

Government of Newfoundland and Labrador

Employment-Steps for Success

Program Guidelines to Completing Your Application



Employment and Training Division
Employment Steps for Success - Program Guidelines

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Available in alternate formats.

Please contact Employment and Training Programs Division:

Email: EmploymentPrograms@gov.nl.ca.

Phone: 1-800-563-6600

Please read this entire Program Guidelines Document. The information contained in this Guide will become part of the agreement with the Province of Newfoundland and Labrador for the delivery of Employment-Steps for Success.

1.0 Introduction

Employment-Steps for Success is a pilot program intended to provide funding to non-profit community organizations to develop, implement and deliver career planning or employment readiness programming.

Applications must demonstrate how identified activities are distinct from current organization programming but will support the mandate of the organization and the department.

Priority for funding will be given to applications that clearly specify program activities, define outcomes to be achieved and are cost-effective.

Organizations should submit one proposal, with each program request clearly outlined separately. Organizations may participate in one or two of the following streams:

Adult Pre-Employment

- Programming that offers pre-employment training and individualized support for individuals who are interested obtaining employment.

Career Exploration for Youth

- A client-centered employment initiative that will assist youth from a variety of educational and social backgrounds to achieve their career and employment goals.

Program delivery may include a tool kit comprised of sessions and resources to assist with: problem solving skills; workplace communications; budgeting skills; self-exploration of careers related to personal strengths, addiction issues, mental health issues, criminal justice concerns, obtaining workplace certificates such as First Aid and WHMIS, and job search skills including strategies to prepare for, attain and maintain employment.

Sponsoring organizations are responsible for participant intake, selection and promoting their initiative. Organizations are responsible for the development of any forms deemed necessary for effective program delivery and payment requirements.

2.0 Eligibility

2.1 Eligible Organizations

Non-profit community organizations who are incorporated entities in good standing with Registry of Companies and Deeds.

To be eligible for funding, applications should:

1. Specify activities to be undertaken and demonstrate how these activities are distinct

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- from current organization programming but will support the mandate of the organization and the department;
2. Clearly identify expected outcomes associated with activities;
 3. Identify how outcomes will be assessed;
 4. Be responsive to identified needs and gaps in current services; and
 5. Be cost-effective.

All non-profit organizations that apply for funding should have Director's Liability Insurance.

2.2 Eligible Participants

Individuals eligible to receive services under Employment-Steps for Success must be:

- A resident of the province;
- Canadian citizens or permanent resident entitled to work in Canada;
- Currently unemployed; and
- Interested in obtaining employment.

Adult Pre-Employment Programming eligibility criteria includes:

- Unemployed adults;
- Non E.I. Eligible - in receipt of income support or eligible to receive income support;
- Have completed at least secondary school Level I; and
- Are interested in upgrading education or obtaining employment.

Career Exploration for Youth eligibility criteria includes:

- Non-EI eligible;
- Between the ages of 18-30;
- Who have not made a successful transition to the labour market; and
- Who need assistance with career decision-making and career exploration.

2.3 Eligible Activities

Organizations are responsible for participant intake or selection and to promote their initiative.

Activities will not be prescribed by the department. It is the responsibility of organizations to specify the activities that will be undertaken and how they will meet the needs of participants by establishing expected outcomes. Organizations should work with the Department of Immigration, Population Growth and Skills (IPGS) to avoid duplication in programming.

Activities may include, but are not limited to:

- Employment counselling;
- Accessing and using labour market information;
- Career decision making;
- Job search skills development;

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- Job maintenance skills development;
- Resume or portfolio preparation;
- Employment maintenance;
- Skills development;
- Personal or social counselling;
- Life skills development;
- Pre-employment workshops or training;
- Work experience;
- Essential skills development; and
- Occupational skills development

2.4 Eligible Funding

Financial assistance shall only be provided for costs directly related to carrying out the activities outlined in the agreement. Funding may be approved to a maximum of \$50,000 per organization per stream (\$100,000 total).

Each cost shall be a legitimate, necessary, and reasonable expense in order to carry out the activities of the project. Available budget categories will automatically populate in the LaMPSS application.

3.0 Conflict of Interest

The department has the following conflict of interest policy designed to enhance public confidence in the integrity and fairness of the administration of employment service offerings.

This policy ensures that all eligible individuals for employment or participation on a project are treated fairly and are given equal opportunities to apply for and obtain employment as permitted by law.

Should an immediate family member of a board member of a project applicant want to be considered as a participant of a project, in consultation with the Department of Immigration, Population Growth and Skills (IPGS), the board member shall remove themselves from all project administration processes and remove themselves from the participant selection process.

1. No federal or provincial governments, government crown corporations or agencies, boards and commissions are eligible for a subsidy;
2. No member of the House of Commons or Member of the House of Assembly of Newfoundland and Labrador will be admitted to any share or part of an agreement or to any benefit arising therefrom;
3. No public employee of the province of Newfoundland and Labrador shall be admitted to any part or share of the payments made pursuant to an agreement or to any benefits arising therefrom except in accordance with the [Conflict of Interest Act, 1995](#);
4. No current or former public office holder or public servant who is not in compliance

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with the Values and Ethics Code for the Public Service or the Conflict of Interest and Post-employment Code for Public Office Holders shall derive a direct benefit from an agreement; and

5. No cost incurred in relation to wages paid to a third-party (e.g., participant, administrative staff, research subject or any other party) who is an immediate family member of the employer who is eligible for reimbursement under an agreement.

The only exception of this policy is when the department is satisfied that the position could not be filled by another individual due to exceptional circumstances (e.g., position required specific expertise or qualifications).

An immediate family is defined as father, mother, stepfather, stepmother, foster parent, brother sister, spouse or common-law partner, child (including child of common-law partner), stepchild, ward, father-in-law, mother-in-law, or other individual residing in the employer's household.

4.0 Labour Market Programs Support System (LaMPSS)

The Employment-Steps for Success is administered by the department using the Labour Market Programs Support System (LaMPSS) application. LaMPSS is a common method for administering Labour Market Programs in Newfoundland and Labrador. LaMPSS is focused on providing consistency in processes and improving services to labour market program agreement holders.

The functionality of LaMPSS provides employers with self-serve capability, enabling the employer to apply for funding online for labour market programs and submitting required financial and activity reports online.

All employers are required to be set-up as a government vendor so payment can be issued. Vendor set-up and LaMPSS registration are initiated once you register here: [Employer Registration](#).

It is recommended employers complete registration as soon as possible to avoid delays.

After registering, an organization number, user ID and LaMPSS password is provided to the employer (if they do not have one already) at the email address provided on your application (Employer Registration form). This information is used to log into the [LaMPSS System](#). Please ensure you check your email, including junk mail, regularly. You can then log into the [LaMPSS](#) system and complete your online application.

If you have forgotten your password, please reset it in [LaMPSS](#) by clicking on **Forgot Password**. Enter Organization ID and User ID. Click submit and a new password will be emailed to you. If your password cannot be reset, please contact our Support Team by email at extorghelp@gov.nl.ca during government business hours or call 1-844-252-

6777.

Visit the following website for more information on LaMPSS, including system requirements: [Labour Market Programs Support System - Immigration, Population Growth and Skills \(gov.nl.ca\)](#)

5.0 Applying Online

Once registered as a LaMPSS user, organizations can apply for funding online using the self-serve capability. Simply go to the [LaMPSS](#) home page to log in and apply.

Once you have logged into LaMPSS,

1. Click on **Programs and Services** under **Apply for Funding** on the left menu bar
2. Click on **Employment-Steps for Success** from the list of available programs in the center of the page
3. Click **Apply**
4. You will see the introduction page for the application. It will provide a list of any **mandatory** documents that are required for submission with your application.
5. To initiate the application process, click **Start Now**

If you are having difficulty with the process or unable to complete an application for funding online, please contact 1-800-563-6600 or EmploymentPrograms@gov.nl.ca.

5.1 Completing an Application Form

This section provides the specific information that you will need to complete the application form outlining required content. **Any fields outlined with red and with an asterisk are required.**

5.1.1 Organization Information

Enter the name and complete mailing address for your organization. If you are applying online, this information will be pre-populated.

5.1.2 Application Details

Please provide the following:

Title	Provide a title specific to this project. For example: Your Organization's Name –Program Name
Agreement Start Date	Provide the proposed start date for project
Agreement End Date	Provide the proposed end date for project

5.1.3 Past Agreements

If you have had past agreements with IPGS, please provide information relating to them, including the previous agreement number, if available.

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5.1.4 Project Description

Please provide a brief outline (limit 300 words) of the project (applicants will be required to submit a more detailed proposal with the application).

5.4.5 Agreement Contract

Specify a person in your organization who can be contacted to further discuss your application, if required.

Note:

This contact should be an individual who can negotiate this agreement on behalf of the organization.

5.1.6 Project Location

Please provide the address information for the location(s) where the project activities will be delivered. If you have not yet secured a location, please enter your main organization address and advise the department later of the project address.

5.1.7 Participants

Enter the total number of **expected Project Participants (clients)** to be served in this project.

Enter the number of participants expected for each participant group. Include participants in relevant participant groups. (e.g., a participant may be part of more than one participant group)

5.1.8 Project Activities

The table below outlines the required information for each eligible activity for the ESS Program. This is the complete set of eligible activities. On the Application Form, provide the following required information for **each of the activities** that you plan to deliver as part of your project.

Case Management (Assessment, Development, Management and Follow-Up)	
Activity Type	Select the applicable activity type from the drop-down menu.
Activity Type Definition	Will auto populate based on the selection for above Activity Type.
Start Date of Activity	Enter the start date of this activity.
End Date of Activity	Enter the end date of this activity.

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Case Management (Assessment, Development, Management and Follow-Up)	
Brief Description of this Activity	Management of a client through a series of steps designed to take them from a situation of unemployment to finding and maintaining employment, including individual assessment, development of a mutually agreed upon Action Plan, and follow-up to ensure that the plan is being followed and is achieving expected outcomes. Facilitate the completion of client exit surveys. Describe how you plan to deliver this activity as part of your project agreement.
Expected Results	Identify the number of clients assessed, plans developed, interventions completed and follow-up outcomes.
Where does this activity take place	Identify the location for this activity.
Expected number of Project Participants	Please provide the expected total number of clients that will participate in this activity.

Job Search	
Activity Type	Select the applicable activity type from the drop-down menu.
Activity Type Definition	Will auto populate based on the selection for above Activity Type.
Start Date of Activity	Enter the start date of this activity.
End Date of Activity	Enter the end date of this activity.
Brief Description	<p>Supports that assist participants with the job search process, such as resume writing; interviewing practice; search strategies; networking.</p> <p>Working intensively with multiple-barrier clients to develop appropriate employment opportunities that are reflective of employers' human resource needs as well as participant skills.</p> <p>Describe how you plan to deliver this activity as part of your project agreement.</p>
Expected Results	Describe the expected result of these activities.
Where does this activity take place	Identify the location for this activity.
Expected number of Project Participants	Please provide the expected total number of clients that will participate in this activity.

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Skills Enhancement – Essential Skills	
Activity Type	Select the applicable activity type from the drop-down menu.
Activity Type Definition	Will auto populate based on the selection for above Activity Type.
Start Date of Activity	Enter the start date of this activity.
End Date of Activity	Enter the end date of this activity.
Brief Description	An individual learning experience to enhance one or more of the Essential Skills - Reading Text; Document Use; Numeracy; Writing; Oral Communication; Working with Others; Continuous Learning; Thinking Skills; Computer Use. Describe how you plan to deliver this activity as part of your project agreement.
Expected Results	Describe the expected result of these activities.
Where does this activity take place	Identify the location for this activity.
Expected number of Project Participants	Please provide the expected total number of clients that will participate in this activity.

Skills Enhancement – Essential Skills- Work Shops	
Activity Type	Select the applicable activity type from the drop-down menu.
Activity Type Definition	Will auto populate based on the selection for above Activity Type.
Start Date of Activity	Enter the start date of this activity.
End Date of Activity	Enter the end date of this activity.
Brief Description	Provide a Workshop-style learning experience - short sessions with no ongoing commitment - to enhance one or more of the Essential Skills - Reading Text; Document Use; Numeracy; Writing; Oral Communication; Working with Others; Continuous Learning; Thinking Skills; Computer Use. Describe how you plan to deliver this activity as part of your project agreement.
Expected Results	Describe the expected result of these activities.
Where does this activity take place	Identify the location for this activity.
Expected number of Project Participants	Please provide the expected total number of clients that will participate in this activity.

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Skills Enhancement – Pre-Employment	
Activity Type	Select the applicable activity type from the drop-down menu.
Activity Type Definition	Will auto populate based on the selection for above Activity Type.
Start Date of Activity	Enter the start date of this activity.
End Date of Activity	Enter the end date of this activity.
Brief Description	A learning experience to enhance Pre-Employment skills - personal life skills management, career planning, job readiness or job maintenance. Describe how you plan to deliver this activity as part of your project agreement.
Expected Results	Describe the expected result of these activities.
Where does this activity take place	Identify the location for this activity.
Expected number of Project Participants	Please provide the expected total number of clients that will participate in this activity.

Skills Enhancement – Short Term Training	
Activity Type	Select the applicable activity type from the drop-down menu.
Activity Type Definition	Will auto populate based on the selection for above Activity Type.
Start Date of Activity	Enter the start date of this activity.
End Date of Activity	Enter the end date of this activity.
Brief Description	Job specific training for the purposes of obtaining or maintaining employment. For example, First Aid or WHMIS. Describe how you plan to deliver this activity as part of your project agreement.
Expected Results	Describe the expected result of these activities.
Where does this activity take place	Identify the location for this activity.
Expected number of Project Participants	Please provide the expected total number of clients that will participate in this activity.

Work Experience	
Activity Type	Select the applicable activity type from the drop-down menu.

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Work Experience	
Activity Type Definition	Will auto populate based on the selection for above Activity Type.
Start Date of Activity	Enter the start date of this activity.
End Date of Activity	Enter the end date of this activity.
Brief Description	Work experience including on the job supports, wage subsidy or volunteer work experience. Describe how you plan to deliver this activity as part of your project agreement.
Expected Results	Describe the expected result of these activities.
Where does this activity take place	Identify the location for this activity.
Expected number of Project Participants	Please provide the expected total number of clients that will participate in this activity.

5.1.9 Project Budget

The following table outlines all of the eligible cost categories and items for Employment-Steps for Success along with a brief description. On your Application Form, enter the total project costs and the amount of funding requested for each category for this project. HST should be calculated and included in each category.

Include any cash contributions/projected revenue or any in-kind contributions.

Budget Category	Eligible Costs
Program Delivery	
Salaries and Benefits	
Salaries	Salary expenses
MERC	Mandatory Employment Related Costs
Other HR Related Benefits	HR related expenses
Workers Compensation	Workers Compensation expenses
Participant Program Delivery	
Budget Category	Eligible Costs
Participant	
Wage Subsidy / Benefits	Participants wage subsidy expenses
Other Participant Costs	Other eligible participant expenses (provide breakdown)
Operational /Project Standard	
Professional Fees	Expenses paid for professional services

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Consulting Services	Any consulting expenses
Staff Training / Development	Training/development expenses for staff
Facility Lease / Rent	Rent/lease expenses
Advertising and Promotion	Expenses for advertising and promotion of program
Office Supplies	Expenses for supplies necessary for office operations
Resource Materials	Expenses for resources necessary to deliver program
Travel	Expenses for travel at approved rate
Insurance	Directors Liability expense
Other Operational Costs	Other operational/project expenses (provide breakdown)
ARMS – Accountability Resource Management System	Expenses related to ARMS
Exceptional	
Postage and Courier	Postage and courier expenses
Audit Costs	Cost of Audited Financial Report specifically for program
Printing	Program printing expenses
Administrative	
Admin – Inclusive	Total of admin expenses for ESS program (provide details)

5.1.10 Project Cash Flow

Provide a monthly cash flow estimate of the requested project expenses.

5.1.11 Legal Signing Officers

Provide the appropriate legal signing officers for your organization. These individuals must have signing authority on behalf of the business / organization.

Please enter the number of legal signing officers based on the **number** and **combination** of the above persons' signatures are required on a legal document.

5.1.12 Supporting Documentation

The table below outlines documents that must be included with the project application. Please attach these documents to your application form.

Document	Content
Detailed Project Description	Provide a description of the proposed project and activities expected to take place.
Copy of Directors and Officers Liability Insurance	Provide a copy of Directors and Officers Liability Insurance

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Document	Content
Board/Staff Members	Provide a list of your Board of Directors and staff, including email addresses.
Itemized Budget Breakdown	Provide sufficient details and rationale for requested funds to support the request for each cost item. HST should be calculated and included in each category.

To attach the documents, select a document type from the drop-down menu, click **Add** then attach the appropriate file from your computer's directory.

Each mandatory or additional document must have a unique filename. Individual files cannot exceed **1MB**, or LaMPSS will generate an error message. **The overall submission, including all attachments, cannot exceed 5MB.**



5.1.13 Application Summary and Submission

Once you have completed the online application, employers can view the View/Download summary button to view or download the application.

If you have completed the application, including the attachment of all required documentation, click the **Submit** button and the application is then submitted to the department for review.

NOTE:

Once you have submitted the application, the following messages **may** appear:

-  All errors must be corrected before submission can occur.
-  Warnings are for informational purposes and do not necessarily need to be corrected.

To add or change any of the information, return to the specific section by clicking on **Return to Section List** hyperlink.

Once submitted, a message will appear to confirm submission was successful and will provide you with a six-digit agreement number. This number will enable you to check on the status of your application in LaMPSS.

Employers can check the status of their application by logging into [LaMPSS](#). Click on **Organization Home** on the left menu bar. There you will see a list of agreements for your organization. Click on the blue hyperlink (agreement number), this will bring you to the agreement homepage where you can review details.

Should you require additional information, please e-mail EmploymentPrograms@gov.nl.ca.

6.0 Employment Steps for Success Reporting Requirements

The requirements for activity and financial reports for the ESS program are outlined in

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your agreement. Reports must be completed online using LaMPSS Self-serve functionality.

6.1 Completing an Activity Report

This section provides supporting information that you will need to complete the Activity Report.

Reporting Period Dates – this section is for information purposes only and no action is required.

Organization Information – this section is for information purposes only and not action is required.

6.1.1 Project Activities

Please provide the following information for each activity type in your agreement:

Activity Description	This information is pre-populated by LaMPSS
Update/Status this Period	Describe if the activity is going as expected and indicate any issues that need to be addressed. Report on client progress for this reporting period. Indicate the number of clients who have achieved employment, if applicable; this would be an accumulated total .
Number of Project Participants	Please provide the number of new participants in each activity during this reporting period . If you report on a participant included in a previous Activity Report, do not report this participant again.

6.1.2 Participants

Enter the total number of **new** participants served during **this reporting period** across **all activities** and then break out the total into eligible target groups.

Note: A participant may be part of more than one participant group.

Upon participant selection, organizations must submit a Request for Service form, for each eligible participant, to the Career Development Specialist assigned to the agreement, to confirm the client’s program eligibility.

6.1.3 Supporting Documentation

There are no mandatory documents required when submitting your Activity Report; however, if you have supporting documents, or if the department requests specific supporting documents, attach them to your Activity Report.

6.1.4 Reporting Notes

Record any additional notes or comments for this report.

6.1.5 Summary and Submission



Review all information carefully to ensure the required information has been provided.

To view or print a copy, click **View/Download Summary**.

Click **Submit** on the Summary and Submission page if your activity report is complete.

NOTE:

Once the activity report is submitted, the following messages may appear:

-  All errors must be corrected before submission can occur.
-  Warnings are for informational purposes and do not necessarily need to be corrected.

To add or change any of the information, return to the specific section by clicking on **Return to Section List** hyperlink.

6.2 Final Activity Report

Organization will be required to submit a detailed summary as part of their final report upon project completion, which also must include the following data:

1. Number of participants starting program;
2. Number of participants completing;
3. Number who gained employment;
4. Number who will pursue postsecondary;
5. Number who will pursue academic upgrading; and
6. Number being referred to another agency for additional assistance.

6.3 Completing a Financial Report

This section provides supporting information required to complete the Financial Report.

Reporting Period Dates – this section is for information purposes only and no action is required.

Organization Information – this section is for information purposes only and not action is required.

6.3.1 Project Costs

Provide the actual costs for each eligible expense for **this reporting period only**.

6.3.2 Project Cash Flow

Please provide an updated cash flow for the remainder of the agreement.

6.3.3 Supporting Documentation

There are no mandatory documents required; however, if you have supporting

documents, or if the department requests specific supporting documents, attach them to your Financial Report.

6.3.4 Reporting Notes

Record additional notes or comments for this report.



6.3.5 Summary and Submission

Review all information carefully to ensure the required information has been provided.

To view or print a copy, click **View/Download Summary**.

Click **Submit** on if your financial report is complete.

NOTE: Once the financial report is submitted, the following messages may appear:

-  All errors must be corrected before submission can occur.
-  Warnings are for informational purposes and do not necessarily need to be corrected.

To add or change any of the information, return to the specific section by clicking on **Return to Section** List hyperlink.

6.4 User Technical Support

Should you require assistance with using LaMPSS, please contact our Support Team by email extorghelp@gov.nl.ca or call 1-844-252-6777 during government business hours.