



### I RECEIVED A GRANT, NOW WHAT?

This worksheet is designed to guide a child care provider in planning for the use of their Reinvigorate Child Care Stabilization Grant funds. As a grant recipient, it is your responsibility to make sure grant funds are spent in within allowable spending categories described in state and federal guidance. Guidance from the Administration for Children and Families (ACF) may be found at: <https://www.acf.hhs.gov/occ/training-technical-assistance/office-child-care-covid-19-resources>

#### Getting Ready



As you get ready to spend your grant funds, **ask yourself**: Does your program have a budget that lists all program expenses?

If not, we recommend you start by creating a budget or list of all program expenses you have. You may choose to use a template, such as an excel document, an online accounting software, or a simple list of all expenses. You may reference the Business Resource Toolkit for budget templates and guidance: <http://kids.ri.gov/cabinet/funding-opportunities/>.

Take a moment to create, locate, or review your list of expenses before moving on.

#### Assessing your Needs

Most businesses have 2 types of expenses:

- **“Need to have” or non-discretionary expenses-** These are essential expenses that are required to keep your business open and operating. For example, staffing costs, food for meals and snacks, and rent/mortgage costs are essential. Without these, the program could not operate.
- **“Nice to have” or discretionary expenses-** These are non-essential expenses that a business can survive without, if necessary. For example, a program may subscribe to a children’s magazine that gets delivered weekly. While the magazine enhances the children’s experience in their reading corner/center, the program could still operate, and provide safe care, without the magazine.



Review each of your budgeted line items and **ask yourself**: Is this cost essential to keeping my business open and operating?

If the answer is yes, it is likely a “Need to have” expense; this expense should be prioritized in your spending plan. If the answer is no, it may be a “Nice to have” expense. You may choose to spend grant funds on this expense *after* your “Need to have” expenses have been covered.

Take a moment to identify the “Need to have” and “Nice to have” expenses in your budget.

#### Making a Plan

As you start to develop your spending plan, consider these questions:



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- Now that I've identified the "need to have" expenses, are these allowable according to state guidance?
  - How can I use grant funding to respond to feedback from my recent unannounced monitoring visits? (i.e. Repairing a damaged outdoor fence)
- When do I need to spend these funds- immediately or over time?
- What are my program's "nice to have" expenses? Do those expenses increase the overall quality of care delivered in my program? Do I have remaining grant funds to cover those expenses?

### Document your plan

The fillable worksheet below can be used to plan out use of your grant funds. You may choose to enter your full grant award in row 1, or you could enter your monthly award in row 1 and update this worksheet each month.

- If you choose to enter your *monthly award* in row 1, be sure to only list your *monthly expenses* in rows 2-8.
- If you choose to enter your *total award* in row 1, be sure to list your *total expenses* for 3 months (Centers) or 6 months (Home-based providers) in rows 2-8.

1	Enter grant award here:	\$
Review the following approved spending categories and select the categories where you anticipate "Need to have" expenses. This means, if you don't dedicate funds to this spending category, your business could not remain open. Then enter the spending total amount in the column:		
2	<input type="checkbox"/> <b>Personnel Costs.</b> <i>Examples:</i> <ul style="list-style-type: none"> <li>○ Payroll and salaries or similar compensation for an employee (including any sole proprietor or independent contractor)*,</li> <li>○ Employee benefits (such as health, dental, or vision insurance; paid sick or family leave; and retirement contributions),</li> <li>○ Costs for employee recruitment and retention,</li> <li>○ Ongoing professional development or training,</li> <li>○ Premium or hazard pay, staff bonuses, and employee transportation costs to or from work.</li> </ul> <p>*Keep in mind that Rhode Island minimum wage will gradually increase to \$15.00 over the next 4 years. Refer to Webinar 2 for more details about how to plan for this increase.</p> <p><i>For Child Care Center providers to be eligible for the 10% Staff Bonus Add-on, at least 10% of total award must be dedicated to wage enhancements, hazard pay, or spot bonuses (one time or recurring).<sup>1</sup></i></p>	\$
3	<input type="checkbox"/> <b>Equipment or supplies needed to respond to COVID-19.</b> <i>Example: business software upgrades, room dividers, or floor stickers for social distancing.</i>	\$

<sup>1</sup> Personnel Costs: A *wage enhancement* is a long-term or permanent salary or hourly wage increase. *Hazard pay* is a short-term increase in income to compensate employees for working in difficult conditions. A *spot bonus* is a one-time or recurring lump-sum payment in addition to normal wages.



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4	<input type="checkbox"/> <b>Goods or services required to maintain ongoing child care services.</b> <i>Examples: Goods may include: food, equipment and materials to facilitate play, learning, eating, diapering/toileting, and safe sleep. Services may include business automation training, child care management services, food services, or transportation. This may also include fees associated with licensing and costs associated with meeting licensing requirements.</i>	\$
5	<input type="checkbox"/> <b>Mental Health Supports.</b> <i>Examples: infant and early childhood mental health consultation, or mental health consultations for staff.</i>	\$
6	<input type="checkbox"/> <b>Personal Protective Equipment.</b> <i>Examples: Personal protective equipment, cleaning and sanitization supplies and services, or training and professional development related to health and safety practices.</i>	\$
7	<input type="checkbox"/> <b>Rent or mortgage.</b> <i>Examples: Rent (including rent under a lease agreement) or payment on any mortgage obligation, utilities, facility maintenance or improvements, or insurance.</i>	\$
8	<input type="checkbox"/> <b>Expenses incurred after January 31, 2020 related to COVID-19.</b> <b>Note:</b> Please ensure that any expenses must still be within the allowable spending categories.	\$
9	Add totals in rows 2-8. Enter the amount here:	\$
10	Subtract total in row 9 from total grant amount in row 1. Enter that amount here:	\$
<p>Remaining funds may be spent in the categories above for “Nice to have” items. That is, expenses that are not essential for keeping your business open, rather increase the quality of services.</p>		