

Song-Brown Registered Nurse (RN) Education Programs Capitation & Special Programs Funding

Technical Assistance Guide July 2020

About Song-Brown

- Song-Brown provides funding to education programs:
 - Family Medicine, Internal Medicine, Pediatrics, OB/GYN residency programs
 - Family Nurse Practitioner/Physician Assistant training programs
 - Registered Nurse education programs
- Song-Brown provides financial incentives to programs to:
 - Train graduates in medically underserved areas
 - Attract and admit members of underrepresented minority groups
 - Place graduates in medically underserved areas

Application Release Dates

Registration: Open now

Application release: September 1, 2020

Application deadline: October 2, 2020

All applications open and close at 3:00 p.m.

Before You Apply

- If your program requires approval to contract from a coordinating authority, please inform the authority of terms and conditions contained in the Grant Agreement.
- Applicants must agree to the terms and conditions before receiving funds.
- OSHPD **will not** make changes to the terms and conditions specified in the Grant Agreement.
- Funds shall not supplant existing state or local funds.

Information to Gather

- Grant Agreement and Payee Data record (STD-204) signatories.
- Enrollment rates, attrition rates, and NCLEX pass rates.
- Name and full address of your training sites used in the last academic year.
- Race/ethnicity data for students graduating Academic Year (AY) 2020-21 and AY 2021-22.
- High school information (name and address) for all current students.

Information to Gather, Continued

- Data for AY 2017-18 and AY 2018-19 graduates, including current practice site location and race/ethnicity.
- National Provider Identification number for MSN students and graduates you enter.
- Applicable required attachments
 - BRN approval letter
 - BRN Report of Findings
 - Letters of support

Funding Meeting

- Funding Meeting: January 13-14, 2021.
- Program presentation by invitation only.
- Commission makes final awards at the funding meeting.
- We encourage you to attend to learn from presenters and engage in discussion related to future funding.

Available Funding: Capitation

An estimated \$1.725 million is available to fund RN Education Programs Capitation applications.

- Maximum funding requested is based on the program type:
 - ADN Programs – \$200,000 maximum (\$10,000 per student per year, up to 10 students, for 2 years).
 - BSN Programs – \$240,000 maximum (\$12,000 per student per year, up to 10 students, for 2 years).
 - MSN Programs – \$240,000 maximum (\$12,000 per student per year, up to 10 students, for 2 years).

Available Funding: Special Programs

An estimated \$1 million is available to fund RN Education Programs Special Programs applications.

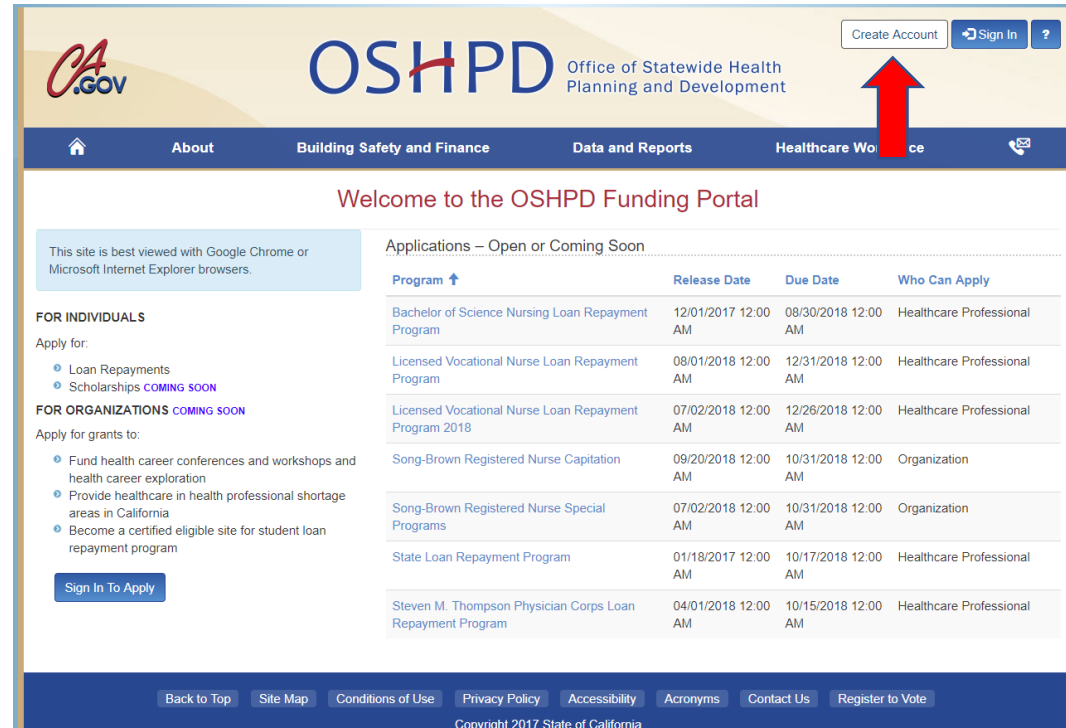
- Maximum award of \$125,000 for a project lasting no longer than 2 years.
- Program must focus on matriculation and pipeline (e.g., ADN to BSN; BSN to MSN; ELM to MSN).

Helpful Resources

- OSHPD eApp
<https://eapp.oshpd.ca.gov/funding/>
- RN Grant Guide
<https://oshpd.ca.gov/ml/v1/resources/document?rs:path=/Loan-Repayments-Scholarships-Grants/Documents/Song-Brown/RN-Grant-Guide.pdf>
- Song-Brown Program Glossary
<https://oshpd.ca.gov/ml/v1/resources/document?rs:path=/Loan-Repayments-Scholarships-Grants/Documents/Song-Brown/Song-Brown-Program-Glossary.pdf>
- Scoring and Evaluation Process
<https://oshpd.ca.gov/ml/v1/resources/document?rs:path=/Loan-Repayments-Scholarships-Grants/Documents/Song-Brown/FNP-PA-Application-Scoring-Explanation.pdf>

Registering for eApplication (eApp)

Creating an Account



The screenshot shows the OSHPD Funding Portal website. At the top, there is a navigation bar with the CA.GOV logo, the OSHPD logo, and the text "Office of Statewide Health Planning and Development". To the right of the logo is a "Create Account" button, a "Sign In" button, and a help icon. A red arrow points to the "Create Account" button. Below the navigation bar is a "Welcome to the OSHPD Funding Portal" message. On the left, there are sections for "FOR INDIVIDUALS" and "FOR ORGANIZATIONS COMING SOON". On the right, there is a table titled "Applications – Open or Coming Soon" with columns for Program, Release Date, Due Date, and Who Can Apply.

Program ↑	Release Date	Due Date	Who Can Apply
Bachelor of Science Nursing Loan Repayment Program	12/01/2017 12:00 AM	08/30/2018 12:00 AM	Healthcare Professional
Licensed Vocational Nurse Loan Repayment Program	08/01/2018 12:00 AM	12/31/2018 12:00 AM	Healthcare Professional
Licensed Vocational Nurse Loan Repayment Program 2018	07/02/2018 12:00 AM	12/26/2018 12:00 AM	Healthcare Professional
Song-Brown Registered Nurse Capitation	09/20/2018 12:00 AM	10/31/2018 12:00 AM	Organization
Song-Brown Registered Nurse Special Programs	07/02/2018 12:00 AM	10/31/2018 12:00 AM	Organization
State Loan Repayment Program	01/18/2017 12:00 AM	10/17/2018 12:00 AM	Healthcare Professional
Steven M. Thompson Physician Corps Loan Repayment Program	04/01/2018 12:00 AM	10/15/2018 12:00 AM	Healthcare Professional

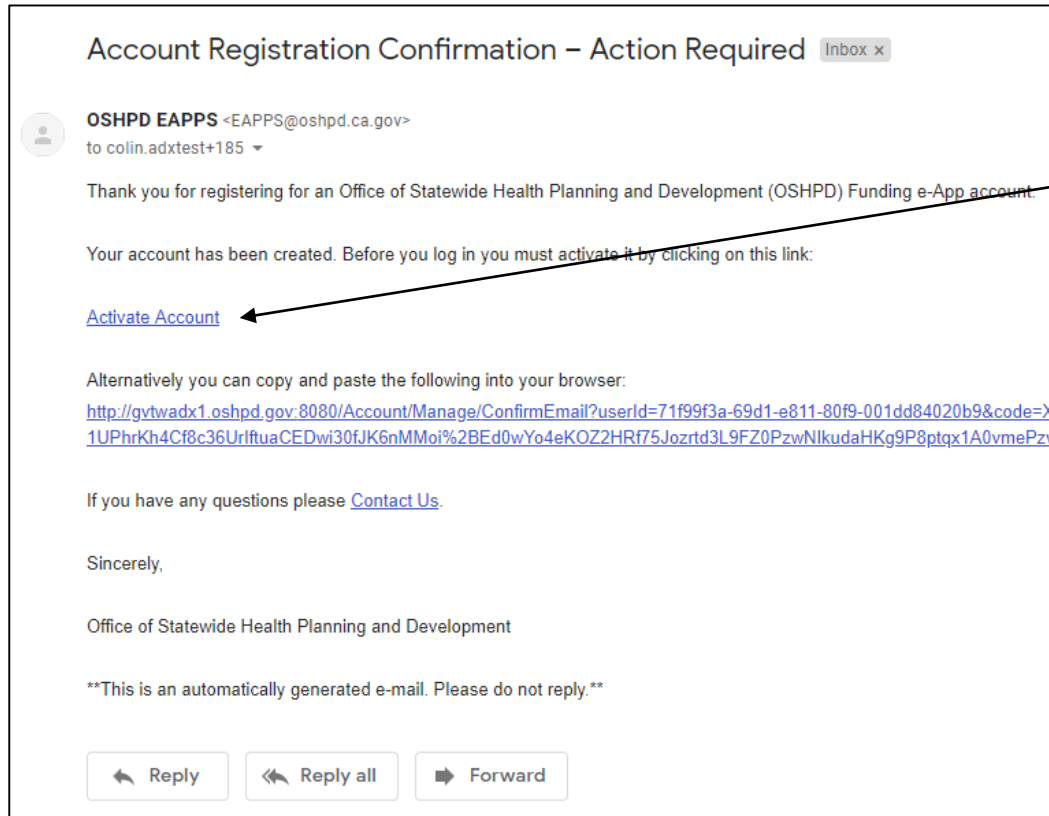
If you are a new applicant, register now – do not wait.

Note: For the best experience, use Internet Explorer browser.

Registration

1. After creating a new account you will receive a validation email.
2. Click “Activate Account” to be taken to your Profile page.
3. Please allow 1-3 minutes to receive the email.

Note: If you don't see the email, please check your spam folder.

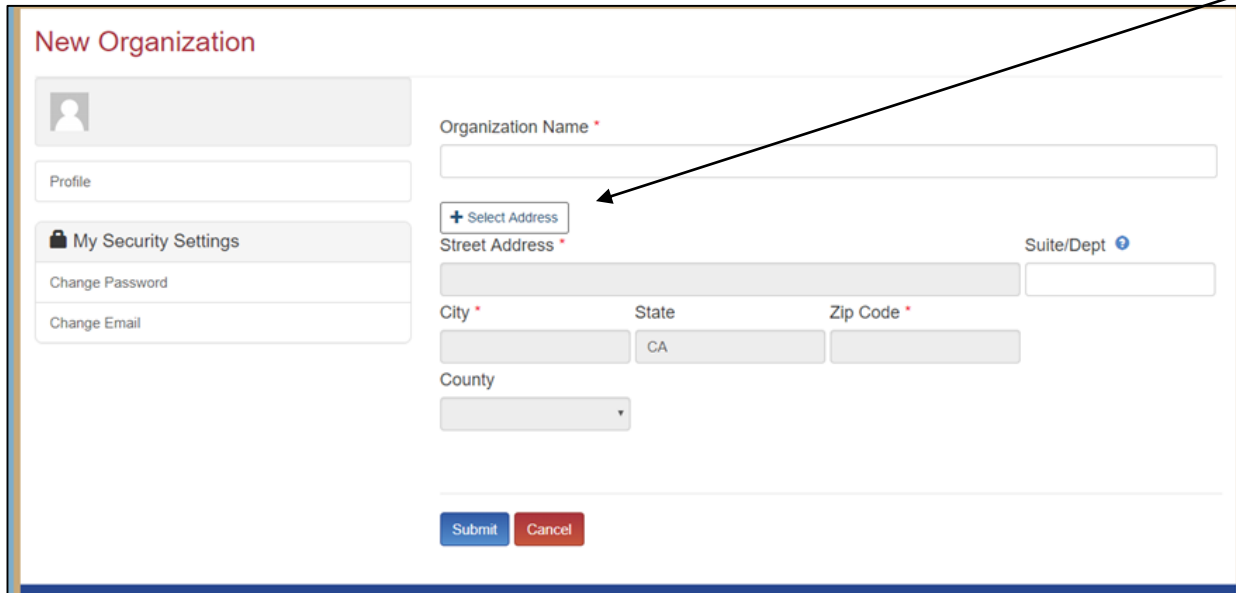


Setting up Your Profile

The screenshot shows a web interface for setting up a profile. On the left is a sidebar with 'Profile' (selected), 'My Security Settings', 'Change Password', and 'Change Email'. The main area has a green confirmation message: 'Your email has been confirmed successfully.' Below this, it says 'Select your user type (Choose all that are applicable):*'. There are three checkboxes: 'Healthcare Professional', 'Student', and 'Organization'. An arrow points from instruction 1 to the 'Organization' checkbox. Below the checkboxes, it says 'Select an organization from the search list below. If your organization is not listed, click on the Request New Organization button to submit a request for your organization to be added to the list.' There is a search input field with a magnifying glass icon. An arrow points from instruction 2 to this icon. Below the search field is a blue button labeled 'Request New Organization'. An arrow points from instruction 3 to this button. An arrow from instruction 4 points to the search field.

1. Check the “Organization” box to gain access to Song-Brown RN applications (do not check the “HealthCare Professional” box).
2. Click the magnifying glass to search for a pre-existing organization.
3. Click “Request New Organization” to submit a new organization for approval.
4. Once you have selected or submitted an organization, it will populate the search field.

Adding a New Organization

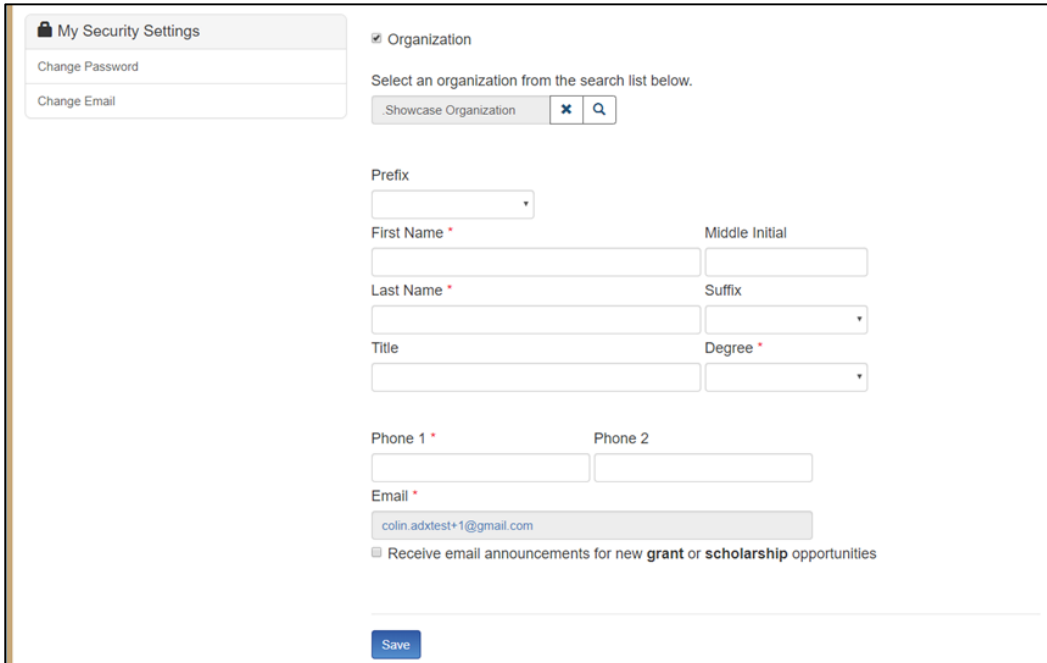


The screenshot shows a web form titled "New Organization". On the left is a sidebar with a profile icon, a "Profile" section, and a "My Security Settings" section containing "Change Password" and "Change Email" links. The main form area contains the following fields: "Organization Name" (required), a "+ Select Address" button, "Street Address" (required), "Suite/Dept" (optional), "City" (required), "State" (pre-filled with "CA"), "Zip Code" (required), and "County" (dropdown). At the bottom are "Submit" and "Cancel" buttons. An arrow points from the first step of the instructions to the "+ Select Address" button.

1. Enter the new "Organization Name".
2. Click the "+Select Address" button.
3. A new window opens, and you can enter and search for an address.
4. Click the confirmed address and it will auto-populate the address fields on the page.

Note: Song-Brown staff will review the new organization request within 5 business days. During this time, you may still begin an application.

Completing Your Profile

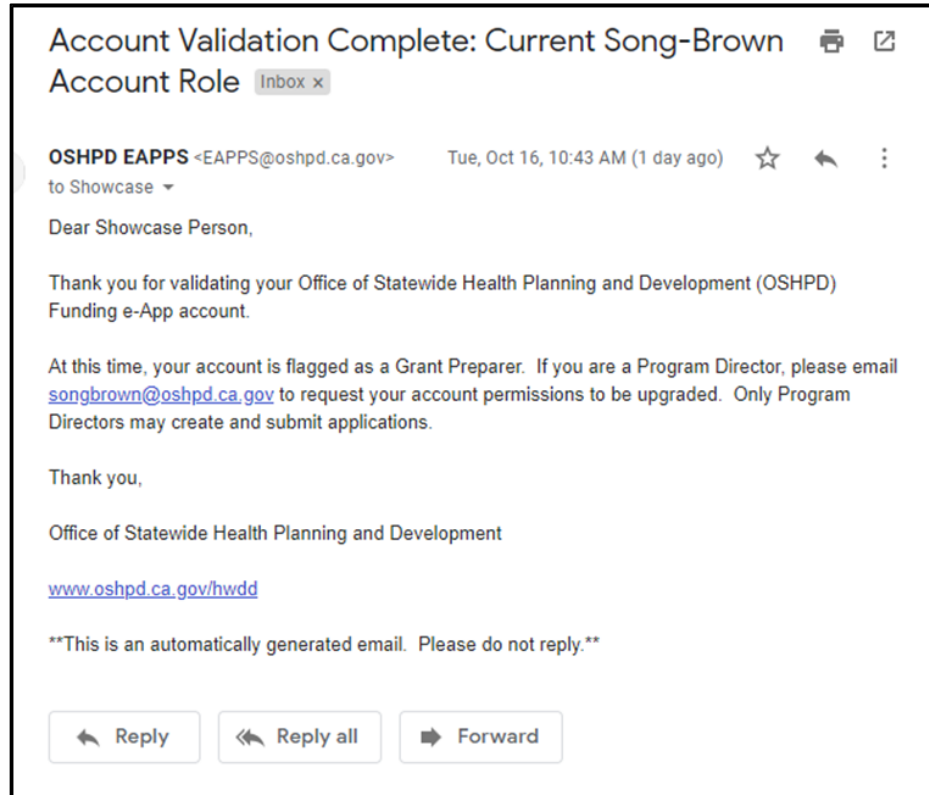


The screenshot shows a web form titled "My Security Settings" with a sidebar containing "Change Password" and "Change Email" links. The main form area is titled "Organization" and includes a search bar with a "Showcase Organization" button and a search icon. Below the search bar, there are several input fields: "Prefix" (a dropdown menu), "First Name" (required, marked with a red asterisk), "Middle Initial", "Last Name" (required, marked with a red asterisk), "Suffix" (a dropdown menu), "Title", and "Degree" (required, marked with a red asterisk). There are also fields for "Phone 1" (required, marked with a red asterisk) and "Phone 2". An "Email" field is shown with the example "colin.adtest+1@gmail.com". At the bottom, there is a checkbox for "Receive email announcements for new grant or scholarship opportunities" and a blue "Save" button.

1. Enter all required fields. When finished click the “Save” button.
2. If there are no errors on the page you will receive a message that your profile has been updated successfully.

Note: Incomplete information may delay your registration.

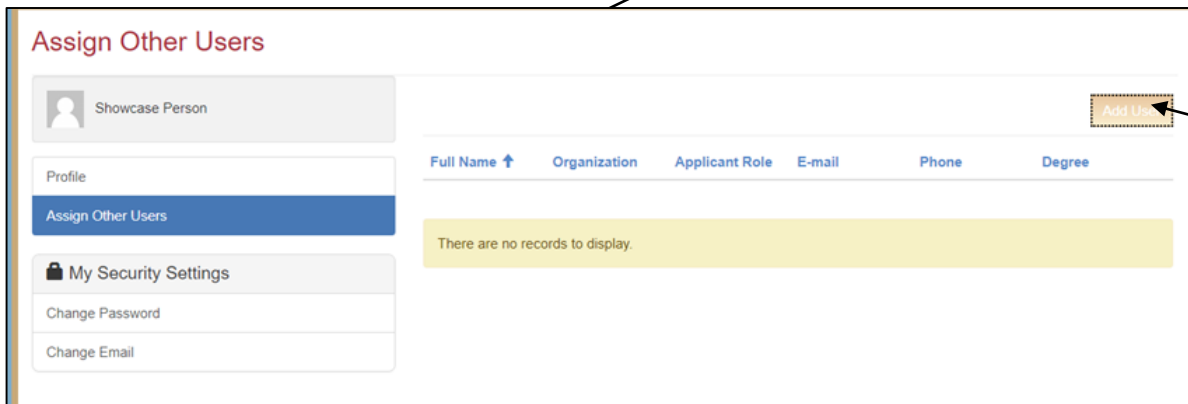
Account Roles



1. All newly created accounts are assigned the “Grant Preparer” role.
2. If you are the training Program Director, email SongBrown@oshpd.ca.gov to request the “Program Director” role.
3. Only accounts with the “Program Director” role may initiate and submit applications.
4. Once Song-Brown staff approves your request you will receive a follow-up email confirming the approval.

Note: Program Directors may initiate, view, edit, and submit applications. Grant Preparers may view and edit applications only.

Assigning Other Users



1. Program Directors have an additional tab on their “Profile” page called “Assign Other Users”.
2. Navigating to this page from your “Profile” page allows you to add users who may only view and edit applications.
3. Click the “Add User” button to give registered Grant Preparers access to your applications.

Apply Here

CA.GOV

OSHPD Office of Statewide Health Planning and Development

Apply Here Applications - In Progress/Submitted Awards Payments Messages

Open grant applications matching your Profile are displayed below. To find additional applications, please change the applicable user type

Program	Release Date	Due Date
Song-Brown Registered Nurse Capitation	10/15/2018 8:00 AM	10/31/2018 5:00 PM
Song-Brown Registered Nurse Special Programs	10/15/2018 3:00 PM	10/31/2018 5:00 PM

1. Navigate to the “Apply Here” page on the main menu.
2. Select the applicable “Song-Brown Registered Nurse” link.

Helpful Tips

Useful Information

Navigating the application

Use the “Previous” and “Save & Next” buttons found at the bottom left of each page.



Saving your application

The eApp saves your application each time you click “Save & Next”. Navigate to the “Applications-In Progress/Submitted” page to resume your application.



Useful Information, Continued

Asterisks

A red asterisk indicates a required response before you can proceed to the next page.

Training Program Title *



Tooltips

Throughout the application you may see a blue circle with a question mark at the end of a question, title, or sentence. Click on these icons for additional information.

The last name of the primary contact at the contract organization.

Contract Administrator Last Name * ?



Starting the Application

Program Information

Application SBRNC-1000678 – Song-Brown Registered Nurse Capitation

Program Information *

Song-Brown Registered Nurse Capitation 2020

Organization

Nintendo Generation

Are you a Board of Registered Nursing (BRN) approved pre-licensure program? *

☐ No ☒ Yes

Program Type *

☐ Associate Degree of Nursing (ADN) ☐ Bachelor of Science, Nursing (BSN) ☒ Master of Science, Nursing (MSN)

Are you a former Song-Brown applicant? *

☐ No ☒ Yes

☒ Training Program not listed

Please enter information for the new program.

Training Program Title *

zzzhotpiezzz

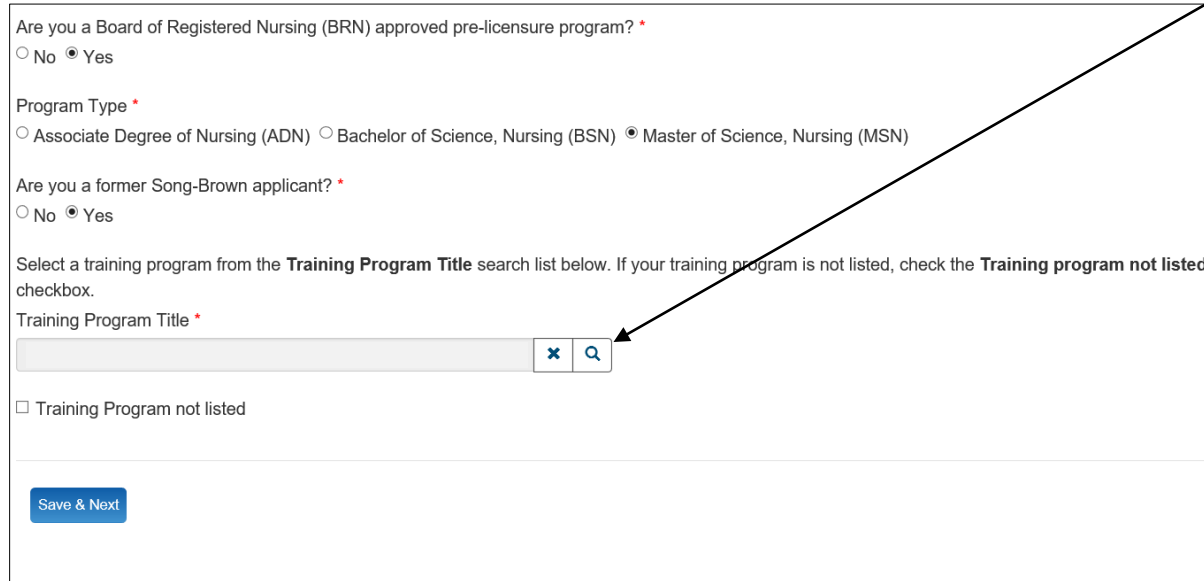
Click on the Select Address button to populate the Address Fields.

[+ Select Address](#)

1. Your program information pre-populates with information you entered in your “Profile” page.
2. The “Organization” name is the applicant’s organization as listed on the applicants eApp profile.
3. The “Organization” name is not editable in the application, go to the applicant’s profile to change it.
4. Select the “Program Type” you want to apply for.

Program Information, Continued

1. The “Training Program Title” is the official name of the school’s training program and will be listed on the Agreement.
2. Select an existing “Training Program Title” by clicking on the magnifying glass.
3. To link data from prior applications to the new application, use the magnifying glass search function to select the “Training Program Title” from the list.
4. If your training program is not listed, check the box “Training Program not listed”.



Are you a Board of Registered Nursing (BRN) approved pre-licensure program? *

☐ No ☒ Yes

Program Type *

☐ Associate Degree of Nursing (ADN) ☐ Bachelor of Science, Nursing (BSN) ☒ Master of Science, Nursing (MSN)

Are you a former Song-Brown applicant? *

☐ No ☒ Yes

Select a training program from the **Training Program Title** search list below. If your training program is not listed, check the **Training program not listed** checkbox.

Training Program Title *

☐ Training Program not listed

An arrow points from the magnifying glass icon in the search bar to the second step of the list on the right.

Program Information, Continued

The screenshot displays a web form for 'Program Information'. A checkbox labeled 'Training Program not listed' is checked. Below it is a text field for 'Training Program Title'. A blue button labeled '+ Select Address' is positioned below the title field. Further down are fields for 'Street Address', 'Suite/Dept', 'City', 'State', 'Zip Code', and 'County'. An arrow points from the 'Training Program not listed' checkbox to the 'Training Program Title' field. A search window is open, showing a search bar with '401 pioneer ave' and a 'Search' button. Below the search bar, under 'Search Results', are two address suggestions: '401 Pioneer Ave, Woodland, CA 95776' and '401 N Pioneer Ave, Negaunee, MI 49866'. A 'Close' button is at the bottom right of the search window.

1. If you select the box “Training Program Not Listed”, new fields will appear.
2. Type in the program name under “Training Program Title”.
3. Click the “+Select Address” button.
4. A new window opens and allows you to enter and search for an address.
5. Click the confirmed address and it will auto-populate the address fields on the page.

Note: You will see this feature throughout the application.

Contract Administration

Contract Administration		
Contract Organization Name *		
XY Campus		
Prefix	Contract Administrator First Name *	Contract Administrator Last Name *
<input type="checkbox"/>	Blue	Jay
Title		
Rep		
Phone 1 *	Phone 2	
(444) 444-4444		
Contract Administrator Email *		
skingfanchoc@live.com		
Grant Agreement Signatory		
First Name *	Last Name *	Phone *
Yellow Bill	Maggie	(888) 888-7777
Email *		
Skings@live.com		
STD 204 Signatory is the same as Grant Agreement Signatory		
<input type="radio"/> No <input checked="" type="radio"/> Yes		
This is the remit to address where payments should be mailed.		
Street Address *	Suite/Dept	
15515 S Street	101	
City *	State *	Zip Code *
Sacramento	CA <input checked="" type="checkbox"/>	95814
County *		
Sacramento <input checked="" type="checkbox"/>		

1. Type in the “Contract Organization Name”. This is the official business name as reported to the Internal Revenue Service, and will be included in the Grant Agreement.
2. The “Grant Agreement Signatory” must be an individual with authority to enter into the Grant Agreement.
3. The “STD. 204 Signatory” name must be an authorized signatory.
4. The Street Address field is a text field that allows P.O. Box numbers.

Program Description

1. Complete both required fields.
2. There is a maximum 2,500 character limit for each question.
3. After completing this page, click “Save & Next”.

Note: If you exceed the character limit, you will receive a pop-up message. If you copy and paste text from another document, text will be cut off at 2,500 characters for each page. Please double-check the information you enter and make sure everything is captured.

Application SBRNC-1000641 – Song-Brown Registered Nurse Capitation

14%

Program Data

Select the data you will be reporting: *

☐ Student and Graduate data ☒ Student data only ☐ New program: no student or graduate data

Please provide an executive summary description of your training program. *

This is only a test

What is your program's current percentage of total clinical hours spent in registered nurse shortage areas? If you are a new program, please enter your projected percentage. *

75 %

What year did the program begin continuous operation? *

1999

[Previous](#) [Save & Next](#)

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Program Data

Application SBRNSP-1000671 – Song-Brown Registered Nurse Special Programs

0%

Program Data

Select the data you will be reporting: *

☒ Student and Graduate data ☐ Student data only ☐ New program: no student or graduate data

Would you like to import student, graduate, and training site data from your last application?*

☐ No ☒ Yes

1. After selecting the data you will report, more fields will populate.
 2. The Import data option defaults to “Yes”.
- To import training site, student, and graduate data from your prior application into the new application, use the magnifying glass search function on the “Program Information” page to select the “Training Program Title”.
 - If you did not apply in 2019, select “No” to the import question. In this case, add all training site, student, and graduate data one by one on the appropriate page.

Program Data, Continued

What is your program's current percentage of total clinical hours spent in registered nurse shortage areas? If you are a new program, please enter your projected percentage.*

33 %

The program has been in continuous operation since what year?*

2019

Instructions: Enter data in each field for the **graduating class** for each academic year shown as applicable. If no data exists for one of the academic years, enter a zero (0) in each field for that year.

	2018/2019 Academic Year	2017/2018 Academic Year
Total Enrollment Capacity	1	1
Qualified Student Applicants	1	1
Students Accepted	1	1
Students Enrolled	1	1
Students Graduated	1	1
Attrition Rate (%)	1	1
First Time NCLEX Pass Rate (%)	1	1

1. The number of students and graduates entered here must match the corresponding number entered on the “Student Data” and “Graduate Data” pages.
2. After completing this page, click “Save & Next”.

Training Sites

Training Sites

To add a new training site, click on the **Add a Site** button and enter the required information.

If your organization was a past applicant and you opted to include training site information from the last submitted application, the table below displays your sites. To edit information or delete training sites that no longer exist, click on the **Options** button next to a training site name and select **Edit** or **Delete**.

It will take the data approximately 10 – 15 minutes to load. Please wait and then refresh the page to view your data.

Total Number of Training Sites

1

Training Sites With Errors

Training Site Name	Private Practitioner	Title	Private Practitioner First Name	Private Practitioner Last Name	Street Address	Suite/Dept	City	State	Zip Code	County	Options
There are no records to display.											

Training Sites With No Errors

Add a Site

Training Site Name	Private Practitioner	Title	Private Practitioner First Name	Private Practitioner Last Name	Street Address	Suite/Dept	City	State	Zip Code	County	Options
--------------------	----------------------	-------	---------------------------------	--------------------------------	----------------	------------	------	-------	----------	--------	---------

1. You must include all current training sites on your application.
2. Imported training sites
 - If you selected “Yes” to import prior year’s data on the “Program Data” page, you will see training sites from the prior year’s application.
 - Verify the imported site information is correct.
 - Edit or delete an imported site by selecting the “Options” dropdown list for that line.

Training Sites: Add New Sites

The screenshot displays a web application interface for managing training sites. At the top, a header reads "Training Sites With No Errors". Below this is a table with the following columns: Training Site Name, Private Practitioner, Title, Private Practitioner First Name, Private Practitioner Last Name, Street Address, Suite/Dept, City, State, Zip Code, County, and Options. A single row is visible in the table with the following data: ABC Training Site, Yes, MD, Jane, Doe, 452 N St, Suite/Dept, Sacramento, CA, 95814, Sacramento, and a dropdown arrow. To the right of the table is a blue button labeled "Add a Site". Below the table are two buttons: "Previous" and "Save & Next". A "Create" pop-up window is overlaid on the bottom half of the page. It contains the following fields: "Training Site Name*" (text input), "Is the training site a private practitioner's office?*" (radio buttons for No and Yes), "+ Select Address" (button), "Street Address*" (text input), "Suite/Dept" (text input with a help icon), "City" (text input), "State" (text input), "Zip Code" (text input), and "County" (text input).

Training Site Name	Private Practitioner	Title	Private Practitioner First Name	Private Practitioner Last Name	Street Address	Suite/Dept	City	State	Zip Code	County	Options
ABC Training Site	Yes	MD	Jane	Doe	452 N St	Suite/Dept	Sacramento	CA	95814	Sacramento	▼

Previous Save & Next

Create

Training Site Name*

Is the training site a private practitioner's office?*

☐ No ☐ Yes

+ Select Address

Street Address* Suite/Dept

City State Zip Code

County

- Click the “Add a Site” button.
- A pop-up window will display.
- Complete all required fields.

Training Sites: Edit or Delete Sites

1. Scroll to the far right for the “Options” column.
2. Click the down-arrow button next to the desired entry.
3. This menu gives you the options to edit or delete each individual entry.
4. After completing this page, click “Save & Next”.

Training Sites With No Errors

Add a Site

Training Site Name	Private Practitioner	Title	Private Practitioner First Name	Private Practitioner Last Name	Street Address	Suite/Dept	City	State	Zip Code	County	Options
ABC Training Site	Yes	MD	Jane	Doe	452 N St		Sacramento	CA	95814	Sacramento	▼

Previous Save & Next

Program Funding and Expenditures

1. Complete all required fields.
2. After completing this page, click “Save & Next”.

Note: List total program expenses for the year, not the amount of grant funding requested. The “Total” program expenses must be equal to or greater than the total requested Song-Brown funding.

42%

Program Expenditures and Funding

Enter your annual program expenditures for the 2019-20 Academic Year below for each line item.

Personnel*	\$ 44
Operating Expenses*	\$ 66
Major Equipment*	\$ 88
Other Costs*	\$ 99
Total	297

Number of Students *	Capitation Rate	Contract Term	Total Capitation
2	12,000.00	2	\$ 48,000

[Previous](#) [Save & Next](#)

Student Data

Students Data

To add a new student, click on the **Add a Student** button and enter the required information. National Provider Identifier (NPI) numbers are optional for students. To check if a student has an NPI number, check the [NPI Registry](#).

If your organization was a past applicant and you opted to include student data from the last submitted application, the table below displays those students. To edit information or delete individuals no longer in the program, click on the **Options** button next to an individual's name and select **Edit** or **Delete**. If the individual graduated, select **Edit** and change the individual from **Student** to **Graduate**.

Total Number of Students


2

Students With Errors

Graduating Class of Academic Year Ethnic/Racial Category

There are no records.

Students With No Errors

Graduating Class of Academic Year	First Name	Last Name	Gender	Ethnic/Racial Category	Options
2020/21	d	d	Male	Asian - Filipino	

Previous **Save & Next**

Graduating Class of Academic Year First Name Last Name Gender Ethnic/Racial Category Options

1. Your application must include all current students with a projected graduation in Academic Year (AY) 20/21 and AY 21/22.
2. Imported student data
 - If you selected “Yes” to import prior year’s data on the “Program Data” page, student data from the prior year’s application appears.
 - Verify the student information is correct.
 - Edit or delete imported students by selecting the “Options” dropdown list for that line.
 - Click the down-arrow button next to the desired entry.

Note: NPI numbers are optional for MSN students.

Student Data: Add New Students

Students With No Errors

Add a Student

Graduating Class of Academic Year First Name Last Name Gender Ethnic/Racial Category

There are no records to display.

Previous Save & Next

Create

Graduating Class of
2020/21

First Name Last Name

Gender Ethnic/Racial Category

Please provide the name and address of the high school this individual graduated from or the home address if the individual was homeschooled or received a GED. Click on the Not applicable checkbox if the individual did not receive a high school diploma or GED within the United States.

☐ Student HS Not Applicable

High School Name

Click on the Select Address button to populate the Address Fields.

Select Address

Student HS Address

Student HS City Student HS State Student HS Zipcode

Student HS County

- Click the “Add a Student” button.
- A pop-up window displays.
- Complete all required fields.

Note: Provide the home address for all students that were homeschooled or received a General Educational Development (GED) certification.

Student Data: Edit New Student Entries

Students With No Errors

Add a Student

Graduating Class of Academic Year	First Name	Last Name	Gender	Ethnicity/Racial Category	Options
2020/21	d	d	Male	Asian - Filipino	

Previous Save & Next

1. Scroll to the far right for the “Options” column.
2. Click the down-arrow button next to the desired entry.
3. This menu gives options to edit or delete each individual entry.
4. After completing this page click “Save and Next”.

Note: The number of students per year listed here must match the number listed under the 18/19 and 17/18, “Students Enrolled” row on the Program Data page.

Graduate Data

Graduate Data

To add a new graduate, click on the Add a Graduate button and enter the required information. National Provider Identifier (NPI) numbers are required for graduates. To find a graduate's NPI number, check the [NPI Registry](#).

If your organization was a past applicant and you opted to include graduate data from the last submitted application, the table below displays those graduates. To edit information, click on the Options button next to an individual's name and select Edit or Delete.

The number of graduates entered on this page must reflect the students graduated data you reported for the academic years in the Program Data section of this application.

Total Number of Graduates

2

Graduates With Errors

Graduating Class of Academic Year	First Name ↑	Last Name	Gender	Ethnic/Racial Category	Options
There are no records to display					

Graduates With No Errors

Add a Graduate

Graduating Class of Academic Year	First Name ↑	Last Name	Gender	Ethnic/Racial Category	Options
2017/18	f	d	Male	Asian - Laotian/Hmong	▼

Previous Save & Next

1. You must include all AY 17/18 and AY 18/19 graduates.
2. Imported graduate data
 - If you selected “Yes” to import prior year’s data, the graduate data from the prior year’s application appears.
 - Verify the imported graduate information is correct.
 - Edit or delete imported graduates by selecting the “Options” dropdown list for that line.
 - Click the down-arrow button next to the desired entry.

Graduate Data: Add New Graduates

Graduates With No Errors

Add a Graduate

Graduating Class of Academic Year	First Name	Last Name	Gender	Ethnic/Racial Category	Options
2017/18	f	d	Male	Asian - Laotian/Hmong	▼

Previous Save & Next

Graduating Class of *

First Name * Last Name *

Gender * Ethnic/Racial Category *

☐ HPEF Scholar ☐ NHSC Recipient

Practice Specialty *

- Click the “Add a Graduate” button.
- A pop-up window will display.
- Complete all required fields.

Note: Graduate Practice Specialty is only required for MSN program graduates.

Graduate Data: Edit or Delete New Graduates

Graduates With No Errors

Add a Graduate

Graduating Class of Academic Year	First Name ↑	Last Name	Gender	Ethnicity/Racial Category	Options
2017/18	f	d	Male	Asian - Laotian/Hmong	▼

Previous Save & Next

1. Scroll to the far right for the “Options” column.
2. Click the down-arrow button next to the desired entry.
3. This menu gives options to edit or delete each individual entry.
4. After completing this page, check the box to confirm then click “Save and Next”.

Graduate Data: Practice Site Information

Graduating Class of *

First Name * Last Name *

Gender * Ethnic/Racial Category *

☐ HPEF Scholar ☐ NHSC Recipient

Practice Specialty *

Practice Site Name *

Is the training site a private practitioner's office? *

☒ No ☐ Yes

[+ Select Address](#)

Street Address * Suite/Dept *

City * State * Zip Code *

1. You must add graduate practice site information for all graduates.
2. If your graduate is working in California and you know their practice site:
 - Select “Yes” under “Do you know the graduate’s practice site?”
 - Use the magnifying glass to search for the practice site name.
 - If the practice site is not listed, select “Practice Site not Listed” and enter the practice site name.

Graduate Data: Out of State Graduates

Create

Graduating Class of *

First Name * Last Name *

Gender * Ethnic/Racial Category *

☐ HPEF Scholar ☐ NHSC Recipient

Practice Specialty *

Do you know the graduate's practice site? *

☐ No ☐ Yes

Create

Graduating Class of *

First Name * Last Name *

Gender * Ethnic/Racial Category *

☐ HPEF Scholar ☐ NHSC Recipient

NPI Number (Check at [NPI Registry](#)) *

Practice Specialty *

Do you know the graduate's practice site? *

☒ No ☐ Yes

Reason Practice Site Unknown *

Submit

If your graduate is working outside of California:

- Select “No” as your response regardless if you know the practice site name and address.
- Select “Out of State” or “Unknown” under “Reason Practice Site Unknown.”

Graduate Data: Total Graduates

Program Data

Select the data you will be reporting: *
☒ Student and Graduate data ☐ Student data only ☐ New program: no student or graduate data

Would you like to import student, graduate, and training site data from your last application? *
☐ No ☒ Yes

Please provide an executive summary description of your training program. *

What is your program's current percentage of total clinical hours spent in registered nurse shortage areas? *
33 %

The program has been in continuous operation since what year? *
2019

Instructions: Enter data in each field for the graduating class for each academic year shown as applicable data exists for one of the academic years, enter a zero (0) in each field for that year.

	2018/2019 Academic Year	2017/2018 Academic Year
Total Enrollment Capacity	1	1
Qualified Student Applicants	1	1
Students Accepted	1	1
Students Enrolled	1	1
Students Graduated	1	1
Attrition Rate (%)	1	1
First Time NCLEX Pass Rate (%)	1	1

Graduate Data

To add a new graduate, click on the Add a Graduate button and enter the required information. National Provider Identifier (NPI) numbers are required for graduates. To find a graduate's NPI number, check the [NPI Registry](#).

If your organization was a past applicant and you opted to include graduate data from the last submitted application, the table below displays those graduates. To edit information, click on the Options button next to an individual's name and select Edit or Delete.

The number of graduates entered on this page must reflect the students graduated data you reported for the academic years in the Program Data section of this application.

Total Number of Graduates
2

Graduates With Errors

Graduating Class of Academic Year	First Name	Last Name	Gender	Ethnic/Racial Category	Options
There are no records to display.					

Graduates With No Errors

Add a Graduate

Graduating Class of Academic Year	First Name	Last Name	Gender	Ethnic/Racial Category	Options
2018/19	j	t	Male	Asian - Indonesian	
2017/18	k	y	Male	American Indian/Native	

The number of graduates listed on the Graduate Data page must match the number listed on the Program Data Page Columns 18/19 and 17/18.

Check “All Grads Submitted” then click “Save & Next” to continue.

Required Documents

Before Attaching Documents:

Required Documents

Approval Letter

Upload the most recent program approval letter from the appropriate accrediting/approval bodies. [Approval Letter Example](#)

Approval Letter Upload 0 files uploaded, 1 file required.*

- The red button on this page indicates required documents.
- For example, click on the “Approval Letter Upload” button to upload the required letter.
- Once you upload all required documents, the buttons turn green signifying that you may continue.
- Click “Next” to save and continue to the final page of the application.

After Attaching Documents:

Approval Letter

Upload the most recent program approval letter from the appropriate accrediting/approval bodies. [Approval Letter Example](#)

Approval Letter Upload ✓ 1 file uploaded, 1 file required.*

Note: You may delete an uploaded document by clicking the down-arrow button next to the desired entry.

Assurances

Application SBRNC-1000670 – Song-Brown Registered Nurse Capitation

100%

Assurances

I certify that the information contained herein is true and the most current information available at time of application submission.

☒ I Certify

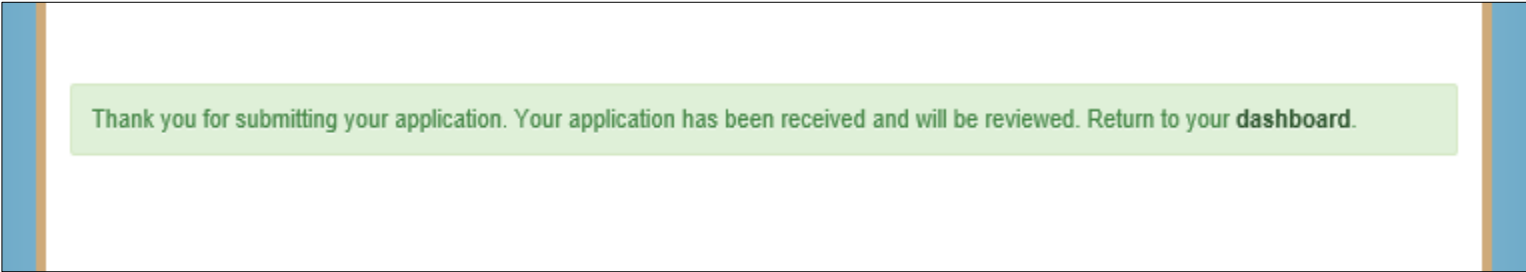
You are about to submit your application. You may not edit or delete your application from the system after submission.

[Previous](#) [Submit](#)

- Read the statement.
- Agree and certify to the statement by checking the box.
- Click the “Submit” button.

Note: Only Program Directors may submit an application. The “Submit” button will not appear for Grant Preparers. Once you submit an application, you cannot edit or delete your application.

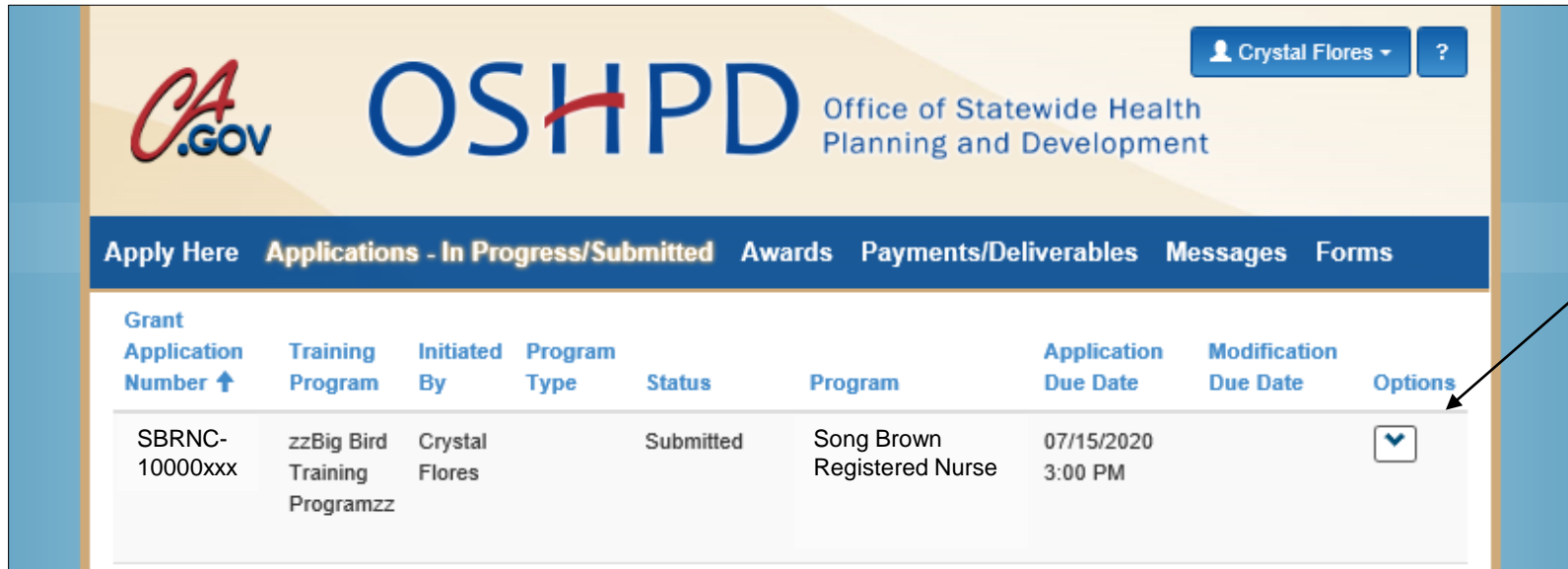
Submission Complete



Thank you for submitting your application. Your application has been received and will be reviewed. Return to your [dashboard](#).

1. Once your application is submitted, you will see the message in green below.
2. You may navigate to your eApp dashboard by following the dashboard link in the message.

View and Print Application



The screenshot shows the OSHPD (Office of Statewide Health Planning and Development) web application. At the top, there is a header with the CA.GOV logo, the OSHPD logo, and the text "Office of Statewide Health Planning and Development". A user profile dropdown shows "Crystal Flores" and a help icon. Below the header is a navigation bar with tabs: "Apply Here", "Applications - In Progress/Submitted" (which is highlighted), "Awards", "Payments/Deliverables", "Messages", and "Forms".

Below the navigation bar is a table of applications. The table has the following columns: "Grant Application Number ↑", "Training Program", "Initiated By", "Program Type", "Status", "Program", "Application Due Date", "Modification Due Date", and "Options".

Grant Application Number ↑	Training Program	Initiated By	Program Type	Status	Program	Application Due Date	Modification Due Date	Options
SBRNC-10000xxx	zzBig Bird Training Programzz	Crystal Flores		Submitted	Song Brown Registered Nurse	07/15/2020 3:00 PM		▼

1. Under “Application in Progress” tab, select the “Options” dropdown to view or print your application.

Post-Submission Maintenance

Program Directors must:

- Log into their eApp profile to maintain current contact information as well as maintain the approved Grant Preparer list. Otherwise, your program may miss important notifications.
- Provide notification when the Agreement Signatory, Payee Data Signatory, or Grant Agreement contact changes by emailing SongBrown@oshpd.ca.gov. Failure to do so may delay the start of your Grant Agreement.

Questions?

- Email us at SongBrown@oshpd.ca.gov.
- Email subject line must include the application number and program name.