**Linking Industry to Nursing Education (LINE) Fund**

**Frequently Asked Questions**

During the 2022 Florida Legislative Session, Senate Bill 2524 created section (s.) 1009.8962, Florida Statutes (F.S.), to establish the Linking Industry to Nursing Education (LINE) Fund, a competitive grant program that provides matching funds, on a dollar-to-dollar basis, to participating agencies that partner with a health care provider. On August 31, 2022, the Florida Department of Education (Department) released the Request for Proposal (RFP). These Frequently Asked Questions are intended to supplement the RFP. Visit <https://bit.ly/3BqEZGs> for more information on the program.

**Request for Proposal (RFP)**

1. **When will the RFP be available?**

The RFP was released on Wednesday, August 31, 2022. All required documents for the RFP submission are available at <https://www.fldoe.org/academics/career-adult-edu/funding-opportunities/2022-2023-funding-opportunities/>

1. **What are the proposal deadlines?**

Agencies intending to apply for the LINE Fund must have submitted a Notice of Intent-to-Apply form, completed and signed by an authorized agency official, to [LINE\_Fund@fldoe.org](mailto:LINE_Fund@fldoe.org) by September 15, 2022.

For consideration in the first review period, completed applications must be received by close of business (5:00 pm EDT) on October 17, 2022. Beginning on October 18, 2022, all remaining funds will be eligible for any agency demonstrating demand for grants.

For consideration in the second review period, completed proposals must be received by close of business (5:00 pm EDT) on November 1, 2022. Agencies that do not submit an application to the Department by November 1, 2022, will not be considered.

1. **How will the Department evaluate each submitted proposal?**

In order to have a proposal reviewed, the proposal submission must include all the required forms on the Application Review Criteria and Checklist. Agencies must have completed the required components in their entirety (e.g., all narrative sections addressed, all forms included, etc.) for the application to be considered complete.

Within each Narrative Component, are “Criteria.” *These are the bulleted, italicized statements used by proposal reviewers to assess and score each Narrative Component.*

Completed proposals will be reviewed and scored by at least three qualified reviewers representing experienced educational professionals. Using a standard scoring system, based on a 100-point scale, the Program Office will rank proposals in order from highest to lowest score.

1. **What if my agency submitted an incomplete proposal?**

If an agency submits an incomplete application, the Department will notify the agency of the incomplete portions. The agency will have an opportunity to amend and resubmit their completed application. In these cases, the agency’s date to be considered will reset to the date in which a completed application is received. For this reason, it is of utmost importance that complete applications are submitted.

**5.** **Should we include the health care partner's contribution in the DOE101S?**

No. The DOE101S, Budget Narrative, should only include the LINE Funds being requested. The agency’s narrative component should include information on how the agency plans to spend the health care partner’s contribution.

**6.** **What is my agency’s “DOE Assigned Project Number" mentioned on the DOE100A and DOE101S?**

The Department will assign the “DOE Assigned Project Number” once an agency is chosen to receive LINE Funds. Please leave this field blank when completing your agency’s proposal submission.

**7.** **Should we amend the Project Performance Accountability Form (PPAF) before submitting it with our proposal?**

No. Please submit the PPAF as it is provided in the RFP. A PDF of the PPAF is also available for download on the LINE Fund website.

**8.** **My agency is an independent nonprofit institution. How do we receive an “agency grant number”?**

Independent nonprofit colleges and universities submit their proposal without an agency grant number. For the required documents, please include your agency’s name in place of the grant number. If chosen for LINE Funds, the department will provide information for how to request a permanent agency grant number.

**9.** **The RFP mentions a required general assurances document and risk analysis form. When should we complete these?**

Uponthe awarding of LINE Funds, the Department will follow-up with agencies who are required to complete these documents. These do not have to be completed during the proposal submission process.

**10.** **Where do we find function and object codes for the DOE101S, Budget Narrative?**

(1)  Function Code – For School Districts Only – Enter the Function Code, as required in the Financial and Program Cost Accounting and Reporting for Florida Schools Manual, which best classifies the overall purpose or objective of the goods or services budgeted.

(2)  Object Code – Enter the Object Code which best classifies the goods or services budgeted.

* School Districts - Use the three-digit Object Code as required in the Financial and Program Cost Accounting and Reporting for Florida Schools Manual;
* Colleges and Universities - Use the first three digits of the Object Codes listed in the Florida Accounting Information Resource Manual;
* Non-public entities – Use the Object Codes that are used in the respective entity’s/agency’s chart of accounts.

**11. Does the person who signs the DOE101S, Project Application (authorized officer) need to be the same individual who signed the Notice of Intent-to-** **Apply?**

No. The signatures should be of the agency head or another authorized person on behalf of the agency. Both forms do not have to be signed by the same individuals so long as the signatures on all forms are from authorized officers.

**Health Care Partner(s)**

1. **Can an institution apply with more than one health care partner?**

Yes. Applicants are allowed to have more than one health care partner when applying for the LINE Fund. If an applicant has more than one health care partner, the applicant should submit one application with all health care partners with the total funds contributed detailed. Additionally, the applicant should submit a completed Health Care Partner Certification Form for each health care provider.

1. **Is there a maximum number of health care partners allowed?**

No.

1. **How is the “health care partner’s contribution” defined?**

For purposes of the LINE Fund, “health care partner’s contribution” means the dollars provided by an eligible health care partner to an eligible postsecondary institution.

1. **My agency has a direct support organization (DSO). Can our health care partner’s contribution be made to our DSO?**

Yes. The health care partner’s contribution can be made to either the institution or DSO.

1. **Can my health care partner contribution be made from the health care provider’s direct support organization (DSO)?**

Yes, as long as there is legal documentation showing the DSO serves a health care partner defined in s. 768.38(2), F.S.

1. **Does the health care partner’s monetary contribution have to be spent on an “eligible purpose”?**

Yes.

1. **My agency received a monetary contribution from a health care partner for our nursing program(s). Can this be considered as the contribution for our proposal?**

If the health care partner’s contribution was received by the institution on or after July 1, 2022, and the health care partner completed the Health Care Partner Certification Form (Attachment F) indicating the funds are to be used for an “eligible purpose” as outlined in Rule 6A-10.0352, Florida Administrative Code (F.A.C), then it can be included in the agency’s proposal. A contribution received before July 1, 2022, and/or does not meet the criteria for “eligible purpose” is not allowable.

1. **Does my agency have to receive the health care partner’s contribution by the time we submit our proposal?**

No. Applicants who are selected to receive LINE Funds must be in receipt of the health care partner’s contribution by March 1, 2023, in order to be disbursed LINE program funds.

1. **What documentation is required to show the agency received the health care partner’s contribution?**

Acceptable documentation includes financial statements, bank statements, budget reports, or bank letters that show the cash transaction(s).

1. **My agency received a pledge for funding from an eligible health care provider before July 1, 2022, however, the actual funding was awarded and received after July 1, 2022. Can these funds be counted as the health care partner’s contribution?**

If the health care partner’s contribution was received by the institution on or after July 1, 2022, and the health care partner completed the Health Care Partner Certification Form (Attachment F) indicating the funds are to be used for an “eligible purpose”, as outlined in Rule 6A-10.0352, F.A.C., then it can be included in the agency’s proposal. A contribution received before July 1, 2022, and/or does not meet the criteria for “eligible purpose” is not allowable.

1. **My agency’s health care partner changed their pledged contribution after we submitted our institution’s Notice of Intent-to-Apply form. Is it allowable for our proposal to list a different contribution amount than what was listed on the Notice of Intent-to-Apply form?**

Yes.

1. **How do we determine if our health care partner meets the requirements for the LINE Fund?**

The health care partner must meet these requirements: Pursuant to s. 768.38(2), F.S., a “health care provider” is defined as:

* A provider as defined in s. 408.803, F.S.
* A clinical laboratory providing services in this state or services to health care providers in this state, if the clinical laboratory is certified by the Centers for Medicare and Medicaid Services under the federal Clinical Laboratory Improvement Amendments and the federal rules adopted thereunder.
* A federally qualified health center as defined in 42 U.S.C. s. 1396d(l)(2)(B), as that definition exists on the effective date of this act.
* Any site providing health care services which was established for the purpose of responding to the COVID-19 pandemic pursuant to any federal or state order, declaration, or waiver.
* A health care practitioner as defined in s. 456.001, F.S.
* A health care professional licensed under part IV of chapter 468.
* A home health aide as defined in s. 400.462(15), F.S.
* A provider licensed under chapter 394 or chapter 397 and its clinical and nonclinical staff providing inpatient or outpatient services.
* A continuing care facility licensed under chapter 651.
* A pharmacy permitted under chapter 465.

Additionally, for purposes of the LINE Fund, the health care partner must be located and licensed to operate in the state and make a monetary contribution to the postsecondary institution.

1. **My agency is still in discussion with two different health care partners. If we name one partner in our Notice of Intent-to-Apply, is it allowable if it changes before our proposal submission?**

Yes.

**Allowable Expenses**

1. **What are allowable expenses?**

Funds may be used to award scholarships to students who are residents of the state, recruit additional faculty, purchase equipment, and support simulation centers to advance high-quality nursing education programs throughout the state.

1. **Are there any eligibility requirements for student scholarships?**

To receive a scholarship from an agency’s awarded LINE Funds, a student must be a resident for tuition purposes pursuant to section 1009.21, F.S., and be enrolled in a nursing education program.

1. **Can the health care partner’s contribution, and/or awarded LINE Funds, be used to support an endowment?**

Agencies may request state matching funds for a health care contribution in the form of an endowment that supports nursing education programs. In applying for LINE matching funds, agencies are expected to demonstrate through the RFP:

* The health care partner’s contribution (principal) toward the endowment was made or will be made during the grant period (July 1, 2022 – June 30, 2023);
* The endowment and matching dollars are planned to be used for an eligible purpose which includes “student scholarships, recruitment of additional faculty, equipment, and simulation centers;”
* The endowment and matching dollars are planned to be used to increase student enrollment and program completion;
* The endowment and matching dollars are planned to be used toexpand the institution’s nursing education programs to meet local, regional, or state workforce demands; and
* All other requirements from statute, rule, and the RFP.

Agencies submitting requests for endowments are strongly encouraged to provide as much detail as possible about the terms of the endowment. The application narrative section two, Health Care Partnership, is the appropriate place to document these terms.

Each institution with an approved proposal shall notify the Department upon receipt of the health care partner provided funds; in this case, the endowment principal, or gift. Acceptable documentation includes financial statements, bank statements, budget reports, or bank letters that show the cash transaction(s).

After that point, the agency may request reimbursements upon submission of documented allowable disbursements, plus documentation of completion of specified performance objectives.

1. **If we have a new nursing program beginning during the funding period, are we able to include it in our proposal?**

New programs may not be used to determine eligibility for the LINE Fund. However, agencies that qualify based on another existing nursing program may choose to use LINE Funds to support any nursing program, including new ones, so long as it is for an eligible purpose.

1. **May funds be used to cover administrative services?**

Yes. Administrative services for program/grant management, personnel consulting, and associated services, as well as access to technology, resources, and facilities is allowable. All administrative costs must be associated with the management of the LINE Fund and may not exceed five percent (5%) of the applicant’s total award.

Applicants must detail administrative services in the application’s DOE 101S, Budget Narrative using appropriate and individual object codes; a single listing of “administrative services” is not permissible.

1. **Are we allowed to claim eligible expenses expended during the fall 2022 term, such as scholarships awarded and personnel expenses?**

Pre-award costs are authorized for any allowable expenditure incurred on or after July 1, 2022, the effective date for Senate Bill 2524. As long as the expenses are allowable, as outlined in Rule 6A-10.0352, F.A.C., then they can be included in your agency’s proposal and budget narrative.

1. **Is it allowable for the matching funds from the health care partner to be used for salaries of existing nursing faculty, or do they need to be allocated for new faculty hired during this grant period?**

The LINE Fund statute (s. 1009.8962, F.S.) and rule (6A-10.0352, F.A.C.) specify that funds can be spent on “student scholarships, recruitment of additional faculty, equipment, and simulation centers.” In determining how to spend the funds, agencies should be mindful of costs that are recurring such as faculty salaries. The LINE Funding appropriation is not guaranteed beyond this award period.

**Budget and Finance**

1. **What is the budget period for the LINE Fund?**

The budget period for the LINE Fund is July 1, 2022, through June 30, 2023.

1. **What happens with awarded LINE Fund match dollars if they are not spent by June 30, 2023?**

The funding method for the LINE Fund is “reimbursement with performance.” Once an agency expends funds, they will submit documentation to the Department for disbursement of their awarded funds. If an agency does not submit the documentation for reimbursement by the closeout deadline of the grant period, then the funds will not be disbursed.

1. **Does the health care partner’s monetary contribution have to be spent** **by the end of the grant period?**

Yes. All funds – the health care partner’s contribution and the funds provided by the LINE Fund – must be spent by June 30, 2023.

1. **Can we include funds our health care partner has committed to our institution beyond June 30, 2023, to be matched?**

No, not for this award period.

1. **Is there a maximum amount of LINE Funds an agency can request?**

No.

1. **My agency’s health care partner would like to contribute an in-kind match, such as a physical space or staff time. Is this allowable?**

No. The health care partner’s contribution must be monetary in order to qualify for the match.

1. **Is an agency required to have the health care partner monetary contribution at the time of application submission?**

No. If the health care partner monetary contribution has not yet been received, a pledge, signed by the health care partner, will be required with the application materials. Applicants who have not received the health care partner’s contribution may be chosen to receive LINE Funds; however, funds will not be disbursed to the applicant until documentation is submitted to the Department showing the receipt of the health care partner’s contribution.

1. **When will awarded agencies be able to draw down funds?**

The funding method for the LINE Fund is reimbursement with performance. Payment is rendered upon submission of documented receipt of the health care partner’s contribution, documented allowable disbursements, and any additional required documentation of completion of specified performance objectives.

1. **What if the proposals submitted exceed the $19 million appropriation?**

The Department will award grant funding on a dollar-to-dollar basis, subject to available funds, to eligible agencies based on the outcome of the proposal review process. The Department will notify agencies of the approved proposals and award amounts.

1. **In the event the proposals submitted exceed the $19 million appropriation and an agency’s awarded LINE Funds are less than the amount requested, will the health care partner be allowed to reduce their pledge to the amount to reflect the awarded LINE Funds?**

Yes.Should the appropriation be insufficient to fund all proposals that meet the requirements and an agency’s awarded LINE Funds are less than requested, health care partners will be notified and may amend their pledged contribution, if they so choose. The Department will work with the agency to amend the submitted budget narrative to account for the total funds awarded.

1. **If funding from the health care partner and awarded funds are received in the spring 2023, must we spend all funds and receive all equipment/ simulation items by June 30, 2023?**

If awarded LINE Funds, the last date for incurring all expenditures and issuing purchase orders will be June 30, 2023. Agencies are allowed an amount of time, roughly 45 days, to submit final disbursement reports and liquidate all obligations. If awarded LINE Funds, agencies will be made aware of all timelines.

1. **If selected, when will agencies be notified about their LINE Fund proposal submission?**

The Department aims to distribute award letters as soon as possible after the second review period deadline.

1. **Will a no-cost extension be provided as an option to awarded agencies to allow funds to be spent after June 30, 2023?**

No. At this time, agencies awarded LINE Funds are advised to spend all funds by the end of the grant period.

**Other**

1. **The LINE Fund RFP lists October 15, 2022, as the deadline for the first quarterly report. Given the RFP submission deadlines, how should agencies submit a Q1 report?**

The Department will provide guidance on how to fulfill the Q1 reporting requirement once award letters are issued.

1. **Whom should an agency contact with questions about the LINE Fund?**

All questions regarding the LINE Fund should be sent to LINE\_Fund@fldoe.org.

1. **What are the reporting requirements for agencies receiving LINE Funds?** Quarterly, agencies that have been awarded LINE funds must report to the Department the amount and use of funds, as outlined in the proposal, expended in the prior three months. The Department will release guidelines for agencies to securely transmit electronic files, no later than 30 days before submission deadline. The submission deadlines for the quarterly reports may be found in the LINE Fund RFP under “Reporting Outcomes.”

Annually, by February 1, institutions that have been awarded LINE funds must report to the Department all information required by s. 1009.8962(9)(b), F.S. No later than thirty (30) days before the submission deadline, the Department will release guidelines for institutions to transmit an electronic file to meet this requirement.