listed training, please mark “N/A” under “average total cost per participant.”

**If the lead grantee for your program IS NOT a community college or university, please skip to Section E. If the lead grantee for your program IS a community college or university, please complete Table D2.**

**Instructions for Table D2:** The DCPD data described above will distinguish cost of training by length or by credits for an institution, but will not distinguish costs by types of healthcare training (i.e., occupation). To be able to report on the distribution of training cost by type, we would like to gather information on the costs of the different types of healthcare training community colleges and universities offer.

Table D2 lists a set of healthcare trainings with provider names for your program taken from PAGES. We are seeking the cost per credit hour or classroom instruction hour of providing training for each of these for Program Year 4 (*September 30, 2018, through September 29, 2019*). If costs are only available for a different year, please note the year for which data are provided. By “cost of training” we mean all associated costs (instruction, materials, overhead), which often exceed the tuition a student or the HPOG 2.0 program paid. Community colleges and universities may vary in how they gather or report these data. If costs are reported by semester or some other unit, please convert to credit or classroom hour and note the relevant unit in the last column. (Note: Columns with headers in light colored font are prefilled in the worksheet.)

For any training for which you are unable to provide costs, please mark “N/A” under “average total cost per unit.” To reduce burden, we have selected a sample of five training programs from your PAGES program data. If you are able to report data on additional programs, please do.

**Section E: Other HPOG 2.0 Costs**

**Instructions for Table E:** Please enter and describe in Table E any other costs for Program Year 4 (*September 30, 2018, through September 29, 2019*) that have not already been reported in this survey.For example, in Table E you can report tuition or fees you paid to organizations for healthcare training or for prerequisites. Please include a brief description of the cost.

**Section F: Variation in HPOG 2.0 Annual Costs**

**Instructions for Table F**: We are using Program Year 4 (*September 30, 2018, through September 29, 2019*) costs to approximate the average annual costs of your HPOG 2.0 program. We would like to know how the costs of Program Year 4 compared with prior years’ costs. Thinking back to Program Years 2 and 3 of HPOG 2.0, please fill in Table F by telling us if the costs in these program years are similar to or different from the costs during Year 4. *(Please mark an X in only one column for each row.)* Please do not include costs for Program Year 1, which may have included start-up and other costs that do not represent normal expenditures.

If Program Year 4 costs are much more or much less than costs in one of the other two years, please provide a brief explanation as to why, including the costs that were different.

Thank you very much for completing this survey!

**HPOG 2.0 Program Cost Survey [Program name] Cost Worksheet**

Please read the instructions before filling out each section. Remember all costs are for HPOG 2.0 program for Program Year 4 (*September 30, 2018, through September 29, 2019*).

**Section A: Staff Costs**

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| Table A: Total Cost of HPOG 2.0 Staff Time by Activity in Program Year 4 |
|  | Management/administration | Recruitment/eligibility determination | Academic supports/other skills development | Basic Skills Instruction | Employment assistance/development |
| Program Year 4 cost across HPOG 2.0 staff(salary and fringe)  |  |  |  |  |  |

Note: The total of staff costs in these categories may not be the same as total HPOG 2.0 program staff costs because the total of these staff costs excludes basic skills and healthcare training instructors.

**Section B: Overhead/Indirect Costs**

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| Table B: Administrative Overhead Costs in Program Year 4 |
| Indirect rate | Indirect expenditures for program year  | Brief narrative of what is included in your indirect rate |
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**Section C: Other Direct Costs for HPOG 2.0 Program**

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| Table C: HPOG 2.0 Nonstaff Program Supports |
| **Other Direct Cost** | **Brief Description of Support** | **Total Annual Expenditure on HPOG 2.0 Participants in Program Year 4** |
| **Academic Supports/Other Skills Development** |
| Training-related assistancea |  |  |
| Other |  |  |
| **Personal and Logistical Supports** |
| Transportation assistanceb |  |  |
| Other |  |  |
| **Basic Skills** |
|  |  |  |
| **Employment Assistance/Development**  |
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| **Other Direct Costs Not Included Abovec** |
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a. Books, equipment, materials for training; license certification fees; exam/exam preparation fees; computers/technology; work or training supplies or uniforms; required health exams for training or work.

b. Bus/subway cards, gas vouchers/cards, or van/carpool arrangements.

c. For example, office supplies, background checks for eligibility determination, and contract for marketing/communications.

**Section D: Cost of Providing Healthcare Training**

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| Table D1: Cost of Providing Healthcare Training in Program Year 4 |
| **Healthcare training type (SOC)a** | **Provider namea** | **Provider organization typea** | **Average total cost per participant** | **Average number of hours/credits per traininga** | **Average cost per hourb** |
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a. Will be provided in the survey worksheet from PAGES (Participant Accomplishment and Grant Evaluation System). SOC – Standard Occupational Classification.

b. Will be automatically calculated in the survey worksheet.

If the lead grantee for your program IS NOT a community college or university, please skip to Section E. If the lead grantee for your program IS a community college or university, please complete Table D2.

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| Table D2: Cost of Providing Healthcare Training for Year [ ]a |
| **Healthcare training type (SOC)b** | **Provider nameb** | **Average total cost per unit** | **Reported unit****(credit or classroom hour)** |
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1. If data are not from Program Year 4 (*September 30, 2018, through September 29, 2019*), please insert dates.
2. Will be provided in the survey worksheet from PAGES (Participant Accomplishment and Grant Evaluation System). SOC – Standard Occupational Classification.

**Section E: Other HPOG 2.0 Costs**

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| Table E: Other HPOG 2.0 Costs  |
| **Cost type** | **Description** | **Total expenditure on HPOG 2.0 participants in Program Year 4** |
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**Section F: Variation in HPOG 2.0 Annual Costs**

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| Table F: Changes in HPOG 2.0 Annual Costs |
|  | Much more than Year 4(25% or more difference) | More than Year 4, but not by much (10% or less difference) | About equal to Year 4 | Less than Year 4, but not by much (10% or less difference) | Much less than Year 4 (25% or more difference) |
| Program Year 2 (*September 30, 2016, through September 29, 2017*) |  |  |  |  |  |
| Program Year 3 (*September 30, 2017, through September 29, 2018*) |  |  |  |  |  |

| **Explanation** |
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**Appendix A: Definitions Used in the Survey**

These definitions are based on definitions used for PAGES and in the PAGES glossary which can be found on the Welcome page of PAGES under the Resources section .

* *Academic supports/other skills development:* Services that support individuals to participate in or continue participation in education or training and which are directly training- or academic-related, and training activities that are neither occupational nor basic skills training. Academic supports include case management, academic advising, bootcamps, mentoring, peer support, posteligibility assessments, and tutoring. Types of other skills development activities include college readiness workshops, CPR training, digital literacy, introduction to healthcare careers workshops, work readiness. *Examples of other direct costs for this category are materials for bootcamp, contracts for work readiness, and fees for certification tests.*
* *Personal and logistical supports: S*upports and services that enable individuals to participate or continue participation but are not directly related to training or academics. These include child/dependent care assistance, emergency assistance, housing support/assistance, nonemergency food assistance, transportation assistance, and other nonemergency social services assistance. *Examples of other direct costs for this category are transportation assistance vouchers and direct emergency assistance payments.*
* *Employment assistance/development:* Activities that assist participants in finding and keeping jobs. Employment assistance supports include job search assistance, job placement assistance, and job retention services. *Examples of other direct costs for this category are mileage for employment developer and nonstaff costs for job fairs.*
* *Other types of other direct costs not included above:* This includes all other direct costs that you have not reported that are not related to basic skills or healthcare instruction. *Examples include office supplies, travel to HPOG conferences, background checks for eligibility determination, and contract for marketing/communications.*
* *Training-related costs assistance (other than tuition):* Assistance with costs for training-related needs. This support includes financial assistance to help meet these costs or direct provision of these items by the HPOG program. Training-related costs include books, equipment, or materials for training; license certification fees; exam/exam preparation; computers/technology; work or training supplies or uniforms; and required health exams for training or work.
* *Transportation assistance:* Payments or other assistance that enable the participant to travel to and from education and training, other HPOG services, or employment. These include but are not limited to bus/subway cards, gas vouchers/cards, or van/carpool arrangements.

**Appendix B: Optional Help for Calculating Table A Totals**

The following instructions and examples are provided to assist you in correctly calculating the totals for Table A in Section 1 of the survey using the Appendix A.3 Worksheet. *You do not need to complete these steps if you are able to calculate the totals for Table A in a different manner*. Columns with headers in light colored font will be automatically calculated by the worksheet.

**Step 1:** In Table 1, list all staff who participated in activities related to HPOG 2.0 in Program Year 4. Include their full annual salaries on all activities (HPOG 2.0 and others) (or, if they worked part-year, the portion actually expended) and the fringe benefits paid. Then list the proportion of the staff person’s time that he or she worked on HPOG. If the person worked a quarter time on HPOG activities, enter 0.25. If all of the person’s time was spent on HPOG, enter 1.00. In the example below, the grant manager works 25 percent of her time on HPOG, but her full annual salary is $56,000. Case Manager 1 and Case Manager 2 hold the same job, but Case Manager 2 was hired midyear. Because she only worked for the second half of the year, salary expenditures for the year are lower. However, Case Manager 2 spent all her time on HPOG after being hired, so the proportion in column 3 is 100 percent.

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| Example Table 1: HPOG 2.0 Staff Costs in Program Year 4 |
| Staff title | 1Salary expenditure for program year | 2Cost of fringe benefits expenditure for program year | 3Proportion of time spent on HPOG in program year | 4(#1 + #2) x #3Staff costs spent on HPOG in program year |
| Grant Manager | *$56,000* | *$23,000* | *25%* | $19,750 |
| Case Manager 1 | *$24,588* | *$10,000* | *100%* | $34,588 |
| Case Manager 2 | *$12,300* | *$5,000* | *100%* | $17,300 |

Note: sample answers are included in italics. Column 4 will be calculated automatically in the survey worksheet.

**Step 2:** For each staff member entered in Table 1, in Table 2 allocate the proportion of her or his time working on HPOG (from column 3 in Table 1) that was spent on each type of activity. For example, if a case manager spent all of her or his time in academic support activities for HPOG, you would put a 1.00 under that category. In Example Table 2 below, Case Manager 1 spent 10 percent of her time on recruitment/eligibility, 70 percent on academic supports/other skills development, and 20 percent on employment assistance. Case Manager 2 spent 10 percent of her time on recruitment/eligibility, 70 percent on academic supports/other skills development, and 10 percent of her time on basic skills instruction. These percentages add up to 90 percent, since she spent an additional 10 percent on health care training which is not included in the table. The study team will use this information to allocate the total cost from Table 1 across the activities.

Please only include staff time spent on HPOG activities. If an individual only spent one-quarter of her or his time on HPOG and three-quarters on another program, only categorize her or his HPOG program time. For example, the Grant Manager in the example below spends a quarter of her time on HPOG over the fiscal year (shown in Example Table 1). All of her time is on management duties, so you would enter 1.00 under the “management/administrative duties” column below.

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| Example Table 2: Allocation of HPOG 2.0 Staff Time by Activity in Program Year 4  |
| Staff title | Management/administration | Recruitment/eligibilitydetermination | Academic supports/other skills development | Basic Skills Instruction | Employment assistance/development | Total |
| Grant Manager | *100%* |  |  |  |  | *100%* |
| Case Manager 1 |  | *10%* | *70%* |  | *20%* | *100%* |
| Case Manager 2 |  | *10%* | *70%* | *10%* |  | *90%* |

Note: sample answers are included in italics. The “total” column will be automatically calculated by the survey worksheet. It may be less than 100% if the staff member is also involved in healthcare instruction, which is not included here.

**Step 3:** Using information from Table 1 and 2, Table 3 will automatically calculate total staff cost for each area. The bottom line of the worksheet (labelled “total staff cost”) is the information needed for Table A in Section A of the survey. You should review the results in this table to make sure they are accurate and enter the results into Table A in Section 1 of the survey.

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| Example Table 3: Allocation of HPOG 2.0 Staff Time by Activity in Program Year 4  |
| Staff title | Management/administration | Recruitment/eligibilitydetermination | Academic supports/other skills development | Basic Skills Instruction | Employment assistance/development |
| Grant Manager | *$19,750* |  |  |  |  |
| Case Manager 1 |  | *$3,458.80* | *$24,211.60* |  | *$6,917.60* |
| Case Manager 2 |  | *$1,730* | *$12,110* | *$1,730* |  |
| ***Total staff cost*** | *$14,813* | *$10,126* | *$36,322* | *$1,730* | *$6,918* |

Note: Sample answers are included. All entries will be calculated automatically in the survey worksheet. Each cell multiplies the entry for the relevant cell from Table 2 by the entry for that staff person from column 4 in table 1.

**Appendix B. Worksheet Tables**

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| Table 1: HPOG 2.0 Staff Costs in Program Year 4 |
| **Staff title** | **1****Salary expenditure for program year** | **2****Cost of fringe benefits expenditure for program year**  | **3****Proportion of time spent on HPOG in program year**  | **4****(1 + 2) x 3****Staff costs spent on HPOG in program year**  |
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Note: Column 4 will be automatically calculated in the survey worksheet.

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| Table 2: Allocation of HPOG 2.0 Staff Time by Activity in Program Year 4  |
| Staff title | Management/Administration | Recruitment/eligibilitydetermination | Academic supports/other skills development | Basic Skills Instruction | Employment assistance/development | Totala |
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|  |  |  |  |  |  |  |
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a. The “total” column will be automatically calculated by the survey worksheet. It may be less than 100 percent if the staff member is also involved in healthcare instruction, which is not included here.

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| Table 3: Allocation of HPOG 2.0 Staff Time by Activity in Program Year 4a |
| Staff title | Management/administration | Recruitment/eligibilitydetermination | Academic supports/other skills development | Basic Skills Instruction | Employment assistance/development |
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|  |  |  |  |  |  |
|  |  |  |  |  |  |
| ***Total staff cost*** |  |  |  |  |  |

1. All entries will be calculated automatically in the survey worksheet. Entries from last row should be entered in Table A in Program Cost Worksheet.