



State of Rhode Island

Recovery Plan Performance Report

State Fiscal Recovery Fund

July 2023 Report

Submitted by the State of Rhode Island Pandemic Recovery Office

Paul L. Dion, Ph.D., Director

Brianna Ruggiero, Chief of Staff

Nick Fanuele, Senior Economic and Policy Analyst

Derek Gomes, Chief Public Affairs Officer

Ross Lancaster, Data Analyst III

Kate Randall, Senior Economic and Policy Analyst

Pheamo Witcher, Interdepartmental Project Manager

Rhode Island
July 2023 Recovery Plan

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General Overview

This report is submitted by the State of Rhode Island pursuant to Section 602 of the American Rescue Plan Act of 2021 (ARPA). This report is intended to provide the U.S. Department of Treasury (U.S. Treasury) and the citizens of Rhode Island with an explanation of the State's planning and spending activities for the State Fiscal Recovery Fund (SFRF).

Executive Summary

As Rhode Island began to emerge from the COVID-19 pandemic, Governor Dan McKee understood that the well-being of all Rhode Islanders, families, businesses, and communities depended on the State's recovery plan. The Governor's strategy included a collection of near-term expenditures to offset the negative impacts of the COVID-19 pandemic and longer-term investments to transform and modernize key elements of the Rhode Island economy to ensure the state is well-positioned to continue its strong recovery.

His approach focused on leveraging all resources, including the federal funds allocated to the State in ARPA, to bring immediate relief to businesses and households while laying the groundwork for sustainable economic prosperity. The Governor's strategy involved appropriating \$119 million of the State's \$1.13 billion SFRF allocation in State Fiscal Year 2022 for Rhode Island Rebounds (RI Rebounds) projects. These projects were designed to address the state's most pressing needs that resulted from or were exacerbated by the COVID-19 pandemic. These needs included supports for small businesses and impacted industries, retention incentives for workers in sectors directly impacted by the pandemic, additional affordable housing units, and better access to medical services for children and families. The enacting legislation for the RI Rebounds projects was passed on January 4, 2022.

In his State Fiscal Year 2023 budget, the Governor recommended spending priorities for the remainder of the \$1.13 billion SFRF allocation. The General Assembly incorporated most of the Governor's proposed uses of the State's SFRF allocation in its State Fiscal Year 2023 budget that was signed into law on June 27, 2022.

The Governor proposed alternative uses in his State Fiscal Year 2024 budget for a portion of the State's SFRF allocation for projects that did not incur spending in State Fiscal Year 2023. Two projects – Blue Economy Investments (\$70 million in SFRF) and Bioscience Investments (\$30 million in SFRF) – could not move forward because the use of SFRF was contingent on the State securing additional federal matching funds that were not awarded.

The State Fiscal Year 2024 budget submission recommended providing previously approved SFRF projects with additional funds and creating new projects focused on transportation, K-12 education, higher education, and economic development. The State Fiscal Year 2024 budget was signed into law on June 16, 2023.

The State is implementing SFRF projects, with the goal of providing recovery funds without onerous requirements, while ensuring that the State can collect and analyze data to assess the performance of recipients in achieving the projects' goals. The State is committed to making choices based on evaluating the best, available data within a framework that emphasizes the needs of all Rhode Islanders.

Process

On March 11, 2021, President Biden signed the American Rescue Plan Act (ARPA) into law. Immediately thereafter, the Rhode Island Department of Administration (DOA), the Rhode Island Pandemic Recovery Office (PRO), and the Rhode Island Office of Management and Budget (OMB)

engaged state agencies in anticipation of the State receiving its SFRF allocation. A survey soliciting potential projects was sent on March 19, 2021, with agencies filling out the criteria for each project and submitting their proposed projects by March 31, 2021.

After U.S. Treasury issued the SFRF interim final rule on May 13, 2021, DOA re-solicited from agencies potential projects with tighter criteria around the use of funds. These initiatives were vetted and considered while developing the RI Rebounds projects presented in this report. The vetting process gave special consideration to projects that demonstrated evidence of timely implementation and execution, the ability to generate benefits within one year, and transformational capacity.

On October 7, 2021, the Governor unveiled his plan, seeking legislative approval to appropriate \$119 million of Rhode Island’s SFRF allocation for the RI Rebounds projects. The Rhode Island House of Representatives and Senate Committees on Finance held multiple hearings on the projects to perform their due diligence and receive feedback from constituents.

Upon passage of the legislation enacting the RI Rebounds projects, PRO collaborated with the state and quasi-public agencies responsible for the projects. This collaboration consisted of establishing procedures to comply with U.S. Treasury’s reporting requirements for expenditure information and performance metrics. PRO worked with state and quasi-public agencies on the development of mandated state-determined metrics to supplement U.S. Treasury’s own performance metrics.

The Governor’s State Fiscal Year 2023 budget, which was submitted to the General Assembly on January 20, 2022, proposed projects for the remainder of the State’s SFRF allocation. Together, the projects proposed further investments to support expanding affordable and workforce housing; ensuring every young Rhode Islander reaches their full potential; bolstering growing sectors of the state’s economy; investing in the workforce to prepare Rhode Islanders for the jobs of the future; and strengthening the health care system in the event of surges in COVID-19 cases or the emergence of new variants. On June 9, 2022, the House Committee on Finance unveiled its State Fiscal Year 2023 budget proposal, which funded most of the SFRF projects proposed by the Governor in his initial budget submission.

Mirroring the process used for the RI Rebounds projects, PRO collaborated with the state agencies, quasi-public agencies, and other entities on their State Fiscal Year 2023 SFRF projects to ensure compliance with U.S. Treasury’s reporting standards. PRO will continue this collaboration for all SFRF projects approved in future fiscal years.

This recovery report only includes information about projects that have advanced through PRO’s reporting and compliance approval process and thereby are authorized to spend SFRF appropriations. Similar information about new SFRF projects that were approved in State Fiscal Year 2024 will be included in future reports to U.S. Treasury.

Table 1. provides the breakdown of all SFRF projects for which appropriations have been made in State Fiscal Years 2022, 2023, and 2024.

Table 1. SFRF Appropriations

Project	Total
9-8-8 Mental Health Hotline	\$3,475,000
Adult Education Providers	\$5,000,000
Affordable Housing Predevelopment	\$10,000,000

Project	Total
Affordable Housing Unit Preservation	\$500,000
Aid to the Convention Center	\$10,000,000
Auto-Enrollment Program	\$2,614,068
Bioscience Investments	\$45,000,000
Broadband Mapping and Planning	\$500,000
Butler Hospital Short Term Stay Unit	\$8,000,000
Certified Community Behavioral Health Clinics	\$30,000,000
Child Care Enhanced TEACH Program	\$2,000,000
Child Care Family Provider Support	\$600,000
Child Care Quality Improvements	\$1,000,000
Child Care Retention Bonuses	\$37,400,000
Child Care Workforce Registry	\$1,000,000
Community Revitalization	\$20,000,000
COVID-19 Operational Support	\$34,909,578
Crisis Intervention Trainings	\$2,200,000
DCYF Sign-on Bonuses	\$789,043
DCYF Workforce Stabilization	\$22,131,723
Destination Marketing	\$3,000,000
Development of Affordable Housing	\$15,000,000
Development of Affordable Housing: Phase II	\$75,000,000
Down Payment Assistance	\$30,000,000
Early Intervention Provider Relief and Recovery	\$11,000,000
Enhanced Real Jobs	\$30,000,000
Female Youth Residential Facility Design	\$1,000,000

Project	Total
Fresh Start Scholarship	\$5,000,000
Health Care Facilities: For-Profit Hospital Assistance	\$4,515,113.07
Health Care Facilities: Health Center Assistance	\$2,500,000
Health Care Facilities: Nonprofit Hospital Assistance	\$40,484,886.93
Health Care Facilities: Nursing Home Assistance	\$30,000,000
Home Repair Program	\$4,500,000
Homelessness Assistance	\$14,500,000
Homelessness Assistance: Warming Center and Shelter	\$7,000,000
Homelessness Infrastructure	\$35,000,000
Hospitality, Tourism, and Events (HTE) Direct Grants	\$8,424,908
Hospitality, Tourism, and Events (HTE) Marketing	\$2,000,000
Hospitality, Tourism, and Events (HTE) Placemaking	\$3,074,401
Housing Related Infrastructure	\$4,300,000
Institute for Cybersecurity	\$2,000,000
Lead Abatement and Fire Safety Upgrades in Foster Homes	\$1,875,000
Middle Income Housing	\$20,000,000
Minority Business Accelerator	\$5,200,000
Minority Business Accelerator: RI Black Business Association Grant	\$500,000
Minority Business Accelerator: Roger Williams University Start-up Clinic	\$300,000
Municipal Homelessness Support Initiative	\$2,500,000
Municipal Public Safety Infrastructure	\$11,000,000
Municipal Roads Grant Program	\$20,000,000
Municipality Fellows	\$1,300,000

Project	Total
Municipality Technical Assistance	\$1,000,000
Nonprofit Assistance	\$20,000,000
Electric Heat Pump Grant Program	\$25,000,000
OHCD Support and Capacity	\$1,500,000
Ongoing COVID-19 Response	\$41,787,709
Out-of-School Time Education Providers	\$4,000,000
Pandemic Recovery Office	\$18,878,934
Pediatric Provider Relief and Recovery	\$7,500,000
Pediatric Provider Relief and Recovery: Phase II	\$7,500,000
Permanent Supportive Housing: Crossroads	\$10,000,000
PFAS Water Treatment	\$20,000,000
Port of Davisville	\$65,000,000
Priority Projects Fund	\$27,000,000
Proactive Housing Development	\$1,400,000
Psychiatric Residential Treatment Facility	\$11,000,000
Public Health Clinics: Rhode Island Free Clinic	\$2,000,000
Public Health Clinics: Open Door Health	\$2,000,000
Public Health Response Warehouse Support	\$3,400,000
Public Housing Pilot Program	\$10,000,000
Rhode Island Community Food Bank Grant	\$3,000,000
Rhode Island Reconnect	\$8,000,000
RI Public Transit Authority R-Line Free Service Pilot	\$3,250,000
RI Turnpike and Bridge Authority Safety Barriers Study	\$1,750,000
Site Acquisition for Affordable Housing	\$25,000,000

Project	Total
Small Business Direct Grants	\$13,267,733
Small Business Public Health Capital Improvements	\$7,627,557
Small Business Technical Assistance	\$10,605,401
South Quay Marine Terminal	\$35,000,000
Statewide Housing Plan	\$2,000,000
Support for Survivors of Domestic Violence	\$10,500,000
Transit-Oriented Housing	\$4,000,000
Unemployment Insurance Trust Fund Contribution	\$100,000,000
Total	\$1,131,061,055

Use of Funds

The McKee Administration prioritized SFRF projects that:

- Address the short- and long-term impacts of the COVID-19 pandemic.
- Minimize ongoing financial obligations.
- Generate outyear savings and efficiencies.
- Result in lasting benefits.
- Leverage existing administrative infrastructure, with simple and effective program design.

The following section describes the projects that have advanced through the Rhode Island Pandemic Recovery Office’s reporting and compliance approval process in State Fiscal Year 2022 and 2023.

Aid to Small Business and Impacted Industries

Unemployment Insurance Trust Fund Contribution: \$100,000,000: The pandemic contributed to an unprecedented increase in unemployment insurance (UI) claims in Rhode Island – peaking at 100,265 in April 2020. This increase contributed, in part, to the depletion of Rhode Island’s UI trust fund. From January 27, 2020, to August 1, 2022, the balance decreased from approximately \$525.9 million to \$258.2 million. The project partially replenished the UI trust fund and moved down the UI tax rate schedule, which is projected to result in an estimated tax savings of approximately \$10.7 million for Rhode Island businesses.

Enhanced Real Jobs: \$30,000,000: The Rhode Island Department of Labor and Training is addressing unemployment and underemployment by providing career readiness, workforce development, and supportive services to impacted workers to place them in sustainable jobs and on resilient career paths.

Small Business Supports

The project is comprised of three programs – *Direct Grants*, *Technical Assistance*, and *Public Health Capital Improvements* – available to entities that demonstrated a negative impact from the pandemic. At

least 20% of the funds is reserved for minority business enterprises (MBEs), including women-owned businesses, as defined by state law.¹

Small Business Direct Grants: \$13,267,733: Businesses received grants ranging from \$2,500 to \$5,800 that were used for operating, reopening, personnel, and other costs.

Small Business Technical Assistance: \$10,605,401: Technical assistance providers assisted small businesses to apply for *Small Business Direct Grants* and *Hospitality, Tourism, and Events Direct Grants*. The providers also are offering targeted finance, technology, marketing, and planning assistance to boost small businesses' knowledge base and resiliency.

Small Business Public Health Capital Improvements: \$7,627,557: Intermediaries are purchasing furniture, heat lamps, tents, outdoor Wi-Fi, lighting, power sources, signage, etc. needed for outdoor settings. Additionally, small businesses are receiving technical assistance and needs assessments to improve ventilation systems.

Hospitality, Tourism, and Events Industries Supports

The hospitality, tourism, and events industries were hit especially hard by the pandemic. Rhode Island's leisure and hospitality sector lost about 37,000 jobs in the initial months of the pandemic, representing a 61.5% decline in employment.² As of December 2021, the sector was about 7,000 jobs below pre-pandemic levels.³ Businesses are eligible to receive funds or services from the following projects if they experienced a negative impact from the pandemic.

Hospitality, Tourism, and Events Direct Grants: \$8,424,908: Businesses in the hard-hit hospitality, tourism, and events industries received grants of up to \$250,000 to compensate for lost revenue and other negative financial impacts.

Hospitality, Tourism, and Events Placemaking: \$3,074,401: The project is supporting clean and safe placemaking, attraction development, and event programming, such as outdoor performances, outdoor food festivals, and other special events that attract visitors and residents to impacted businesses.

Hospitality, Tourism, and Events Marketing: \$2,000,000: The project is advertising Rhode Island as a destination in key gateway cities, supporting direct advertising for the state's tourism regions, and sponsoring regional and event partnerships.

Aid to the Convention Center: \$10,000,000: The pandemic forced the cancellation of events, and the Rhode Island Convention Center Authority (RICCA) is intent on accelerating revenues and improving operations. The funds provided the RICCA with working capital to tailor its operations to a post-pandemic environment by reimagining the use of its spaces to ensure the comfort and confidence of patrons and attract new events to its facilities.

Minority Business Accelerator: \$5,200,000: Intermediaries are serving minority-owned businesses and increasing their access to capital and technical assistance.

Minority Business Accelerator: RI Black Business Association (RIBBA) Grant: \$500,000: RIBBA is building out the Minority Business Hub, a co-working space for RIBBA's clients, members, and partners. Additionally, the project is increasing the capacity of RIBBA's Small Business Program – its outreach program to help small businesses scale.

¹ [R.I. Gen. Laws § 37-14.1-3](#)

² [Rhode Island Department of Labor and Training's Current Employment Statistics Seasonally Adjusted Data 2020](#)

³ [Rhode Island Department of Labor and Training's Current Employment Statistics Seasonally Adjusted Data 2021](#)

Minority Business Accelerator: Roger Williams University (RWU) Start-up Clinic: \$300,000: The RWU School of Law is working with the Rhode Island Commerce Corporation (Rhode Island Commerce) to grow minority business enterprises.

Destination Marketing: \$3,000,000: Rhode Island Commerce, in cooperation with the Rhode Island Airport Corporation, and partner airlines, will target key gateway cities, including Los Angeles, Chicago, Washington, D.C., and Detroit, with a campaign focused on driving leisure travel to Rhode Island.

Public Health

Health Care Facilities: Nonprofit Hospital Assistance: \$40,484,886.93: The State distributed grants to all 10 nonprofit hospitals in Rhode Island in accordance with a formula provided by the Rhode Island General Assembly. Each nonprofit hospital received a base payment of \$1 million supplemented by a pro rata share of the remaining appropriation based on the hospitals' operating costs from their 2021 Medicare cost reports relative to the aggregate operating costs of all hospitals – both nonprofit and for profit – from all 2021 Medicare cost reports.

Health Care Facilities: For-Profit Hospital Assistance: \$4,515,113.07: The State distributed grants to both for-profit hospitals in Rhode Island in accordance with a formula provided by the Rhode Island General Assembly. Each for-profit hospital received a base payment of \$1 million supplemented by a pro rata share of the remaining appropriation based on the hospitals' operating costs from their 2021 Medicare cost reports relative to the aggregate operating costs of all hospitals – both nonprofit and for profit – from all 2021 Medicare cost reports.

Health Care Facilities: Nursing Home Assistance: \$30,000,000: The State distributed grants to nursing homes to support their direct care workers and operations. The per-facility distribution was based on the number of Medicaid bed days a facility had out of the total number of Medicaid bed days for all nursing facilities as indicated in each nursing home's 2020 cost report. Nursing homes were required to dedicate at least 80% of the funds to direct care workers.

Health Care Facilities: Health Center Assistance: \$2,500,000: The State distributed grants to the eight federally qualified health centers in Rhode Island to be used for worker retention incentives.

Public Health Response Warehouse Support: \$3,400,000: These funds are being used for the proper storage of personal protective equipment, other COVID-19 response-related supplies, and other supplies.

Auto-Enrollment Program: \$2,614,068: HealthSource Rhode Island (HSRI) is creating a pathway for individuals to retain health and dental insurance coverage as they are transitioned off Medicaid due to the end of the public health emergency. The program is auto-enrolling individuals and families terminated from Medicaid who have household incomes at or below 200% of the federal poverty level (FPL) onto a qualified health plan (QHP) offered through HSRI and effectuating that coverage on their behalf by paying the premium for the first two months. Additionally, if these enrollees select a dental plan, the State is paying the premium for the first two months. For individuals and families with a household income greater than 200% of FPL and less than 250% of FPL, who are not eligible for auto-enrollment but are transitioning off of Medicaid and onto a QHP by making an active selection for a medical and/or dental plan, the program is paying for the first two months of coverage.

Public Health Clinics: Open Door Health: \$2,000,000: The State provided a grant to Open Door Health to acquire land or a building to expand services for people disproportionately impacted by the COVID-19 pandemic.

Public Health Clinics: Rhode Island Free Clinic: \$2,000,000: The State provided a grant to the Rhode Island Free Clinic to improve access to primary care and the quality of care for uninsured adults and to increase access to dental care for uninsured adults.

Housing

Development of Affordable Housing: \$15,000,000: Rhode Island Housing (RIHousing) is deploying no-interest, long-term loans to complement other state and federal resources to finance the production and preservation of units affordable to households earning less than 80% of the area median income (AMI).

Development of Affordable Housing: Phase II: \$75,000,000: RIHousing will deploy no-interest, long-term loans to complement other state and federal resources to finance the production and preservation of units affordable to households earning less than 80% AMI.

Homelessness Infrastructure: \$35,000,000: The Office of Housing and Community Development (OHCD) is expanding the capacity of the shelter system to better respond to homelessness. This is being accomplished by adding temporary and permanent shelter beds through contracts with providers and targeting key constituencies, including families, couples, individuals experiencing chronic homelessness, and victims of domestic violence.

Down Payment Assistance: \$30,000,000: RIHousing is providing up to \$20,000 in down payment assistance and closing cost assistance to eligible first-time homebuyers to promote homeownership.

Site Acquisition: \$25,000,000: RIHousing is providing grants to developers to purchase properties for the purpose of developing affordable units.

Community Revitalization: \$20,000,000: The project is supplementing existing funds to invest in spaces for housing units, commercial uses, and health, education, and employment training programming. RIHousing is distributing grants to for-profit/nonprofit developers, municipalities, owners of existing affordable housing developments, and public housing authorities to redevelop existing real estate for these uses.

Middle Income Housing: \$20,000,000: RIHousing is supporting the development of housing units that are affordable to households earning up to 100% AMI.

Homelessness Assistance: \$14,500,000: OHCD is implementing a range of new housing stabilization services, especially those targeting homeless populations that have traditionally had difficulty accessing services.

Affordable Housing Predevelopment: \$10,000,000: Typical unreimbursed predevelopment costs for multifamily projects can range from \$100,000 to \$750,000, and create delays and financial hardships, particularly for non-profit, mission-driven developers. The funds are offsetting these costs and expediting production.

Permanent Supportive Housing: Crossroads: \$10,000,000: Crossroads is launching the Summer Street project to replace The Tower with 176, one-bedroom units, with private bathrooms and kitchens.

Public Housing Pilot Program: \$10,000,000: RIHousing is providing no-interest loans and grants to public housing authorities to increase the supply of affordable housing and stabilize existing affordable housing. These funds are being used to build technical capacity, secure predevelopment services, and begin the process of redevelopment and/or repositioning of existing units.

Homelessness Assistance: Warming Center and Shelter \$7,000,000: The State-owned Cranston Street Armory in Providence and other *Homelessness Assistance* projects provided shelter and supportive services to people experiencing homelessness.

Statewide Housing Plan: \$2,000,000: This project is making it possible for the Rhode Island Secretary of Housing to develop reports required by the Rhode Island General Assembly.

OHCD Support and Capacity: \$1,500,000: OHCD is onboarding 13 staff or contract resources to expand and enhance agency capacity in the areas of housing/homelessness.

Climate

Port of Davisville: \$65,000,000: The Quonset Development Corporation is making infrastructure improvements at the Port of Davisville, including the reconstruction of a portion of Pier 1, constructing a new terminal, creating approximately 40 additional acres of cargo laydown space, and creating new access drives and security gate in compliance with federal standards.

Children, Families, and Early Education

Child Care Retention Bonuses: \$37,400,000: The Rhode Island Department of Human Services (DHS) paid \$1,500 semiannual retention bonuses (up to \$3,000 per person) during State Fiscal Year 2022 to all child care staff who were employed with a provider for at least six consecutive months. The State extended the project through State Fiscal Year 2023, with quarterly \$750 bonuses paid to all child care staff who were employed with a provider for at least three consecutive months.

DCYF Workforce Stabilization: \$22,131,723: The Rhode Island Department of Children, Youth, and Families (DCYF) is providing foster care, congregate care, and home- and community care-based provider staff who earn less than \$75,000 annually with retention payments of up to \$694.50 per month for work since July 1, 2021.

Nonprofit Assistance: \$20,000,000: The Rhode Island Foundation provided general operating grants, ranging from \$50,000 to \$150,000, to approximately 250 nonprofit organizations that are working to address food insecurity, housing instability and homelessness prevention, and behavioral health needs.

Early Intervention Provider Relief and Recovery: \$11,000,000: As of February 2022, all nine Early Intervention (EI) providers in Rhode Island struggled to accept referrals due to significant staffing shortages. This project is reopening referrals by providing stabilization grants to EI providers to cover operating costs, such as staffing, outreach, and professional development. The project is also providing performance payments to EI providers for meeting specified targets, such as recovering referrals to their 2019 levels, increasing the percentage of children referred who complete the eligibility process and engage in services, and reducing disproportionality for families with Medicaid coverage and families of color.

Support for Survivors of Domestic Violence: \$10,500,000: The Rhode Island Department of Public Safety is providing funds to nonprofits whose primary mission is providing services to adult and youth survivors of domestic violence and sexual abuse.

Pediatric Provider Relief and Recovery: \$7,500,000: The Rhode Island Executive Office of Health and Human Services (EOHHS) designed this project to place children on a path toward healthy development, improved mental health, and school readiness. Pediatric and family practice primary care providers who serve Medicaid-covered children received a portion of \$6 million in grant funds to improve access to services, as well as a portion of \$1.3 million in performance-based grants. Finally, approximately

\$200,000 was used to retain a technical assistance contractor to assist recipients of the performance-based grants.

Pediatric Provider Relief and Recovery: Phase II: \$7,500,000: This phase of the project is continuing to incentivize pediatric primary care providers to improve access to care, immunizations, and screenings, and invest in primary care practices to support the staffing and infrastructure necessary to rebound from pandemic-related delays in care. EOHHS is making six payments to participating practices.

Adult Education Providers: \$5,000,000: Rhode Island's publicly funded network of 19 adult education providers delivers high-quality services that support adults in reaching their diverse college and career goals, including high school equivalency preparation, English for Speakers of Other Languages, digital literacy skills development, and workforce preparation and training. This project, administered by the Rhode Island Department of Elementary and Secondary Education is providing direct grants to adult education providers to create regional hubs, purchase devices and software, support the integration of digital literacy, and expand services.

Child Care Enhanced TEACH Program: \$2,000,000: This project, administered by DHS, is supporting the TEACH Early Childhood RI (TEACH) program that helps child care businesses implement best practices, reduce staff turnover, onboard staff, and continue to provide high-quality early child care learning and education. TEACH provides access to a higher-education curriculum on the academic, social, and cognitive skills that develop from birth through school age.

Child Care Workforce Registry: \$1,000,000: DHS is creating a workforce registry to better serve child care providers by targeting interventions to the workforce's needs. Having an accurate list of past and present educators will allow the State to survey educators on the working conditions in child care facilities and tailor policies to address these conditions and reduce staff turnover.

Child Care Quality Improvements: \$1,000,000: The project is increasing the Rhode Island Association for Education of Young Children's capacity to improve the environmental rating scale (ERS) scores for child care providers. ERS scores are tied to improved quality interactions and environments for children, while also increasing reimbursement rates for participating programs.

DCYF Sign-on Bonuses: \$789,043: DCYF is offering \$750 sign-on bonuses to newly hired employees at contractor agencies after 90 days of employment.

Child Care Family Provider Support: \$600,000: DHS is providing \$2,000 grants to new family child care (FCC) providers to cover the startup costs associated with opening an FCC setting.

Behavioral Health

Certified Community Behavioral Health Clinics: \$30,000,000: EOHHS is providing infrastructure development grants to community-based behavioral health and social services providers to recover from the pandemic and comply with federal Certified Community Behavioral Health Clinic (CCBHC) standards. These grants are supporting CCBHC providers and organizations seeking to become designated collaborating organizations.

Psychiatric Residential Treatment Facility: \$11,000,000: DCYF is adding 12 psychiatric residential treatment facility (PRTF) beds, with the construction of a new facility or facilities on the campus of the state's only existing PRTF provider.

Butler Hospital Short Term Stay Unit: \$8,000,000: This EOHHS project is supporting the construction of a 25-bed short-term stay unit at Butler Hospital, a nonprofit psychiatric hospital, to provide behavioral

health care services, crisis intervention, and related services. The unit will care for patients with mental health needs and alleviate the overcrowding at emergency departments.

9-8-8 Mental Health Hotline: \$3,475,000: This BHDDH-administered project addresses the increased demand for mental health services related to the pandemic. Congress designated 9-8-8 as the new, easy-to-remember dialing code for the National Suicide Prevention Lifeline. 9-8-8 is a mental health safety net, intended to reduce suicides and mental health crises and provide a pathway to well-being.

Crisis Intervention Trainings: \$2,200,000: The Rhode Island Department of Behavioral Health, Developmental Disabilities, and Hospitals (BHDDH) in conjunction with Thundermist Health Center is expanding the Crisis Intervention Training program, which is aimed at training, educating, and building networks for law enforcement, mental health providers, hospitals, etc., to better respond to communities' behavioral health needs.

Female Youth Residential Facility Design: \$1,000,000: The Rhode Island Department of Administration's Division of Capital Asset Management and Maintenance is assisting with the design and architectural plans for a new residential facility to care for female clients, ranging in age from 13 to 18. The new facility will provide 16 residential beds, classrooms, treatment rooms, recreation areas, and support spaces for youth, staff, and families.

Public Infrastructure and Technology

RI Public Transit Authority (RIPTA) R-Line Free Service Pilot: \$3,250,000: RIPTA is implementing a free fare pilot project on the R-Line – a route from Pawtucket through Providence that has RIPTA's heaviest ridership. The project is designed to see if ridership can be brought back to pre-pandemic levels.

RI Turnpike and Bridge Authority (RITBA) Safety Barriers Study: \$1,750,000: RITBA retained a consulting firm to develop a detailed report on what, if any, safety barrier measures are possible on the Jamestown Verrazzano and Mount Hope bridges to reduce the incidence of suicide on these bridges.

Broadband Mapping and Planning: \$500,000: About one-in-five Rhode Islanders do not have in-home wireline broadband internet. Half of the state does not reliably access internet download and upload speeds above the new federal minimum of 100mbps/20mbps. This funding helped hire a statewide broadband coordinator, build the broadband maps for a strategic plan, and complete the plan to guide the work moving forward.

Promoting Equitable Outcomes Overview

The pandemic placed in stark relief the inequities that pervade society and, in many cases, exacerbated them. Rhode Island recognizes the challenges and gaps facing underserved communities and appreciates the urgency to find solutions. As state agencies developed proposals for State Fiscal Recovery Fund (SFRF) projects, they considered the importance of equity and carefully tailored proposals to promote equitable outcomes. These projects and their focus on equity are described in the project inventory.

The historically underserved, marginalized, or adversely affected groups that the State intends to serve with the SFRF projects include, but are not limited to, (1) minority business enterprises (MBEs); (2) racial and ethnic minorities; (3) employees in industries that suffered disproportionate economic harms; and (4) low-income individuals at risk of experiencing homelessness or struggling to access health care services.

The State's experience administering programs funded by the Coronavirus Relief Fund (CRF) and direct federal awards, as well as programs carried out before the pandemic, positions Rhode Island to connect with hard-to-reach audiences. The State is using various outreach strategies to inform residents and

businesses of the opportunities made available by the SFRF. These strategies include, but are not limited to, earned media, press conferences, remote and in-person community forums, mailers, and social media. Additionally, the State is relying on partners, including nonprofit organizations, representatives from the State's health equity zones, and community groups as trusted messengers who can use word-of-mouth and one-on-one conversations to inform constituencies.

The State is ensuring that administrative requirements will not discourage prospective SFRF beneficiaries. It is critical that the State's SFRF-financed projects do not impose onerous burdens on groups targeted for assistance, while complying with all federal reporting standards. The State is committed and able to strike this balance.

Community Engagement

In 2021, Governor McKee and Lt. Governor Sabina Matos convened a process called Rhode Island 2030 (RI 2030) to develop a long-term strategy for a more resilient, prosperous, and equitable Rhode Island over the next decade and beyond. These discussions centered on creating a brighter future that, in part, could be realized by the effective use of the State's State Fiscal Recovery Fund (SFRF) allocation.

Throughout the spring and summer of 2021, the Governor and Lt. Governor held 13 Community Conversations with participation from members of the General Assembly, policy experts, community leaders, and others to discuss subjects such as housing, the economy, climate change, children and youth services, health, and higher education. For those who could not watch live, recordings with automatically generated captions were made available on Facebook. Outreach for each event was conducted via email, social media, and promotion in the local press.

On October 15, 2021, Governor McKee and Lt. Governor Matos released a working document, titled RI 2030, with goals, objectives, and opportunities that were shaped by the input and insights from the Community Conversations. In October and November 2021, the Administration held in-person public input sessions to solicit feedback on the RI 2030 working paper to further shape the vision. Translation services were available at these events, giving non-native English speakers an opportunity to provide input. In addition to these events, Rhode Islanders were encouraged to submit feedback online.

In addition to the engagement that informed the development of RI 2030, state agencies are leading robust outreach campaigns to notify potential beneficiaries about funding opportunities through the SFRF. Below is a description of the outreach conducted by the Rhode Island Department of Human Services (DHS) around the *Child Care Retention Bonuses* and *Child Care Family Provider Support* projects and by the Rhode Island Commerce Corporation (Rhode Island Commerce) for its *Small Business Supports* programs.

DHS has made all outreach materials, applications, program materials, and the [Funding Opportunities](#) webpage available in English and Spanish. All application materials are accessible via mobile or desktop, require no more than 15 minutes, and are free of jargon or technical language. Ninety-seven percent of applicants for the second round of the semiannual retention bonuses responded neutrally or positively to a question regarding the ease of the application process. For the *Child Care Family Provider Support* grant project, 100% of applicants responded neutrally or positively to the same question.

DHS works closely with vendors and community partners who have trusted relationships in the field and act as its liaison on all programming. Intensive outreach across both programs includes:

- Emails to child care programs, potential applicants, vendors, etc.
- For the *Child Care Retention Bonuses* project, all employers and previous grant recipients received direct outreach with updates on the program.

- For the *Child Care Family Provider Support* project, all current providers received emails, encouraging them to share the opportunity with their networks. Any recent participants in the family child care provider orientation also received repeated outreach.
- For the first round of the *Child Care Retention Bonuses* project, the team conducted 1,837 direct outreaches.
- DHS worked with community partners to share social media posts advertising the opportunities and a promotional video about the *Child Care Family Provider Support* project that resulted in an increase in applications.
- When an applicant requires additional support, DHS, a vendor, and community partners collaborate on direct outreach via phone or email, often multiple times, to resolve the issue and provide technical assistance where necessary.

As a result, in the first round of the current retention bonus program, a vast majority of licensed programs had at least one employee apply.

For its *Small Business Supports* programs, Rhode Island Commerce worked with eight marketing/outreach partners – East Greenwich Chamber of Commerce, North Kingstown Chamber of Commerce, Newport Chamber of Commerce, Multicultural Innovation Center, Social Enterprise Greenhouse, Rhode Island Hispanic Chamber of Commerce, Rhode Island Hospitality Association, and Innovation Studio – to provide support through social media campaigns, website homepage takeovers, webinars, and e-blasts to their constituents. Additionally, Rhode Island Commerce distributed print flyers in English and Spanish at community event locations, launched a paid advertising and social media campaign, and spread the word through Main Street events in Central Falls and South Kingstown.

Project Inventory

The project inventory provides an overview of each initiative (including problem statement, use of evidence, key performance indicators, labor requirements, etc.) that has advanced through the Rhode Island Pandemic Recovery Office’s reporting and compliance approval process in State Fiscal Years 2022 and 2023. The project inventory provides an overview of each initiative (including problem statement, use of evidence, key performance indicators, labor requirements, etc.) and is divided by Governor McKee’s Rhode Island 2030 categories.

Aid to Small Business and Impacted Industries and Economic and Workforce Development

Project	U.S. Treasury Expenditure Category	Planned Expenditures	Expenditures to Date
Unemployment Insurance Trust Fund Contribution	Negative Economic Impacts: Contributions to Unemployment Insurance Trust Funds	\$100,000,000	\$100,000,000
Enhanced Real Jobs	Negative Economic Impacts: Assistance to Unemployed or Underemployed Workers	\$30,000,000	\$7,778,198.25
Small Business Direct Grants	Negative Economic Impacts: Loans or Grants to Mitigate Financial Hardship	\$13,267,733	\$13,267,732.85
Small Business Technical Assistance	Negative Economic Impacts: Technical Assistance, Counseling, or Business Planning	\$10,605,401	\$8,043,862.32
Small Business Public Health Capital Improvements	Public Health: COVID-19 Assistance to Small Businesses	\$7,627,557	\$7,627,512.10
Hospitality, Tourism, and Events Direct Grants	Negative Economic Impacts: Aid to Tourism, Travel, or Hospitality	\$8,424,908	\$8,398,668.65
Hospitality, Tourism, and Events Placemaking	Revenue Replacement: Provision of Government Services	\$3,074,401	\$3,074,371.75
Hospitality, Tourism, and Events Marketing	Negative Economic Impacts: Aid to Tourism, Travel, or Hospitality	\$2,000,000	\$2,000,000

Project	U.S. Treasury Expenditure Category	Planned Expenditures	Expenditures to Date
Aid to the Convention Center	Revenue Replacement: Provision of Government Services	\$10,000,000	\$10,000,000
Minority Business Accelerator	Negative Economic Impacts: Business Incubators and Start-up or Expansion Assistance	\$5,200,000	\$200,060.01
Minority Business Accelerator: RI Black Business Association	Revenue Replacement: Provision of Government Services	\$500,000	\$500,000
Minority Business Accelerator: Roger Williams University Start-up Clinic	Revenue Replacement: Provision of Government Services	\$300,000	\$300,000
Destination Marketing	Revenue Replacement: Provision of Government Services	\$3,000,000	\$899,631.81
Total		\$194,000,000	\$162,090,037.74

Unemployment Insurance Trust Fund Contribution

Project Identification Number: 10029

Funding Amount: \$100,000,000

Project Expenditure Category: 2.28 Negative Economic Impacts: Contributions to Unemployment Insurance Trust Fund

Pandemic-related Problem Statement: The pandemic contributed to an unprecedented increase in unemployment insurance (UI) claims in Rhode Island – peaking at 104,589 in April 2020.⁴ This increase contributed, in part, to the depletion of the UI trust fund. From January 27, 2020, to August 1, 2022, the balance decreased from approximately \$525.9 million to \$258.2 million. The lower balance resulted in the UI tax rate schedule moving up from schedule F to H, costing businesses approximately \$31.0 million.

Project Overview: The State partially replenished its UI trust fund. An infusion of at least \$78,625,000 was needed to move down the UI tax rate schedule from schedule H to schedule G. This tax schedule change is projected to result in estimated tax savings of approximately \$10.7 million for Rhode Island businesses.

⁴ Department of Labor and Training - Monthly Update for April 2020

Timeline: The funds were deposited in the UI trust fund in September 2022. The UI tax rate schedule for calendar year 2023, which was determined in December 2022, moved down to Schedule G on January 1, 2023.⁵

Mechanisms and Partners: The Rhode Island Department of Labor and Training (DLT) deposited the funds in the UI trust fund.

Use of Evidence: While this intervention has not been identified as evidence based, the analysis of the key performance indicators will evaluate its effectiveness.

Equity Impact: About 7.4% of Rhode Island businesses are minority owned, with most employing between one and ten people.⁶ This intervention will provide tax savings to these businesses.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Reduction in UI tax rate schedule	Anticipated reduction from schedule H to schedule G	0	1*
Number of businesses impacted	Number of businesses that contribute to the UI trust fund in calendar year 2023 that realize tax relief	0	Not yet applicable
Total tax impact on businesses	Total tax savings to businesses in calendar year 2023 due to the project	0	Not yet applicable

**This is a yes/no binary indicator: 0 meaning 'no', 1 meaning 'yes'.*

Enhanced Real Jobs

Project Identification Number: 10035

Funding Amount: \$30,000,000

Project Expenditure Category: 2.10 Negative Economic Impacts: Assistance to Unemployed or Underemployed Workers

Pandemic-related Problem Statement: The pandemic resulted in thousands of Rhode Islanders becoming unemployed or underemployed. As of August 2022, the underemployment rate was 7.4% (approximately 41,292 workers), according to the Rhode Island Department of Labor and Training's (DLT) Labor Market Information Section.⁷ The percentage does not include employed individuals seeking a position with greater opportunities for economic advancement. The rate of employees who voluntarily quit their job is another data point used to assess employment dissatisfaction and gauge individuals' interest in seeking better opportunities. At the start of the pandemic, the rate was 9%. It has fluctuated between 12% and 14% in the first half of 2022, underscoring the need to upskilling and better job opportunities.

⁵ [Department of Labor and Training Announces 2023 Tax Rates for Unemployment Insurance and Temporary Disability Insurance](#)

⁶ [Rhode Island BIPOC Small Business Ecosystem Assessment](#)

⁷ [US Bureau of Labor Statistics - Alternative Measures of Labor Underutilization for States](#)

Project Overview: The *Enhanced Real Jobs* (ERJ) program, which is built on the existing Real Jobs Rhode Island (RJRI) initiative, seeks to address unemployment and underemployment by providing career readiness, workforce development, and supportive services to impacted workers to place them in sustainable jobs and on resilient career paths.

Specific training modules are developed through a collaborative process in which ERJ Partnerships identify skills gaps, job openings, and career opportunities, and work with training providers and community-based organizations to establish curricula and related services. The Rhode Island Office of the Postsecondary Commissioner (OPC) is providing supportive services, including transportation, child care, training supplies, general workplace skills training, financial literacy training, etc. Participants who complete an ERJ training program are matched with an employer or are provided with new skills and/or credentials that increase the participant's career and earning prospects.

Timeline: DLT signed 67 contracts totaling approximately \$4.5 million from October through December 2022; it signed 65 contracts totaling approximately \$12.9 million from January through March 2023; and it signed 17 contracts totaling approximately \$1.34 million from April through June 2023. DLT envisions obligating the remaining \$11.2 million by December 2023 and anticipates that expenditures will be steady in State Fiscal Years 2024 and 2025.

Mechanisms and Partners: The project is leveraging the RJRI platform for procurement, performance management, and functionality. The procurement involved a competitive solicitation for bids from industry clusters that represent a collaboration of employers, training providers, community groups, and labor to create workforce development solutions. The industry clusters submitted training programming proposals to DLT for consideration to be recognized as ERJ Partnerships.

The ERJ Partnerships submit training programming proposals to DLT, which evaluates the proposals for breadth, effectiveness, likelihood of success, and anticipated job placements or skills/income gains before approving or denying the proposals. The ERJ Partnerships are contracted through their fiscal agent, which can be the ERJ Partnership itself or one of its entities. Grant amounts are based on the financial requirements of the specific proposal.

DLT treats the ERJ Partnerships as contractors who provide consultant-style services in the development of trainings, identification of job opportunities, recruitment of participants, and delivery of training. The ERJ Partnerships directly perform the services or contract with another entity to provide them. DLT staff oversee the contractual relationships and direct ERJ Partnerships in the collection of key performance indicator data.

Use of Evidence: Adult vocational training and sector-based workforce initiatives receive the highest and second-highest ratings for evidence-based positive impacts, according to the Pew Results First Clearinghouse.⁸ Additionally, support services, such as child care subsidies, received the highest rating.⁹

Equity Impact: DLT is emphasizing outreach to historically marginalized communities, low-income communities, and communities of color, and requiring ERJ Partnerships to prioritize equity in selecting training cohorts. DLT's Office of Community Engagement, in conjunction with the Director of DLT, has established diversity, equity, inclusion, and access policies for the operation of the RJRI platform that include a targeted outreach mechanism and tracking of participant demographic data to ensure that programming is designed and implemented with an equity focus. This means that RJRI programming is designed to serve people of color and women at rates that exceed workforce participation percentages to

⁸ [Penn State Social Science Research Institute Clearinghouse Database](#)

⁹ [County Health Rankings & Roadmaps](#)

address their systemic and long-standing underrepresentation in the delivery of workforce development services.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
U.S. Treasury Required Number of workers enrolled in sectoral job training programs		0	5,038
U.S. Treasury Required Number of workers completing sectoral job training programs		0	2,534
Percentage of participants placed in jobs	Participants who find employment upon completion of or during participation in program services as measured against the entire participant universe	0	44.7%
Percentage of participants upskilled	Participants with a measurable skill gain upon completion of programming services as measured against the entire participant universe	0	45.1%
Percentage of participants in sustainable employment one year from ERJ training completion	Participants who remain employed in the job in which they were placed, or are in a job of equivalent or greater pay, or are employed in a substantially similar or better-compensated position or in a substantially similar or related field	0	Not yet applicable
Percentage of participants upskilled to higher-level jobs	Incumbent (employed at time of training) upskilled workers who move into higher-wage jobs	0	Not yet applicable

Aid to Small Businesses and Impacted Industries

The State is implementing interventions targeting *Small Businesses* and those in the *Hospitality, Tourism, and Events* (HTE) sector.

- In March 2021, the U.S. Small Business Administration (SBA) noted that the pandemic’s effects on small businesses were felt most acutely in metropolitan and coastal areas, along

with restaurants, educational support services, taxi/limousine services, child day care services, self-employed individuals, and Black and Asian business owners.¹⁰ The State is assisting small businesses through three projects: *Small Business Direct Grants*, *Small Business Technical Assistance*, and *Small Business Public Health Capital Improvements*. These projects are targeting small businesses with less than \$2 million in annual gross revenues that demonstrate a negative impact from the pandemic as determined by the Rhode Island Commerce Corporation (Rhode Island Commerce). Under these projects, total support cannot exceed \$10,000 per eligible business through any of the three projects separately and \$30,000 in the aggregate.

- The hospitality, tourism, and events industries were hit especially hard by the pandemic. Rhode Island’s leisure and hospitality sector lost about 37,000 jobs in the initial months of the pandemic, representing a 61.5% decline.¹¹ As of December 2021, the leisure and hospitality sector was still about 7,000 jobs below pre-pandemic levels.¹² Hospitality, tourism, and events businesses are eligible to receive funds or services from three projects – *Hospitality, Tourism, and Events Direct Grants*; *Hospitality, Tourism, and Events Placemaking*; and *Hospitality, Tourism, and Events Marketing* – if they demonstrate a negative impact from the pandemic as determined by Rhode Island Commerce.

The pandemic further stressed minority- and women-owned businesses. According to a McKinsey & Company study from 2020, there is a “\$290 billion ... [gap in the] opportunity to grow overall wealth by achieving revenue parity between Black- and white-owned businesses. Furthermore, Black business owners have been disproportionately affected by the pandemic-linked economic downturn, in part, because they were more likely to be in a precarious position (e.g., more likely to be in communities with business environments more likely to produce poor business outcomes). Indeed, about 58 percent of Black-owned businesses were at risk of financial distress before the pandemic compared with about 27 percent of white-owned businesses. The pandemic contributed to tipping 41 percent of Black-owned businesses into closure from February to April 2020.”¹³ These data are not specific to Black-owned businesses in Rhode Island but are illustrative of the data that support minority- and women-owned businesses as being historically underserved or marginalized.

At least 20% of the *Small Business* funds are reserved to assist minority business enterprises (MBEs), including women-owned businesses, as defined by state law.¹⁴ For the purposes of the *Small Business* projects, a “minority-owned business” must be (1) at least 51% owned by such individuals who also control and operate the business; or (2) in the case of a publicly owned business, at least 51% of the stock is owned by one or more such individuals. “Minority” means a person who meets one or more of the following definitions:

- Woman.
- Black (a person having origins in any of the black racial groups of Africa).
- Hispanic (a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race).
- Portuguese (a person of Portuguese, Brazilian, or other Portuguese culture or origin, regardless of race).

¹⁰ [The Effects of the COVID-19 Pandemic on Small Businesses](#)

¹¹ [Rhode Island Department of Labor and Training’s Current Employment Statistics Seasonally Adjusted Data 2020](#)

¹² [Rhode Island Department of Labor and Training’s Current Employment Statistics Seasonally Adjusted Data 2021](#)

¹³ [Building support ecosystems for Black-owned US businesses](#)

¹⁴ [R.I. Gen. Laws § 37-14.1-3](#)

- Asian American (a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands).
- American Indian and Alaskan Native (a person having origins in any of the original peoples of North America).
- Members of other groups or other individuals found to be economically and socially disadvantaged by the SBA under § 8(a) of the Small Business Act, as amended, 15 U.S.C. § 637(a).¹⁵

Small Business Direct Grants

Project Identification Number: 10008

Funding Amount: \$13,267,733

Project Expenditure Category: 2.29 Negative Economic Impacts: Loans or Grants to Mitigate Financial Hardship

Pandemic-related Problem Statement: In March 2021, the U.S. Small Business Administration (SBA) noted that the pandemic's effects on small businesses were felt most acutely in metropolitan and coastal areas, along with restaurants, educational support services, taxi/limousine services, child day care services, self-employed individuals, and Black and Asian business owners.¹⁶

Project Overview: The project provided \$2,500 or \$5,000 grants to small businesses to be used for salaries to avoid furloughs or layoffs, operating costs, reopening costs, and other expenses. Eligible businesses must have had less than \$2 million in gross receipts or sales in either tax year 2020 or tax year 2021 that suffered a revenue loss because of the pandemic. Eligible industries were accommodation/hotels, agriculture, arts, entertainment, recreation, child care providers, construction, education services, finance, insurance, health care, manufacturing, personal care services, professional/science and technical service, restaurants, bars, caterers, food trucks, other food services, retail, transportation, wholesale, and warehousing. Between March 2022 and August 2022, 2,489 small businesses received grants totaling approximately \$11.4 million.

The provision of these \$2,500 or \$5,000 grants did not exhaust the project appropriation, leaving approximately \$875,000. The Rhode Island Commerce Corporation (Rhode Island Commerce) decided to distribute the remaining funds to small businesses that received a previous grant and that operate in one of the following industries: food services and drinking places, personal services, and arts, entertainment, and recreation. Of the original 2,489 beneficiaries, 1,055 were eligible for a supplemental grant of \$800. Between March 2023 and June 2023, 803 small businesses received supplemental grants totaling approximately \$642,000.

Timeline: In January 2022, the program framework and technology solution were implemented. In mid-January through the end February 2022, the technical assistance partners were activated, trained on the technology solution, and trained on program requirements, including the SAM.gov registration process. Applications were accepted between February 1 and February 15, 2022. Grants were distributed from March 2022 through August 2022. Supplemental grants were distributed from March 2023 through June 2023.

¹⁵ [15 USC 637](#)

¹⁶ [The Effects of the COVID-19 Pandemic on Small Businesses](#)

Mechanisms and Partners: The Rhode Island Executive Office of Commerce (EOC) executed a subaward agreement with Rhode Island Commerce to deliver the project on behalf of EOC.

Use of Evidence: Research indicates that direct financial support to small businesses has a positive impact on the economy. According to an analysis of the Paycheck Protection Program by the Hutchins Center on Fiscal and Monetary Policy at Brookings, there is “a direct cumulative increase in GDP of roughly 25 cents over the course of 3 years for every dollar of grants to small businesses.”¹⁷ Additionally, the Congressional Budget Office reported in *The Effects of Pandemic-Related Legislation on Output* that “grants ... will provide liquidity to businesses experiencing financial distress, increasing the likelihood that they will survive and preserve jobs for their employees while economic activity is weak.”¹⁸

Rhode Island Commerce created the *Small Business Direct Grants* project by considering lessons learned from prior emergency response grant programming.

Equity Impact: The *Small Business Direct Grants* project required that at least 20% of the funds was dedicated to minority businesses enterprises (MBEs). The project expanded upon previous efforts to serve historically underserved, marginalized, and adversely affected small businesses by selecting technical assistance partners with the knowledge, experience, and existing networks to assist minority- and women-owned businesses. Partners assisted in outreach to make eligible businesses aware of the program and provided one-on-one assistance ranging from applying for direct grants to registering on SAM.gov. Additionally, application materials and advertisements were produced in multiple languages.

Of the recipients of the *Small Business Direct Grants*, 60.6% were MBEs, including women-owned businesses.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
U.S. Treasury Required Number of small businesses served		0	2,489
Number of businesses provided a small business grant	Broken down by industry, award amount, municipality, and business size/revenue	0	2,489
Dollars disbursed	Broken down by industry, municipality, business size/revenue, and MBEs, including women-owned businesses	0	\$12,079,100
Number of MBEs, including women-owned businesses, served		0	1,508

¹⁷ [What Could Additional Fiscal Policy Do for the Economy in the Next Three Years?](#)

¹⁸ [The Effects of Pandemic-Related Legislation on Output](#)

Key Performance Indicator	Description	Baseline	Performance-to-date
Percentage of businesses in operation at least six months after receiving grant	Based on survey data	0	65%
Number of businesses provided a supplemental grant award		0	803

Small Business Technical Assistance

Project Identification Number: 10013

Funding Amount: \$10,605,401

Project Expenditure Category: 2.30 Negative Economic Impacts: Technical Assistance, Counseling, or Business Planning

Pandemic-related Problem Statement: Businesses, particularly small businesses, suffered from inexperience with agile business practices as they faced pandemic-related disruptions. Many businesses lacked the knowledge or resources to quickly pivot to e-commerce, access federal and state funding, and generally plan for and adapt to the changing world during the pandemic.

Project Overview: This project is providing targeted finance, technology, marketing, and planning assistance to improve small businesses’ knowledge base and resiliency. The first phase of the project helped businesses apply for *Small Business Direct Grants* and the *Hospitality, Tourism, and Events Direct Grants* and was administered by three vendors: Roads Consulting Group, the RI Hispanic Chamber of Commerce, and the Center for Southeast Asians. The second phase is providing a range of technical assistance services through vendors selected by a competitive bid process. A central vendor is conducting the bid process, processing applications from small businesses, and matching eligible small businesses with approved vendors.

Timeline: The first phase of the project began in late January 2022 and ended with the last of the *Hospitality, Tourism, and Events Direct Grants* that were disbursed in November 2022. The second phase will begin in July 2023 and is anticipated to be completed by December 31, 2023. Technical assistance vendor applications went live in March 2023, and small business applications went live in April 2023. As small businesses began to be matched with vendors, technical assistance was anticipated to ramp up in August 2023.

Mechanisms and Partners: The Rhode Island Executive Office of Commerce (EOC) executed a subaward agreement with the Rhode Island Commerce Corporation (Rhode Island Commerce) to deliver the project on behalf of EOC.

Use of Evidence: There is a growing body of evidence to support the provision of technical assistance to small businesses. In a September 2018 report, the Milken Institute stated, “[Technical assistance] is one of the most effective methods for building the capacity of entrepreneurs and small-business owners.”¹⁹ Additionally, a 2014 evaluation of the U.S. Small Business Administration’s Small Business

¹⁹ [Best Practices for Technical Assistance Programs Serving Black and Hispanic Entrepreneurs and Small-Business Owners](#)

Development Centers programming found that most small businesses served had a positive experience with the program.²⁰

Rhode Island Commerce is evaluating and measuring the impacts of this initiative by collecting data from the application and intake processes. For the first phase, Rhode Island Commerce is assessing the impacts that the technical assistance had on businesses' successful application for the *Small Business Direct Grant* and the *Hospitality, Tourism, and Event Direct Grant* programs. Technical assistance partners are required to track the businesses they support, the amount of time they work with a business, the type of support provided, and the business size, industry, and minority business status. This will allow Rhode Island Commerce to track applications and awards to provide data on the interventions' efficacy.

For the second phase, Rhode Island Commerce will evaluate the program's success against both input and output metrics, specifically: the number of eligible small businesses that are served, the percentage of these businesses that are minority- or women-owned businesses, the hours of support provided to each business by service type, and the percentage of served small businesses that a) remain in business, b) have maintained or increased staff, and c) increased revenue after one year.

Equity Impact: The *Small Business Technical Assistance* project requires that at least 20% of funding is dedicated to minority business enterprises (MBEs), including women-owned businesses. Rhode Island Commerce is working with "concierges" or intake counseling supports for businesses that a) have trusted relationships in historically underserved and marginalized communities and b) can provide interpretation assistance for business owners whose preferred language is not English. These efforts – along with targeted marketing and outreach – will directly support equity results. The first phase of the project supported businesses in applying for direct grants in the following languages: Spanish, Portuguese, French, Korean, Mandarin, Hmong, Vietnamese, Laotian, Khmer, and Tagalog.

According to a report by The Hamilton Project, as of 2007, minority-owned businesses had considerably fewer employees, on average, than nonminority-owned businesses, and women-owned businesses had fewer employees than those owned by a man. In 2002, average gross receipts for minority-owned businesses were approximately \$167,000 compared to \$439,000 for nonminority-owned businesses; receipts were particularly low for African American-owned businesses at \$74,000. A post-recession survey of businesses led by a woman showed that their annual revenues were approximately \$154,000, although it is hard to compare this number to those above because the recession disproportionately affected women and minority business owners.²¹

The first phase of the *Small Business Technical Assistance* project was designed to assist businesses in meeting administrative requirements (e.g., SAM.gov registration, grant agreement/W9 uploads, and fluency in contractual English) that create disparities in the ability to complete applications.

Of the program participants or recipients thus far, 69.86% are MBEs, including women-owned businesses.

²⁰ [Small Business Management and Technical Assistance Training Programs](#)

²¹ Minority and Women Entrepreneurs: Building Capital, Networks, and Skills

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
U.S. Treasury Required Number of small businesses served		0	1,282
Number of eligible small business served		0	1,282
Hours of support provided to each business	Broken out by service type	0	1,844.35
Percentage of served small businesses that remain in business one year from support		0	Data not yet available
Number of successful applications to the <i>Small Business Direct Grant</i> program due to service provision		0	784

Small Business Public Health Capital Improvements

Project Identification Number: 10010

Funding Amount: \$7,627,557

Project Expenditure Category: 1.8 Public Health: COVID-19 Assistance to Small Businesses

Pandemic-related Problem Statement: Data clearly show that infectious diseases like COVID-19 are less transmissible in outdoor settings compared to indoor settings.²² To support this public health imperative, it is important that small businesses can relocate more of their services to outdoor settings and enhance their ventilation systems. Studies have shown that good air circulation inside buildings reduces the spread of COVID-19 in aerosols.²³ Ventilation upgrades not only help small businesses conduct business in a safer manner, but also provide the public with a sense of safety.

In the summer of 2021, the Rhode Island Commerce Corporation (Rhode Island Commerce) conducted a survey of over 500 businesses and found that 77% of responding food service businesses and 88% of responding nonprofits/social assistance businesses would benefit from outdoor capacity supports.²⁴ Rhode Island Commerce receives inquiries from small businesses, industry associations, municipalities, and nonprofit partners requesting additional support in this area.

Project Overview: This project is comprised of two components: *Small Business Take It Outside Program* and *Small Business Ventilation Services*.

Small Business Take It Outside Program, \$5.0 million: The project is providing grants to intermediaries (e.g., merchant/industry associations, chambers of commerce, nonprofit organizations, downtown

²² <https://www.epa.gov/coronavirus/indoor-air-and-coronavirus-covid-19>

²³ <https://www.cdc.gov/coronavirus/2019-ncov/community/ventilation.html>

²⁴ [RI Small Business Coalition Survey](#)

improvement districts, municipalities, and others) to purchase, obtain, deliver, or install the following: furniture, heat lamps, tents, outdoor Wi-Fi, masks, hand sanitizer, personnel, lighting, power sources, signage, etc. Rhode Island Commerce is also paying for various administrative costs, such as technology, application underwriting and review, data reporting and analytics, and auditing.

Small Business Ventilation Services, \$2.7 million: This project is providing initial technical assistance and needs assessment services to help small businesses improve their ventilation systems. The project is also supporting the purchase and installation of air filters and other ventilation equipment to increase air flow through buildings. Small businesses are working with their ventilation vendors, receiving a needs assessment, and, depending on the findings, adding ventilation enhancements. These ventilation improvements are improving air quality and better positioning businesses to address any future surges of COVID-19.

Timeline: *Small Business Take It Outside Program:* Activities are active and ongoing. Intermediaries selected for participation in the program have initiated or are initiating activities under the program.

Small Business Ventilation Services: A request for proposals was issued to solicit intermediaries to support the program in March 2023. Business applications for ventilation services began in March 2023. Invoicing for reimbursement by intermediaries began in April 2023.

Mechanisms and Partners: The Rhode Island Executive Office of Commerce (EOC) executed a subaward agreement with Rhode Island Commerce to deliver the project on behalf of EOC. *Small Business Take It Outside Program* intermediaries were selected through a request for proposals process to purchase, obtain, deliver, install, or distribute Take It Outside-related goods and services. The *Small Business Ventilation Services* project is using numerous heating, ventilation, and air conditioning vendors and a singular payment processing vendor to distribute ventilation-related goods and services.

Use of Evidence: The Centers for Disease Control and Prevention (CDC) recommend a layered approach to reduce exposures to SARS-CoV-2, the virus that causes COVID-19. This approach uses multiple mitigation strategies, including improvements to building ventilation, to reduce the spread of disease and lower the risk of exposure.²⁵

Equity Impact: The *Small Business Public Health Capital Improvements* project requires that at least 20% of funding is dedicated to minority business enterprises (MBEs), including women-owned businesses. Rhode Island Commerce is working with intermediaries to leverage local relationships and ensure effective outreach to underserved businesses, as well as relying on experience with other grant programs to ensure effective subscription levels. As of June 30, 2023, 401 businesses were served in the *Take It Outside Program*, of which 201 are MBEs, including women-owned businesses, and 53 businesses were served in the *Small Business Ventilation Services* program, of which 34 are MBEs, including women-owned businesses.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
U.S. Treasury Required Number of small businesses served		0	452

²⁵ <https://www.cdc.gov/coronavirus/2019-ncov/community/ventilation.html>

Key Performance Indicator	Description	Baseline	Performance-to-date
<i>Take It Outside</i> : Number of business reporting expanded outdoor capacity supports	Reported by geography and industry	0	401
<i>Take It Outside</i> : Number of businesses reporting expanded business operations	Reported by survey data	0	401
<i>Take It Outside</i> : Number of MBEs, included women-owned businesses, served	Number of businesses that report expanded business operations, as reported by survey data	0	201
<i>Ventilation</i> : Number of small businesses served	Reported by geography and industry	0	53
<i>Ventilation</i> : Number of small businesses that received ventilation technical assistance	Reported by geography and industry	0	2
<i>Ventilation</i> : Number of small businesses with increased indoor air flow (air quantity)	Reported by intermediaries and in alignment with approved projects/purchases list. Reported by geography and industry	0	45
<i>Ventilation</i> : Number of small businesses with increased indoor air quality	Reported by intermediaries and in alignment with approved projects/purchases list. Reported by geography and industry	0	51
<i>Ventilation</i> : Number of MBEs, including women-owned businesses, served		0	34

Hospitality, Tourism, and Events Direct Grants

Project Identification Number: 10009

Funding Amount: \$8,424,908

Project Expenditure Category: 2.11 Negative Economic Impacts: Aid to Tourism, Travel, or Hospitality

Pandemic-related Problem Statement: While there has been a range of federal and state supports for the hospitality, tourism, and events industries (e.g., Paycheck Protection Program, Shuttered Venue Operators Grant Program, Rhode Island Hotel, Arts & Tourism Grant Program), the leisure and hospitality sector continues to face significant negative impacts. Strategic investments in the hospitality, tourism, and events industries will support a strong, equitable, and broad-based economic recovery. Eligible recipients

of grants through this program are restaurants, events-related businesses, valet operators, hotels, travel/tour-related businesses, and arts/culture organizations.

Project Overview: The project provided direct grants to businesses in the hard-hit hospitality, tourism, and events industries to compensate for lost revenue and other negative financial impacts. The arts/culture organizations are a key component of Rhode Island's tourism industry and fall under the supersector North American Industry Classification System code for leisure and hospitality. Eligible businesses fall under one of three categories:

- *Restaurants, Events, and Valet Operators:* Businesses had to demonstrate a revenue loss of at least 25% to be eligible for a \$12,500 grant.²⁶ National/regional chains were ineligible.
- *Hotels, Travel Agents, and Tour Operators:* Businesses had to demonstrate a revenue loss of at least 35%. Grant amounts were pro-rated based on actual 2021 net need. Recipients were awarded a percentage of their demonstrated net need or \$250,000, whichever was less. Entities that received over \$100,000 had to remain operational as of September 1, 2022. Entities with publicly traded stock or that are majority owned by publicly traded companies were ineligible.
- *Arts and Culture Organizations:* Businesses had to demonstrate a revenue loss of at least 35%. Grant amounts were pro-rated based on 2021 net need. Recipients were awarded a percentage of their demonstrated net need or \$250,000, whichever was less. To be eligible, applicants had to own their facility, or spend at least 20% of their operating budget on rent or performance space or have been a recipient of a U.S. Small Business Administration Shuttered Venue Operators Grant. Entities that received over \$100,000 had to remain operational as of September 1, 2022. National/regional chains were ineligible.

The breakdown in grant recipients by these three categories is as follows: 113 restaurants, events, and valet operators; 26 hotels, travel agents, and tour operators; and 24 arts and culture organizations.

Timeline: Applications were received in March and April 2022. Between May and November 2022, 163 grants were awarded for a total of approximately \$7.5 million. Additional grants were awarded to 32 recipients in the hotels, travel agents, and tour operators and the arts and culture organizations subprograms in March 2023. These recipients initially received less than \$250,000 (the maximum for those subprograms) and had remaining, unmet, net financial need. Additional awards were made to bring all recipients to the same percentage of net financial need met of 86.5% or \$250,000 (whichever was less). These additional awards totaling approximately \$0.4 million addressed underspend due to updated data from the financial review process of applications.

Mechanisms and Partners: The Rhode Island Executive Office of Commerce (EOC) executed a subaward agreement with the Rhode Island Commerce Corporation (Rhode Island Commerce) to deliver the project on behalf of EOC.

Use of Evidence: While this intervention has not been identified as evidence based, the analysis of the key performance indicators will evaluate its effectiveness.

Equity Impact: There are clear economic and equity implications for investing in Rhode Island's tourism, hospitality, and events industries. According to U.S. Bureau of Labor Statistics data, women and Hispanic/Latino workers are disproportionately represented in the leisure and hospitality industry.²⁷ As such, investments in this sector create business and employment opportunities for these historically

²⁶ For entities that received a grant under the *Small Business Direct Grants* project, the maximum *Hospitality, Tourism, and Event Direct Grant* that can be received is \$12,500 less the amount of the *Small Business Direct Grant* received.

²⁷ [U.S. Bureau of Labor Statistics – Labor Force Statistics from the Current Population Survey 2021](#)

underserved, marginalized, and adversely affected individuals. Leisure and hospitality workers also typically work in lower-wage jobs and have been disproportionately impacted by the pandemic, so there are clear equity objectives in supporting these workers. Of the direct grant recipients:

- Restaurants, events, and valet operators: 44.2% minority business enterprises (MBEs), including women-owned businesses.
- Hotels, travel agents, tour operators: 42.3% MBEs.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Dollars disbursed by sector		0	\$7,881,122.18
Number of businesses assisted	Restaurants, valet operators, and events-related organizations	0	113
Number of businesses assisted	Hotels and travel agents/tour operators	0	26
Number of businesses assisted	Arts and culture organizations	0	24
Percentage of businesses operational within six months of receiving awards		0	82.82%
Number of employees	Total number of leisure and hospitality supersector employees (seasonally adjusted) within six months of receiving awards	53,700	57,100
Number of businesses receiving supplemental grants		0	32

Hospitality, Tourism, and Events Placemaking

Project Identification Number: 10014

Funding Amount: \$3,074,401

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: This project supports clean and safe placemaking, attraction development, and event programming, such as outdoor performances, outdoor food festivals, and other special events that attract visitors and residents to impacted businesses. This effort helps ensure that these types of events, which have a positive economic ripple effect for local restaurants, hotels, retailers, and other Main Street

businesses, continue and adapt to operating during the pandemic. This initiative also allows for new events to launch, supporting general consumer confidence and the economic recovery. The Rhode Island Commerce Corporation (Rhode Island Commerce) aims to award a small number of grants of up to \$250,000 for large-scale projects, such as renovations of and programming for outdoor performance venues.

Timeline: Applications to a request for proposal (RFP) for intermediaries to support the grant program were opened in April 2022. The deadline for submission was June 30, 2023, with five municipalities granted extensions. Funds are anticipated to be spent by December 2023, and program closeout is anticipated to continue into January 2024.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Number and list of hospitality, tourism, and events businesses impacted by events/activities	Based on grantee estimates (reported via survey data)	0	75
Number of customers/individuals participating/taking advantage of the event/activity	Based on grantee estimates (reported via survey data)	0	30,642
Number of events/activities held	Reported via survey data	0	31

Hospitality, Tourism, and Events Marketing

Project Identification Number: 10015

Funding Amount: \$2,000,000

Project Expenditure Category: 2.11 Negative Economic Impacts: Aid to Tourism, Travel, or Hospitality

Pandemic-related Problem Statement: Rhode Island hosted 21.6 million visitors in 2020, a 17.5% decline from pre-pandemic levels.²⁸ While the share of day visitors and leisure visitors increased, a drop in business travel negatively impacted mid-week hotel occupancy rates particularly in Providence, Warwick, and the Blackstone Valley. International travel was severely restricted through 2021, resulting in significant declines in visitation and spending by international travelers. Direct marketing in gateway cities – those with direct flights to Rhode Island – will strengthen existing flights and overall recovery. The pandemic’s impact to the Rhode Island Airport Corporation (RIAC) includes:

- Passenger traffic declined by 96.9% year over year in April 2020, the lowest point.
- Of the nine airlines that serviced Rhode Island T.F Green International Airport before the pandemic, four stopped flying there in 2020 (Delta, Frontier, JetBlue, and United) and only returned months later.
- Passenger traffic in calendar year 2020 was down 67% from 2019.

²⁸ [Economic Impact of Visitors in Rhode Island 2020](#)

- Passenger traffic in calendar year 2021 was down 42% from 2019.
- The earliest that passenger traffic is expected to reach pre-pandemic levels is 2024.²⁹

The pandemic underscored tourism's importance to Rhode Island's economy and its potential moving forward. Marketing is a key tool to aid the recovery. In Fiscal Year 2021, Rhode Island's lodging sector sustained a 26% loss in sales compared to Fiscal Year 2019. Lodging sales make up approximately 14% of visitor spending in Rhode Island, according to Rhode Island's tourism impact study prepared by Tourism Economics.³⁰ According to Tourism Economics, direct visitor industry employment (related to spending by visitors to Rhode Island who spent the night or traveled at least 50 miles for a day trip) registered 28,412 in 2020, a 27.8% decline from 2019.

Project Overview: The project targeted advertising in key gateway cities, supported direct advertising for the state's tourism regions, and sponsored regional and event partnerships. The goal was to boost tourism and business travel to pre-pandemic levels. Promotion included digital marketing, billboards, radio, and an international marketing plan. Such programming aimed to increase mid-week hotel occupancy rates and visitation for inland regions. Funding is allocated as follows:

- *Advertising*, \$1,000,000: RIAC advertising included digital marketing, billboards, radio, and an international marketing plan with Brand USA.
- *Direct Grants*, \$750,000: Direct grants were awarded to the state's tourism districts to engage in marketing campaigns.
- *Targeted Marketing to Regional Drive Markets*, \$250,000: Funding was used for regional and event partnerships, increased public relations efforts, and other media.

Timeline: In November 2022, Rhode Island Commerce launched a targeted, integrated marketing campaign directed at attracting visitors from the competitive four-hour drive market. In January 2023, regional tourism organizations received subawards to be used on advertising media in support of regional tourism drive market initiatives. In addition to drive market initiatives, Rhode Island Commerce deployed air service destination marketing programs on behalf of RIAC, targeting select gateway cities. The campaigns began in December 2022, with pre-purchased media through June 2023.

Mechanisms and Partners: The Rhode Island Executive Office of Commerce (EOC) executed a subaward agreement with Rhode Island Commerce to deliver the project on behalf of EOC.

Use of Evidence: While this intervention has not been identified as evidence based, the analysis of the key performance indicators will evaluate its effectiveness.

Equity Impact: Rhode Island Commerce integrates inclusive marketing messaging across all social platforms, advertising placement, content development, and public relations efforts. Rhode Island Commerce uses internal business-to-business channels to encourage Rhode Island businesses and regional tourism partners to adopt inclusive marketing practices. In addition, Rhode Island Commerce is sharing strategy, imagery, and messaging. This is being tracked through a Tourism Economics dashboard that provides spend, geolocation, and census data.

²⁹ <https://flyri.com/riac/passenger-numbers/>

³⁰ [Economic Impact of Visitors in Rhode Island 2020](#)

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Rental home occupancy	Occupancy data is provided by AirDNA monthly	Seasonality Q1: 76% Q2: 40%	57.1%
Meals tax	Revenue collected from 1% meals tax	Seasonality Q1: \$9,526,287 Q2: \$7,383,968	\$31,906,428
Airplane load factors	Percentage of total seats filled on flights from gateway cities to Rhode Island T.F. Green International Airport	45%	85%
Consumer visitation daytime vs. overnight	Ratio of visitors to Rhode Island that do not stay overnight to visitors that stay overnight	2.571	2.91
Hotel occupancy	Daily occupancy rates statewide broken down by regional tourism district	Seasonality Q1: 72% Q2: 64%	61.5%
Group sales	Meetings and conventions lead generation metrics	90	817

Aid to the Convention Center

Project Identification Number: 10018

Funding Amount: \$10,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: The transfer of approximately \$10 million in SFRF provided the Rhode Island Convention Center Authority (RICCA) with sufficient working capital to tailor its operations to a post-pandemic environment by reimagining the use of its spaces to ensure the comfort and confidence of patrons and attract new events to the facility.

Timeline: Two transfers of approximately \$5 million each were made to RICCA. The first transfer was made in August 2022, and the second transfer was made in December 2022.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Transfer of operating funds to RICCA	0	\$9,997,000
Operating margin in Fiscal Year 2023	Projected Fiscal Year 2023 operating margin without State Fiscal Recovery Funds: \$(472,536)	\$13,775,585

Minority Business Accelerator

Project Identification Number: 10041

Funding Amount: \$5,200,000

Project Expenditure Category: 2.32 Negative Economic Impacts: Business Incubators and Start-up or Expansion Assistance

Pandemic-related Problem Statement: Reports make it clear that minority- and women-owned businesses were disproportionately impacted by the pandemic. The Federal Reserve Bank of Cleveland concluded in an October 2020 report that these businesses were “facing higher rates of closures and sharper declines in cash balances as compared to nonminority-owned small businesses.”³¹ A May 2020 report from McKinsey stated that “minority-owned small businesses in the United States are also more likely to have conducted layoffs or furloughs or to have shut down their businesses: 55 percent compared with 48 percent for all respondents.”³²

In Rhode Island, minority-owned small businesses make up a smaller percentage of firms than population statistics would indicate. While Black or African Americans make up 8.8% of the state’s population,³³ Black- or African American-owned businesses comprise only 3.7% of firms in the state.³⁴ Similarly, while Hispanic residents make up 17.1% of the state’s population, Hispanic-owned businesses comprise only 9.2% of firms in the state.

Project Overview: The project is funding the following initiatives:

- \$3 million to support a network of intermediary organizations that serve minority-owned businesses.

³¹ [An Uphill Battle: COVID-19’s Outsized Toll on Minority-Owned Firms](#)

³² [COVID-19’s Effect on Minority-owned Small Businesses in the United States](#)

³³ [U.S. Census Bureau](#)

³⁴ [Rhode Island BIPOC Small Business Ecosystem Assessment](#)

- \$1.2 million to increase access to capital, with grant awards of up to \$20,000, and \$300,000 in technical assistance to minority-owned businesses that are not eligible for the *Small Business Technical Assistance* project.
- \$498,000 to hire a full-time staff member and onboard contract support to operate the project.
- \$300,000 to fund technical assistance for applicants to the *Small Business Direct Grant* program that would otherwise be ineligible for the *Small Business Technical Assistance* program.
- \$200,000 for trainings for intermediary organizations.

Together, these initiatives are designed to increase the percentage of minority business enterprises (MBEs), including women-owned businesses, in Rhode Island and support the continued success of existing businesses.

Timeline: The application for the request for proposals for technical assistance providers closed in April 2023. Work was anticipated to begin in July 2023.

Mechanisms and Partners: The Rhode Island Executive Office of Commerce (EOC) executed a subaward agreement with the Rhode Island Commerce Corporation (Rhode Island Commerce) to deliver the project on behalf of EOC.

Use of Evidence: The project draws on the success of the Cincinnati Minority Business Accelerator, which has a portfolio of minority-owned businesses with annual revenues of at least \$1 million and potential for accelerated growth in two to five years. As of 2020, the program reported 67 companies being supported, \$150 million in new business secured, \$1.2 billion in regional minority business spending, over \$100 million in new credit commitments awarded in 2019, and over \$2 million secured in new grant support since 2018.³⁵

Equity Impact: The objective of this project is to address inequities in business ownership in Rhode Island. There is ample data to support the finding that minority-owned businesses and communities of color are historically underserved, marginalized, and adversely affected by economic downturns.³⁶ The Rhode Island Department of Administration, Division of Equity, Diversity, and Inclusion’s (DEDI) disparity study underscores the difficulties minority-owned businesses have accessing state procurement opportunities and the necessary progress toward a more inclusive and equitable landscape for business ownership.³⁷

The success of this project relies on ongoing and extensive outreach to historically underserved, marginalized, and adversely affected individuals and communities. Outreach and strategic partnerships with intermediaries are playing a central role. Rhode Island Commerce is relying on business support organizations and marketing to raise awareness of the services, including efforts to reach individuals who may not speak English fluently, have less reliable internet access, or struggle with literacy.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Number of MBEs, including women-owned businesses, served	Examples include attending an entrepreneurship training session, using a co-working space, receiving a grant,	0	0

³⁵ [Making Cincinnati the National Epicenter for Minority Business Development](#)

³⁶ [Building Supportive Ecosystems for Black-owned US Businesses](#)

³⁷ [Disparity Study Final Report](#)

Key Performance Indicator	Description	Baseline	Performance-to-date
	attending a procurement seminar, etc.)		
Number of programs, trainings, or initiatives started by intermediaries		0	0
Number of businesses helped by the program that submitted a complete application to DEDI directory		125	0
Percentage of businesses that received financial assistance that are still in operation in Rhode Island following receipt of the assistance		0	Not yet applicable

Minority Business Accelerator: RI Black Business Association

Project Identification Number: 10051

Funding Amount: \$500,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: The Rhode Island Black Business Association (RIBBA) is a nonprofit dedicated to advancing opportunities for Black-owned and minority businesses. RIBBA provides an array of business development services including technical assistance, access to contracts, loan program, coaching and mentorship, workshops, and leadership opportunities.

The project is supporting RIBBA to develop the Minority Business Hub, a co-working space for RIBBA’s clients, members, and partners. Creating this space will provide access to workspace and Wi-Fi, private offices, conference rooms, and meeting spaces. Additionally, the project is increasing the capacity of RIBBA’s Small Business Program – its outreach program to help small businesses scale.

Timeline: Work began in April 2023.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Assist 20 small businesses with their MBE/WBE certifications annually	0	19

Key Performance Indicator	Baseline	Performance-to-date
Number of small businesses that are bankable by partnering with local banks and credit unions	0	8

Minority Business Accelerator: Roger Williams University Start-up Clinic

Project Identification Number: 10048

Funding Amount: \$300,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: The Roger Williams University School of Law is working with the Rhode Island Commerce Corporation (Rhode Island Commerce) to enhance the growth of minority business enterprises (MBEs). Client services include prospective client interviews, client onboarding meetings, business registration, internal governance and operating document review and preparation, contract law guidance, regulatory law guidance, employment law guidance, trade secret and trademark law guidance, trademark registrations, and translation services.

Timeline: It is anticipated that the work will be completed by September 2023.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of discrete legal services provided to MBEs, including women-owned businesses	0	50
Number of MBEs, including women-owned businesses, served	0	4

Destination Marketing

Project Identification Number: 10056

Funding Amount: \$3,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: Air travel to Rhode Island T.F. Green International Airport was heavily affected by the pandemic, with the airplane load factor decreasing by as much 77%.³⁸ While air travel is recovering, business travel remains sluggish.

³⁸ Data provided by the Rhode Island Airport Corporation

Shoulder and off-season travel are traditionally driven by business travel, and a marketing investment targeted at the leisure market is necessary to offset the effect of current travel trends. The Rhode Island Commerce Corporation (Rhode Island Commerce), in cooperation with the Rhode Island Airport Corporation (RIAC) and partner airlines, will target key gateway cities, including Los Angeles, Chicago, Washington, D.C., and Detroit, with a campaign focused on driving leisure travel to Rhode Island. The project will include the following components:

- Integrated campaigns that drive interest in Rhode Island, targeted at cities that have existing air service to Rhode Island T.F. Green International Airport.
- New England sports media buys that will encourage fan travel to professional sporting events.
- In-market experiential events and installations in high-visibility location that create top-of-mind destination impressions.
- A lodging value campaign during January when lodging occupancy is at its lowest statewide.

Timeline: The components of the project will be implemented from January 2023 through December 2024.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Airplane load factors	Increase factor to match pre-pandemic levels	80.8%	85%
Matching funds from hotel tax		0	\$802,037.51

Public Health

Project	U.S. Treasury Expenditure Category	Planned Expenditures	Expenditures to Date
Health Care Facilities: Nonprofit Hospital Assistance	Negative Economic Impacts: Assistance to Impacted Nonprofit Organizations	\$40,484,886.93	\$40,484,886.93
Health Care Facilities: For-Profit Hospital Assistance	Negative Economic Impacts: Aid to Other Impacted Industries	\$4,515,113.07	\$4,515,113.05
Health Care Facilities: Nursing Home Assistance	Negative Economic Impacts: Aid to Other Impacted Industries	\$30,000,000	\$29,999,999.88
Health Care Facilities: Health Center Assistance	Negative Economic Impacts: Assistance to Impacted Nonprofit Organizations	\$2,500,000	\$2,500,000
Public Health Response Warehouse Support	Revenue Replacement: Provision of Government Services	\$3,400,000	\$380,891.11
Auto-Enrollment Program	Negative Economic Impacts: Household Assistance: Health Insurance	\$2,614,068	\$232,432.92
Public Health Clinics: Open Door	Revenue Replacement: Provision of Government Services	\$2,000,000	\$0
Public Health Clinics: Rhode Island Free Clinic	Negative Economic Impacts: Assistance to Impacted Nonprofit Organizations	\$2,000,000	\$0
Total		\$87,514,068	\$78,113,323.89

Health Care Facilities: Nonprofit Hospital Assistance

Project Identification Number: 10030

Funding Amount: \$40,484,886.93

Project Expenditure Category: 2.34 Negative Economic Impacts: Assistance to Impacted Nonprofit Organizations

Pandemic-related Problem Statement: The waves of COVID-19 variants stressed the already-limited financial and staffing resources of the state’s 10 nonprofit hospitals, which incurred operating losses of \$13 million in federal Fiscal Year 2019. Through June 30, 2022, the nonprofit hospitals reported operating losses of \$107 million for federal Fiscal Year 2022. The Hospital Association of Rhode Island (HARI) estimated that they will incur additional losses totaling \$31.6 million by September 30, 2022. The increased losses reflect pandemic-induced temporary contract staffing, the implementation of COVID-19 procedures, purchase of personal protective equipment, loss of elective surgeries, and other pandemic-related activities.

Project Overview: To alleviate the financial hardship of the pandemic, the Rhode Island Department of Administration (DOA) distributed grants to each nonprofit hospital in accordance with a formula provided by the Rhode Island General Assembly. Each nonprofit hospital received a base \$1 million payment in addition to a pro rata share of the remaining appropriation based on the hospitals’ operating costs from their 2021 Medicare cost reports relative to the aggregate operating costs of all hospitals – both nonprofit and for profit – from all 2021 Medicare cost reports.

Timeline: Grants were distributed to the 10 nonprofit hospitals in September 2022.

Mechanisms and Partners: HARI is collecting information on the nonprofit hospitals for U.S. Treasury reports. HARI reports monthly to the Rhode Island Pandemic Recovery Office with the operating margins of each nonprofit hospital.

Use of Evidence: While this intervention has not been identified as evidence based, the analysis of the key performance indicators will evaluate its effectiveness.

Equity Impact: Hospitals are the provider of last resort and deliver care and services to historically underserved, marginalized, or adversely impacted populations. These funds are supporting hospitals’ capacity to continue to treat and care for all Rhode Islanders, including the most vulnerable individuals and families.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
U.S. Treasury Required Number of nonprofits served	0	10
Total grant dollars distributed	0	\$40,472,743.08
Operating margin	January - March 2022: \$(70,953,000) April - June 2022: \$(31,640,776)	\$(13,393,866)

Health Care Facilities: For-Profit Hospital Assistance

Project Identification Number: 10042

Funding Amount: \$4,515,113.07

Project Expenditure Category: 2.36 Negative Economic Impacts: Aid to Other Impacted Industries

Pandemic-related Problem Statement: Since March 2021, Roger Williams Medical Center (RWMC) and Our Lady of Fatima Hospital (OLF) encumbered \$3,006,884 in non-contracted labor-related COVID-19 expenses. This amount includes additional staff, personal protective equipment, test kits, cleaning supplies, etc. Unlike nonprofit hospitals, for-profit hospitals were not eligible for Federal Emergency Management Agency reimbursement for their COVID-19-related expenses.³⁹

Additionally, RWMC and OLF have experienced higher contract labor costs from Federal Fiscal Year (FFY) 2019 to FFY 2022. In FFY 2019, contract labor costs were \$698,642, and in FFY 2022 they were \$9,461,545. The Assistant Secretary for Planning and Evaluation at the U.S. Department of Health and Human Services outlined the fiscal challenges for hospitals utilizing travel nurses in a May 2022 report. “Hospitals responding to the 2021 [Office of the Inspector General] OIG survey reported facing increased labor market competition from staffing agencies, particularly for nurses and that they were unable to compete with the salaries being provided through staffing agencies,” the report said.⁴⁰

Project Overview: To alleviate the financial hardship of the pandemic, the Rhode Island Department of Administration (DOA) distributed grants to both for-profit hospitals in accordance with a formula provided by the Rhode Island General Assembly. Each for-profit hospital received a base \$1 million payment in addition to a pro rata share of the remaining appropriation based on the hospitals’ operating costs from their 2021 Medicare cost reports relative to the aggregate operating costs of all hospitals – both nonprofit and for profit – from all 2021 Medicare cost reports.

Timeline: Grants were distributed to the two for-profit hospitals in November 2022.

Mechanisms and Partners: The Hospital Association of Rhode Island (HARI) is collecting information on the for-profit hospitals for U.S. Treasury reports. HARI reports monthly to the Rhode Island Pandemic Recovery Office with the operating margins of both for-profit hospitals.

Use of Evidence: While this intervention has not been identified as evidence based, the analysis of the key performance indicators will evaluate its effectiveness.

Equity Impact: Hospitals are the provider of last resort and deliver care and services to historically underserved, marginalized, or adversely impacted populations. These funds are supporting hospitals’ capacity to continue to treat and care for all Rhode Islanders, including the most vulnerable individuals and families.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of for-profit hospitals served	0	2

³⁹ [Coronavirus \(COVID-19\) Pandemic: Private Nonprofit Organizations](#)

⁴⁰ [Impact of the COVID-19 Pandemic on the Hospital and Outpatient Clinician Workforce](#)

Key Performance Indicator	Baseline	Performance-to-date
Total dollars distributed	0	\$4,513,756.90
Operating margin	Federal Fiscal Year 2019: \$19,382,376 Fiscal Year 2020: \$32,828,343 Fiscal Year 2021: \$(6,137,217)	\$(1,817,208)

Health Care Facilities: Nursing Home Assistance

Project Identification Number: 10046

Funding Amount: \$30,000,000

Project Expenditure Category: 2.36 Negative Economic Impacts: Aid to Other Impacted Industries

Pandemic-related Problem Statement: According to the Centers for Medicare and Medicaid Services (CMS), from January 3, 2021, through December 26, 2021, Rhode Island’s 79 nursing homes reported a shortage of nurses 883 times on a weekly basis, or 21.5% of the time.⁴¹ During the same period, the nursing homes reported a shortage of aides 1,011 times, or 24.6% of the time. The nursing homes reported a staffing shortage of both nurses and aides 841 times, or 20.5% of the time.

These data underscore the crisis in direct care staffing that Rhode Island’s nursing homes experienced as result of the public health emergency. Since the CMS data was collected, four of the 79 nursing homes closed. Comparing December 2019 through February 2020 to September through November 2021, employment in Rhode Island’s nursing and residential care facilities sector declined by 18.4%.⁴²

Project Overview: The Rhode Island General Assembly appropriated \$30 million to be distributed to Rhode Island’s 75 nursing homes. The per-facility distribution was based on the number of Medicaid bed days a facility had out of the total number of Medicaid bed days for all nursing facilities as indicated in each nursing home’s 2020 cost report. Nursing homes that filed a 2020 cost report but were no longer in business in 2022 and nursing homes that do not accept Medicaid were excluded from the distribution. Eligible nursing homes were required to dedicate at least 80% of the monies received to direct care workers.

Timeline: Grants were distributed to the 75 nursing homes from December 2022 through April 2023.

Mechanisms and Partners: The Rhode Island Pandemic Recovery Office worked with the 75 nursing homes to have them sign grant agreements and collect key performance indicator data.

Use of Evidence: While this intervention has not been identified as evidence based, the analysis of the key performance indicators will evaluate its effectiveness.

Equity Impact: The project served nursing homes based on the number of Medicaid bed days each facility had in 2020. Nursing homes with more Medicaid bed days tend to have a patient and resident census with

⁴¹ [COVID-19 Nursing Home Data](#)

⁴² [U.S. Bureau of Labor Statistics](#)

lower-income and racial minority individuals – two groups that generally received lower levels of medical care than the non-Medicaid population.⁴³

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of nursing homes receiving grant payments	0	75
Percentage of grant payments dedicated to direct care workers	0	93.3%
Number of nursing homes still in operation six months after receipt of grant payment	0	Not yet applicable

Health Care Facilities: Health Center Assistance

Project Identification Number: 10047

Funding Amount: \$2,500,000

Project Expenditure Category: 2.34 Negative Economic Impacts: Assistance to Impacted Nonprofit Organizations

Pandemic-related Problem Statement: Community health centers provide care for over 180,000 Rhode Islanders, most of whom live below 200% of the federal poverty level (FPL). While health center administrators, physicians, nurses, social workers, community health workers, and front-desk personnel persevered through this pandemic, a significant number of health center employees are leaving their jobs. Across Rhode Island community health centers, the monthly voluntary turnover rate increased from 14% in January 2020 to 16% in January 2022. The average employee tenure dropped 5.9% from January 2020 to June 2022.⁴⁴ Several reasons contribute to these departures, including burnout and higher compensation offered by other health care providers.

According to a June 2022 report by the Kaiser Family Foundation, “Staff recruitment and retention remain common concerns at health centers nationally.”⁴⁵ Attrition and the struggle to recruit jeopardize community health centers’ ability to continue to effectively respond to their patients and communities.

Project Overview: The project provided grants to the eight federally qualified health centers in Rhode Island. The grants were intended to restore and support community health center employment through worker retention incentives that are less than 25% of the rate of base pay for an individual. The bonuses are not part of the base salary and do not result in long-term increases.

Timeline: Grants were distributed to the eight community health centers in December 2022.

Mechanisms and Partners: The Rhode Island Department of Administration provided a direct award to the Rhode Island Health Center Association (RIHCA) to serve as a subrecipient for this project. As the

⁴³ [Nursing Homes Incurring Significant Costs and Financial Hardship in Response to COVID-19](#)

⁴⁴ Data provided by the eight federally qualified health centers in response to a survey

⁴⁵ [How Community Health Centers Are Serving Low-Income Communities During the COVID-19 Pandemic Amid New and Continuing Challenges](#)

subrecipient, RIHCA distributed grants to the eight federally qualified health centers intended to restore and support community health center employment through worker retention incentives. The grant amounts were based on the number of patients served at the federally qualified health centers using 2021 Uniform Data System data from the federal Health Resources and Services Administration.⁴⁶

Use of Evidence: While this intervention has not been identified as evidence based, the analysis of the key performance indicators will evaluate its effectiveness.

Equity Impact: Community health centers serve all members in a community regardless of insurance status or ability to pay. The promotion of economic and racial equity is in their core mission and reflected in the enabling services they provide, including interpreter services and transportation, as well as their sliding fee scales. In 2021, 9.6% of community health center patients were uninsured; 22.2% were best served in a language other than English; and of patients reporting race, 28% identified as a race other than white.⁴⁷

Community health centers’ designation as “federally qualified health centers” require that they are in health professional shortage areas (HSPA), which have a shortage of primary, dental, or mental health care providers, as defined by the federal Health Resources and Services Administration.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
U.S. Treasury Required Number of nonprofits served	0	8
Dollars distributed in HPSAs	0	\$2,499,250
Employee retention rate	76.19%	Not yet applicable
Average employee tenure	5.2 years	Not yet applicable

Public Health Response Warehouse Support

Project Identification Number: 10023

Funding Amount: \$3,400,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: The funds are paying for costs for the proper storage of personal protective equipment, other necessary COVID-19 response-related supplies, and other supplies at two State-operated warehouses. Costs include monthly lease payments, contracted labor, supplies, equipment, and utilities. This project was eligible for federal Stafford Act funding, with the State Fiscal Recovery Fund (SFRF)

⁴⁶ [Health Center Program Uniform Data System \(UDS\) Data Overview \(hrsa.gov\)](#)

⁴⁷ [2021 Rhode Island Health Center Program Uniform Data System Data](#)

appropriation serving as the State’s 10% match, through May 11, 2023 (the end of the federal public health emergency), at which point the SFRF appropriation started covering 100% of the costs.

Timeline: The project is anticipated to pay for costs through December 2024.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Inventory	Monthly check of operational personal protective equipment	3 per quarter	3 per quarter
Percentage of personal protective equipment with a shelf life beyond 120 days		60%	60%
Inventory accuracy	Determined by monthly inventory compared to information in the inventory management system	90%	100%

Auto-Enrollment Program

Project Identification Number: 10044

Funding Amount: \$2,614,068

Project Expenditure Category: 2.6 Negative Economic Impacts: Household Assistance: Health Insurance

Pandemic-related Problem Statement: Throughout the public health emergency (PHE), many Rhode Islanders became eligible for Medicaid due to changing circumstances related to employment and income. In the same period, the federal government prohibited states from terminating Medicaid enrollment except in limited circumstances. As a result of this federal requirement for continuous coverage, Medicaid enrollment grew by over 76,000 enrollees in Rhode Island since the start of the pandemic – bringing the total in April 2023 to 371,000.⁴⁸ In December 2022, Congressional action separated the end of the continuous coverage requirement from the end of the PHE. Annual recertification of Medicaid eligibility was required to resume in all states no later than April 1, 2023. When annual recertification of Medicaid eligibility resumed, members who are no longer eligible will have their Medicaid coverage terminated. The State’s goal with this project is to transition as many individuals no longer eligible for Medicaid as possible into one of the many qualified health plans (QHP) available through the State’s health insurance exchange operated by HealthSource RI (HSRI).

Before the PHE, Medicaid enrollees with fluctuating income transitioned back and forth between Medicaid and QHP coverage, potentially resulting in coverage gaps, as well as changes in their health plans and provider networks. According to HSRI’s enrollment data, in 2019, 6,203 individuals moved from Medicaid to a QHP, and 4,404 individuals moved from a QHP to Medicaid. Historically, many individuals who leave Medicaid do not enroll in a QHP. For example, for one type of Medicaid termination suspended during the pandemic, over 75% did not select a QHP, and only 12% were enrolled in a QHP at the end of that year. Without health insurance coverage, many of these individuals may be

⁴⁸ RI EOHHS, [RTNO Data Dashboard | Stay Covered Rhode Island \(ri.gov\)](#).

required to pay an individual mandate tax penalty when filing their Rhode Island personal income tax return.

Project Overview: HSRI has created a pathway for individuals to retain health and dental insurance coverage once they are transitioned from Medicaid during the recertification process. The program provides two months of premium payments for two groups no longer eligible for Medicaid:

- Eligible individuals and families with household income at or below 200% of the federal poverty level (FPL) are auto-enrolled into a QHP offered through HSRI. The project will apply payment for two months of premium. This payment effectuates coverage on behalf of the customer. All auto-enrollees are eligible for a special enrollment period (SEP) of 60 days from the date their Medicaid coverage ends and can change plans at that time. In this instance, the project's premium payments will be applied to the customer's chosen plan. If auto-enrollees self-select a dental plan, the project also pays the premium for the first two months of dental coverage.
- For individuals and families with household income up to 250% FPL who actively select a medical and/or dental plan through HSRI, the project applies two months of premium payments for the medical and/or dental plan chosen by the applicant.

Timeline: The federal continuous coverage requirement ended April 1, 2023. The Medicaid redetermination process began on that date in Rhode Island, and the earliest auto-enrollments will have June 2023 coverage start dates. HSRI is continuing the auto-enrollment program for 12 months, and the last group of auto-enrollees will generally have a coverage state date in May 2024; however, payments will continue for eligible individuals and households for a few months afterward if they enroll manually during an SEP.

Mechanisms and Partners: Technological changes to HSRI's enrollment system were necessary to make auto-enrollment possible and create a pathway to cancel coverage for individuals who are auto-enrolled and want to cancel coverage. The program specifically covers costs for program extensions, such as modifying payment eligibility criteria to include customers who were not auto-enrolled, including dental premiums, and modifying systems to pay for two months of coverage. Several legal notices had to be updated to clearly communicate the program and the options available to the consumer.

Use of Evidence: The University of Wisconsin's Population Health Institute County Health Rankings and Roadmaps Program found that outreach and assistance programs increase health insurance coverage and awareness of health insurance availability. Additionally, and more specifically, auto-enrollment and auto-renewal have been shown to increase participation in areas, such as employer-sponsored health insurance. For example, the study showed a 4.5% increase in participation for employers that defaulted employees into a health plan versus employers that did not.⁴⁹

Equity Impact: According to the Rhode Island Health Insurance Survey, between 2018 and 2020, there was a 1-percentage point increase (1,038 individuals) in the uninsured rate among Black/African Americans and a 7-percentage point increase (2,189 individuals) in the uninsured rate among American Indian/Alaska Natives.⁵⁰ Moreover, in 2020, the uninsured rate among Rhode Islanders who are foreign born was 12.7%, compared to only 2.6% uninsured among those born in the United States. Finally, a significant portion of uninsured (16,268 or 38.5% uninsured) have incomes below 139% FPL. Similarly, 135,991 Medicaid recipients (54% of total Medicaid population) have incomes below 139% FPL.

⁴⁹ [The Power of Suggestion: Automatic Enrollment and Employee Health Insurance Coverage Take-Up Rates](#)

⁵⁰ [Surveys and Reports - HealthSource RI](#)

Given the disparities in race and income among the uninsured and Medicaid populations, coupled with the ability to offer vulnerable Rhode Islanders low-cost QHP coverage, the State’s goals of producing meaningful and equitable near-universal coverage are within reach.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
U.S. Treasury Required Number of households served	Households with a payment applied, both auto-enrolled and non-auto-enrolled	(~1.3 individuals per household)	549
Number of individuals auto-enrolled in a QHP	Number of individuals enrolled in a QHP after being terminated from Medicaid	0	418
Number of individuals served through premium assistance	Individuals with a payment applied, both auto-enrolled and non-auto-enrolled	0	638
Cumulative retention of program participants (QHP/Medicaid)	Customers who remain covered after the two-month subsidized period ends – either by paying for their QHP coverage or by re-qualifying for Medicaid coverage.	0	93%

Public Health Clinics: Open Door

Project Identification Number: 10049

Funding Amount: \$2,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: Since opening in March 2020, Open Door Health has outgrown its existing space and must increase physical capacity to meet patient demand and expand the suite of services offered. The Rhode Island Department of Health (RIDOH) provided a grant to Open Door Health to acquire land to expand its physical capacity and therefore the number of people they serve.

Timeline: The grant to Open Door and the purchase of the land is expected to be completed by the end of December 2023.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Dollars Transferred to Open Door Health	0	\$0

Key Performance Indicator	Baseline	Performance-to-date
Land Purchased	0	0*

**This is a yes/no binary indicator: 0 meaning 'no', 1 meaning 'yes'.*

Public Health Clinics: Rhode Island Free Clinic

Project Identification Number: 10057

Funding Amount: \$2,000,000

Project Expenditure Category: 2.34 Negative Economic Impacts: Assistance to Impacted Nonprofit Organizations

Pandemic-related Problem Statement: Since its establishment in 1998, the Rhode Island Free Clinic (Free Clinic) has historically relied on volunteer healthcare professionals. During the pandemic, the shortage of medical professionals eroded the availability of volunteers. The Free Clinic has not returned to needed staffing levels and would like to move from a solely volunteer staffing model to one that adds direct hires to complement and augment the services provided by volunteers. From February 2019 to January 2020, the Free Clinic had 409 volunteers compared to 263 volunteers from February 2020 to January 2021, 278 from February 2021 to January 2022, and 210 from February 2022 to January 2023.

Project Overview: The Rhode Island Department of Health (RIDOH) provided a grant to the Free Clinic to improve statewide access and quality of primary care for uninsured adults and to increase access to dental care for uninsured adults. With the grant, the Free Clinic is satisfying operational needs and hiring 6.74 FTEs. RIDOH is also providing quarterly grants for the implementation and maintenance of the Rhode Island Health Information Exchange's electronic medical records system, which consolidates healthcare information on Rhode Island patients across all providers to replace the Free Clinic's current internal system.

Timeline: Hiring began in April 2023. The electronic medical records system is scheduled to be completed by the end of December 2023.

Mechanisms and Partners: RIDOH provided the grant funding to the Free Clinic.

Use of Evidence: While this intervention has not been identified as evidence based, the analysis of the key performance indicators will evaluate its effectiveness.

Equity Impact: The Free Clinic is a nonprofit that operates in a qualified census tract (QCT). It provides free, high-quality health care and preventative services to uninsured, low-income adults in Rhode Island. To receive these services, patients must have no health insurance and earn below 200% of the poverty level.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
U.S. Treasury Required Number of nonprofits served		0	0

Key Performance Indicator	Description	Baseline	Performance-to-date
FTEs		0	1.46
Dentist	Add one paid, part-time dentist	0	1
Build Infrastructure for Telehealth/Electronic Medical Records	Integrate into RI Health Exchange Network	0	0*
Number of patients served		2,400	Not yet applicable
Number of dental visits		1,300	Not yet applicable

**This is a yes/no binary indicator: 0 meaning 'no', 1 meaning 'yes'.*

Housing

Project	U.S. Treasury Expenditure Category	Planned Expenditures	Expenditures to Date
Development of Affordable Housing	Negative Economic Impacts: Long-term Housing Security: Affordable Housing	\$15,000,000	\$14,740,825.24
Development of Affordable Housing: Phase II	Negative Economic Impacts: Long-term Housing Security: Affordable Housing	\$75,000,000	\$0
Homelessness Infrastructure	Negative Economic Impacts: Long-term Housing Security: Services for Unhoused Persons	\$35,000,000	\$2,413,861.62
Down Payment Assistance	Revenue Replacement: Provision of Government Services	\$30,000,000	\$10,000,000
Site Acquisition	Negative Economic Impacts: Long-term Housing Security: Affordable Housing	\$25,000,000	\$15,000,000
Community Revitalization	Negative Economic Impacts: Strong Healthy Communities: Demolition and Rehabilitation of Properties	\$20,000,000	\$0
Middle Income Housing	Revenue Replacement: Provision of Government Services	\$20,000,000	\$0
Homelessness Assistance	Services for Disproportionally Impacted Communities: Housing Support: Services for Unhoused Persons	\$14,500,000	\$732,686.51
Affordable Housing Predevelopment	Negative Economic Impacts: Long-term Housing Security: Affordable Housing	\$10,000,000	\$2,499,250
Permanent Supportive Housing: Crossroads	Negative Economic Impacts: Long-term Housing Security: Affordable Housing	\$10,000,000	\$1,335,400.62
Public Housing Pilot Program	Negative Economic Impacts: Long-term Housing Security: Affordable Housing	\$10,000,000	\$0
Homelessness Assistance: Warming Center and Shelter	Negative Economic Impacts: Long-term Housing Security: Services for Unhoused Persons	\$7,000,000	\$4,251,895.22

Project	U.S. Treasury Expenditure Category	Planned Expenditures	Expenditures to Date
Statewide Housing Plan	Revenue Replacement: Provision of Government Services	\$2,000,000	\$0
OHCD Support and Capacity	Revenue Replacement: Provision of Government Services	\$1,500,000	\$552,039.67
Total		\$275,000,000	\$51,255,958.88

Development of Affordable Housing

Project Identification Number: 10016

Funding Amount: \$15,000,000

Project Expenditure Category: 2.15 Negative Economic Impacts: Long-term Housing Security: Affordable Housing

Pandemic-related Problem Statement: Only six of Rhode Island’s 39 communities meet the State-mandated goal that 10% of every municipality’s housing stock qualify as Low- and Moderate-Income Housing (LMIH). Rhode Island consistently ranks among the lowest nationally in per-capita building permit activity, ranking 51st on this measure in 2020.⁵¹ The state has ranked far behind its New England neighbors in the investment of state resources for affordable housing. The result is that Rhode Island is experiencing a critical housing shortage at all price points, but particularly for lower-income households.

In recent years, sale and rent prices have increased significantly. Rent for a market-rate, two-bedroom apartment is about \$1,700, up about 8.5% from 2019, when it was \$1,575. The rental vacancy rate and inventory of homes for sale are also at historically low levels. The rental vacancy rate, the number of unoccupied rental units, is 2.8%, down from 3.7% in May 2021, and 6.2% in 2019. A vacancy rate that would not be expected to have an impact on prices is between 6% and 7%.⁵²

Project Overview: Rhode Island Housing (RIHousing) is deploying the funds as no-interest, long-term loans to complement other state and federal resources to finance the production and preservation of housing affordable to households earning less than 80% of the area median income (AMI). All projects financed through this project are income eligible for the Low-Income Housing Tax Credit (LIHTC) investment. Funds can be used for construction, architectural and consulting fees, legal fees, etc.

U.S. Treasury presumes that any housing project that is eligible to be funded under any of the following federal housing programs is an eligible use of State Fiscal Recovery Funds under Negative Economic Impacts:

- National Housing Trust Fund.
- Home Investment Partnerships Program (HOME).
- LIHTC.
- Public Housing Capital Fund.

⁵¹ U.S. Census Bureau Building Permits Survey

⁵² CoStar Market Analytics

- Section 202 Supportive Housing for the Elderly Program and Section 811 Supportive Housing for Persons with Developmental Disabilities Program.
- Project-Based Rental Assistance.
- Multifamily Preservation & Revitalization Program.

The *Development of Affordable Housing* project aligns with HOME and LIHTC.

Timeline: In February 2022, RIHousing issued a request for proposals (RFP) (blending multiple funding sources such as Building Homes Rhode Island program, the Housing Production Fund, and others) to streamline the application process, facilitate project underwriting by RIHousing staff, and allow RIHousing to calibrate the resource mix that is appropriate for each project and maximize available resources. Proposals were received in March 2022, reviewed throughout April and May 2022, and selected in June 2022. Construction and rehabilitation of units is scheduled between June 2023 and December 2024.

Mechanisms and Partners: RIHousing is administering this program as a subrecipient and made funding available through RFPs that were open to nonprofit and for-profit developers, public housing authorities, and municipalities. The RFPs were coordinated with other programs to streamline the process for applicants, facilitate the underwriting of the projects by RIHousing staff, and allow RIHousing to calibrate the resource mix appropriate for each project to ensure compliance with each program’s requirements and maximize the use of available resources.

Use of Evidence: The project is similar to programs, such as LIHTC, that have been rigorously evaluated and found to have a positive impact on the development of affordable housing based on high-quality evidence, according to the Pew Results First Clearinghouse. LIHTC programs not only improve access to affordable housing for low-income individuals, but also produce other benefits including, but not limited to:

- In distressed neighborhoods, LIHTC programs can increase property values and reduce crime rates.
- LIHTC use is associated with less racial segregation in low- and high-poverty neighborhoods at the metropolitan level. Segregation increases racial disparities in housing stability, homeownership, and property values.
- LIHTC developments can positively influence nearby property maintenance.⁵³

Equity Impact: According to the National Low Income Housing Coalition, Black, Native American, and Hispanic households are more likely than white households to be extremely low-income renters.⁵⁴ In Rhode Island, affordable rental units are primarily occupied by households of color. Across 2,651 units constructed with RIHousing-administered HOME Investment Partnerships Program dollars for which demographic information was available, 83.4% of occupants identified as racial or ethnic minorities, with 46.2% of occupants identifying as Hispanic. Similarly, of the 7,001 households in LIHTC-financed developments for which demographic information was available, 94.1% identified as racial or ethnic minorities, with 54.7% of occupants identifying as Black or African American, and 36.8% of occupants identifying as Hispanic.

By supporting the development of affordable housing, this project helps low-income renters from historically underserved and marginalized communities access housing. Further, this project addresses

⁵³ [County Health Rankings – Low Income Housing Tax Credits \(LIHTCs\)](#)

⁵⁴ [The GAP | National Low Income Housing Coalition \(nlihc.org\)](#)

housing inequities in the state and closes gaps for communities that are disproportionately affected by homelessness and housing stability, including low-income Rhode Islanders and households of color.

Labor Requirements: RIHousing requires that all borrowers execute an agreement stating that they will provide either a certification that the project includes a project labor agreement or a workforce continuity plan detailing how the borrower will ensure the project has ready access to a sufficient supply of labor to ensure high-quality construction throughout the life of the project, including a description of any required professional certifications and/or in-house training.

Performance: In addition to the metrics shown below, RIHousing will collect information relating to minority and disproportionately impacted communities, such as the number of minority developers and projects in qualified census tracts (QCTs).

Key Performance Indicator	Baseline	Performance-to-date
U.S. Treasury Required Number of affordable housing units preserved or developed	0	36
Number of units built or preserved at 30% AMI or lower	0	9
Number of units built or preserved between 30% and 60% AMI	0	4

Development of Affordable Housing: Phase II

Project Identification Number: 10036

Funding Amount: \$75,000,000

Project Expenditure Category: 2.15 Negative Economic Impacts: Long-term Housing Security: Affordable Housing

Pandemic-related Problem Statement: Only six of Rhode Island’s 39 municipalities meet the state-mandated goal that 10% of every municipality’s housing stock qualify as Low- and Moderate-Income Housing (LMIH). Rhode Island consistently ranks among the lowest in the nation in per-capita building permit activity, ranking 51st on this measure in 2020.⁵⁵ Additionally, Rhode Island has ranked far behind its New England neighbors in the investment of state resources for affordable housing. The result is that Rhode Island is experiencing a critical housing shortage at all price points, but particularly for lower-income households.

In recent years, sale and rent prices have increased significantly. Rent for a market-rate, two-bedroom apartment is about \$1,700, up about 8.5% from 2019, when it was \$1,575. The rental vacancy rate and inventory of homes for sale are also at historically low levels. The rental vacancy rate, the number of

⁵⁵ U.S. Census Bureau Building Permits Survey

unoccupied rental units, is 2.8%, down from 3.7% in May 2021, and 6.2% in 2019. A vacancy rate that would not be expected to have an impact on prices is between 6% and 7%.⁵⁶

Project Overview: Rhode Island Housing (RIHousing) is deploying the funds as no-interest, long-term loans to complement other state and federal resources to finance the production and preservation of housing affordable to households earning less than 80% of the area median income (AMI). All projects financed through this project are income eligible for the Low-Income Housing Tax Credit (LIHTC) investment. Funds can be used for construction, architectural and consulting fees, legal fees, etc. Funding cannot be used for costs covered by a separate State Fiscal Recovery Fund (SFRF) project administered by RIHousing.

U.S. Treasury presumes that any housing project that is eligible to be funded under any of the following federal housing programs is an eligible use of SFRF under Negative Economic Impacts:

- National Housing Trust Fund.
- Home Investment Partnerships Program (HOME).
- LIHTC.
- Public Housing Capital Fund.
- Section 202 Supportive Housing for the Elderly Program and Section 811 Supportive Housing for Persons with Developmental Disabilities Program.
- Project-Based Rental Assistance.
- Multifamily Preservation & Revitalization Program.

The *Development of Affordable Housing: Phase II* project aligns with HOME and LIHTC.

Timeline: RIHousing anticipates publishing three requests for proposals (RFPs) to solicit projects. The first RFP was released in November 2022, with projects selected in May 2023; the second RFP is expected to be released in September 2023, with projects selected by April 2024; the third RFP is expected to be released in spring 2024, with projects selected by November 2024. Units are expected to be delivered from January 2024 through September 2026.

Mechanisms and Partners: RIHousing is administering this program as a subrecipient and making funding available through RFPs that are open to nonprofit and for-profit developers, public housing authorities, and municipalities. The RFPs are coordinated with other programs to streamline the process for applicants, facilitate the underwriting of the projects by RIHousing staff, and allow RIHousing to calibrate the resource mix appropriate for each project to ensure compliance with each program's requirements and maximize the use of available resources.

Use of Evidence: Affordable housing programs such as the LIHTC have been rigorously evaluated and found to have a positive impact based on high-quality evidence, according to the Pew Results First Clearinghouse. LIHTC programs not only improve access to affordable housing for low-income individuals, but also produce other benefits, including, but not limited to:

- In distressed neighborhoods, LIHTC programs can increase property values and reduce crime rates.
- LIHTC use is associated with less racial segregation in low- and high-poverty neighborhoods at the metropolitan level. Segregation increases racial disparities in housing stability, homeownership, and property value.

⁵⁶ CoStar Market Analytics

- LIHTC developments can positively influence nearby property maintenance.⁵⁷

Equity Impact: According to the National Low Income Housing Coalition, Black, Native American, and Hispanic households are more likely than white households to be extremely low-income renters.⁵⁸ In Rhode Island, affordable rental units are primarily occupied by households of color. Across 2,651 units constructed with RIHousing-administered HOME Investment Partnerships Program dollars for which demographic information was available, 83.4% of occupants identified as racial or ethnic minorities, with 46.2% of occupants identifying as Hispanic. Similarly, of the 7,001 households in LIHTC-financed developments for which demographic information was available, 94.1% identified as racial or ethnic minorities, with 54.7% of occupants identifying as Black or African American, and 36.8% of occupants identifying as Hispanic.

By supporting the development of affordable housing, this project helps low-income renters from historically underserved and marginalized communities access housing. Further, this project addresses housing inequities in the state and closes gaps for communities that are disproportionately affected by homelessness and housing stability, including low-income Rhode Islanders and households of color.

Labor Requirements: As of the current reporting period, no grants have been distributed by RIHousing, and no construction has begun. As the grants are distributed and the construction of the affordable housing developments begins, the State will report on relevant labor requirements.

Performance: In addition to the metrics shown below, RIHousing will collect information relating to minority and disproportionately impacted communities, such as the number of minority developers and projects in qualified census tracts (QCTs).

Key Performance Indicator	Baseline	Performance-to-date
U.S. Treasury Required Number of affordable housing units preserved or developed	0	0
Number of projects funded	0	15
Number of units built or preserved under 30% AMI (including permanent supportive housing)	0	0
Number of units built or preserved between 30% and 60% AMI	0	0

⁵⁷ [County Health Rankings – Low Income Housing Tax Credits \(LIHTCs\)](#)

⁵⁸ [The GAP | National Low Income Housing Coalition \(nlihc.org\)](#)

Key Performance Indicator	Baseline	Performance-to-date
Number of units built or preserved between 60% and 80% AMI	0	0

Homelessness Infrastructure

Project Identification Number: 10037

Funding Amount: \$35,000,000

Project Expenditure Category: 2.16 Negative Economic Impacts: Long-term Housing Security: Services for Unhoused Persons

Pandemic-related Problem Statement: Homelessness in Rhode Island increased significantly during the pandemic as documented by the 2021 Rhode Island Point in Time Count, which highlighted substantial increases in homelessness from 2020. Findings included:

- 1,267 people experienced homelessness on January 26, 2021 (a 14% increase from the same date in 2020).
- 869 people were in emergency shelter (a 17% increase).
- 181 people were living outdoors on (a 67% increase).⁵⁹

The 2022 Point in Time Count indicated that Rhode Island continues to see dramatic increases in the number of individuals and families experiencing homelessness. Findings included:

- 1,576 people experienced homelessness on January 26, 2022 (a 24% increase from the same date in 2021).
- 506 family members (adults and children) experienced homelessness (a 7% increase).⁶⁰

Project Overview: The Rhode Island Office of Housing and Community Development (OHCD) is expanding the capacity of the shelter system to better respond to homelessness. This is being accomplished by adding temporary and permanent shelter beds through contracts with providers and targeting key constituencies, including families, couples, individuals experiencing chronic homelessness, and victims of domestic violence. Providers are either reconfiguring or expanding their existing shelter space to serve additional people or renting hotel/motel rooms and other suitable accommodations to house people who would otherwise be unhoused. Some of these shelter bed additions were only for the winter of 2022-2023, and others are permanent and will provide a more long-term solution to addressing the shortage of beds. The overarching goal is to expand the State’s capacity to provide temporary housing to individuals while they are in the process of finding more permanent housing arrangements.

Timeline: Winter shelter beds opened in November 2022, and permanent shelter beds began being added in November 2022, and are expected to continue coming online through September 2023.

Mechanisms and Partners: OHCD issued a letter of interest in September 2022 and issued contracts in October 2022.

⁵⁹ [2022 RI Point in Time Storybook | Tableau Public](#)

⁶⁰ Ibid

Use of Evidence: According to The National Alliance to End Homelessness, the five keys to effective emergency shelter are: a Housing First approach, safe and appropriate diversion, immediate and low-barrier access, housing-focused rapid exit services, and data to measure performance.⁶¹ Shelters in Rhode Island are encouraged to adhere to Continuum of Care Standards and Guidelines, which emphasize these five keys as central to ensuring that homelessness “is a rare and brief event.” With training on Housing First and Best Practices and these five keys in place, Rhode Island shelters are using evidence-based interventions to address the homelessness crisis, and this program, which seeks to expand available shelter beds, was also evidence based.

Equity Impact: The intended outcome of this program was to ensure that individuals experiencing homelessness have access to a safe place to stay and appropriate services so that they can move toward finding a more permanent housing situation. As racial and ethnic minorities are disproportionately represented among the homeless population, this program addressed significant disparities experienced by these populations in accessing needed services. The 2022 Point in Time Count showed that Rhode Island has seen drastic increases in homelessness among minority communities. While 9% of the state’s population identified as African American/Black, with 11% of this population falling below the poverty line, 28% of families and 22% of individuals experiencing homelessness are African American/Black. Similarly, while 16% of the state’s population identified as Hispanic/Latino, with 32% of this population falling below the poverty line, 15% of individuals and 36% of families experiencing homelessness are Hispanic/Latino.⁶²

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of temporary shelter beds added for the winter	0	203
Number of permanent shelter beds added to the system	0	11
Number of people provided with emergency shelter and essential services	1,551	2,219

Down Payment Assistance

Project Identification Number: 10043

Funding Amount: \$30,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

⁶¹ [Emergency Shelter Learning Series - National Alliance to End Homelessness](#)

⁶² [2022 RI Point in Time Storybook | Tableau Public](#)

Project Overview: Rhode Island Housing (RIHousing) is providing \$20,000 in down payment and closing cost assistance to first-time homebuyers. The purpose of the program is to help offset the rapid housing cost increases that Rhode Island is experiencing and help more Rhode Islanders realize homeownership. RIHousing is targeting homeownership for lower-income and higher minority concentrated areas with a marketing campaign.

Eligible properties are one-to-four-unit, owner-occupied properties and approved or warrantable condominiums. The income limits are \$112,555 for one- or two-person households and \$129,438 for households with at least three people. Grant recipients must complete a RIHousing-approved first-time homebuyer course, qualify for a RIHousing-funded first mortgage, and have a 660 minimum representative credit score.

Timeline: Grants began being distributed in the January 2023 and are expected to be distributed through July 2025.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Grant contracts signed	0	597
Minority borrowers served	0	38.19%
Loans closed	0	597

Site Acquisition

Project Identification Number: 10012

Funding Amount: \$25,000,000

Project Expenditure Category: 2.15 Negative Economic Impacts: Long-term Housing Security: Affordable Housing

Pandemic-related Problem Statement: Rhode Island consistently ranks among the lowest nationally in per-capita building permit activity.⁶³ The state has ranked far behind its New England neighbors in the investment of state resources for affordable housing. The result is that Rhode Island is experiencing a critical housing shortage at all price points, but particularly for lower-income households.

In recent years, sale and rent prices have increased significantly. Rent for a market-rate, two-bedroom apartment is about \$1,700, up about 8.5% from 2019, when it was \$1,575. The rental vacancy rate and inventory of homes for sale are also at historically low levels. The rental vacancy rate, the number of unoccupied rental units, is 2.8%, down from 3.7% in May 2021, and 6.2% in 2019. A vacancy rate that would not be expected to have an impact on prices is between 6% and 7%.⁶⁴

⁶³ U.S. Census Bureau Building Permits Survey

⁶⁴ CoStar Market Analytics

The housing shortage has created an extremely competitive real estate environment. Many sellers are inclined to accept cash offers instead of waiting for a purchaser to secure financing through a traditional financial institution. This puts affordable housing developers at a severe disadvantage because they are unlikely to have the necessary cash on hand. A solution is needed to help developers purchase suitable properties for affordable housing development.

Project Overview: The project is providing grants to developers to purchase properties to develop affordable housing units. In all, 45 properties are being acquired, accommodating an estimated 1,083 affordable units. There is a nine-month closing requirement, and the maximum grant amount is \$1.5 million.⁶⁵ By supporting the development of affordable and supportive housing, this project is addressing inequities and closing gaps for populations that are disproportionately affected by homelessness and housing instability, including low-income Rhode Islanders and Rhode Islanders of color.

The project builds upon Rhode Island Housing's (RIHousing) Land Bank program, which provides financing for eligible applicants to acquire undeveloped real estate, vacant lots, developed properties, or a combination thereof for affordable housing.

U.S. Treasury presumes that any housing project that is eligible to be funded under any of the following federal housing programs is an eligible use of State Fiscal Recovery Funds under Negative Economic Impacts:

- National Housing Trust Fund.
- Home Investment Partnerships Program (HOME).
- Low-Income Housing Tax Credit (LIHTC).
- Public Housing Capital Fund.
- Section 202 Supportive Housing for the Elderly Program and Section 811 Supportive Housing for Persons with Developmental Disabilities Program.
- Project-Based Rental Assistance.
- Multifamily Preservation & Revitalization Program.

The *Site Acquisition* project aligns with HOME and LIHTC.

Timeline: RIHousing began marketing the project in February 2022 and began selecting recipients for grant awards in May 2022. The award of funds started in September 2022 and is anticipated to continue through December 2023. The closing of transactions started in January 2023.

Mechanisms and Partners: RIHousing is administering the project and collaborating with the Rhode Island Department of Housing to oversee the implementation.

Use of Evidence: Land banks across the country are helping to make equitable, inclusive neighborhoods and resilient communities possible. By acquiring unused properties, stewarding them on behalf of the public, and attracting new investment, land banks are generating significant positive impacts for the communities they serve. Specific outcomes achieved by land banks across the country include:

- The Houston Land Bank partnered with the City of Houston and the Houston Community Land Trust to provide over 500 (and counting) new affordable homes for low-income Houstonians since 2004.

⁶⁵ RIHousing's definition of a closing requirement is when the appropriate loan documents are signed, and funds are provided to the developer.

- Over the last decade, RIHousing’s Land Bank program has provided nearly \$9 million in financing for 572 affordable housing units.⁶⁶

Equity Impact: According to the National Low Income Housing Coalition, Black, Native American, and Hispanic households are more likely than white households to be extremely low-income renters.⁶⁷ In Rhode Island, affordable rental units are primarily occupied by households of color. Across the 2,651 RIHousing-administered HOME Investment Partnership Program units for which race and ethnicity information was available, 83.4% of occupants identified as racial or ethnic minorities, with 46.2% of occupants identifying as Hispanic. Similarly, 94.1% of the 7,001 households residing in LIHTC developments for which demographic data was available identified as racial or ethnic minorities, with 36.8% of occupants identifying as Hispanic. More than half of all households residing in LIHTC-financed housing units were Black or African American (54.7%).⁶⁸

RIHousing is working with developers and property managers to ensure that minority populations and other members of disadvantaged classes are made aware of and have access to the affordable housing created by this program. All participating developers are required to produce an Affirmative Fair Housing Marketing Plan for assisted developments. RIHousing is collecting information relating to minority and disproportionately impacted communities, such as the number of minority developers and projects in qualified census tracts (QCTs).

Labor Requirements: This project does not include labor costs; the project is for the acquisition of properties to be repurposed as affordable housing.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
U.S. Treasury Required Affordable housing units preserved or developed	0	26
Number of properties acquired	0	22
Number of proposed units less than 30% area median income (AMI)	0	46
Number of proposed units between 30% and 60% AMI	0	449

⁶⁶ <https://communityprogress.org/wp-content/uploads/2022/06/Progress-Points-Land-Banks-Land-Bank-Impacts-2022.pdf>.

⁶⁷ [The GAP | National Low Income Housing Coalition \(nlihc.org\)](https://www.nlihc.org/)

⁶⁸ RIHousing Program Data

Key Performance Indicator	Baseline	Performance-to-date
Number of proposed units between 60% and 80% AMI	0	68
Number of units created less than 30% AMI	0	13
Number of units created between 30% and 60% AMI	0	13
Number of units created between 60% and 80% AMI	0	0

Community Revitalization

Project Identification Number: 10040

Funding Amount: \$20,000,000

Project Expenditure Category: 2.23 Negative Economic Impacts: Strong Healthy Communities: Demolition and Rehabilitation of Properties

Pandemic-related Problem Statement: There are scarce financial resources to redevelop properties into spaces for quality housing, commercial uses, and community service providers. Much of the funding for deployment in the poorest parts of Rhode Island is focused on housing, and necessarily so. However, this leaves a gap for communities that need critical services and more commercial development. It is simply too costly to build without support.

Project Overview: The project supplements existing funds to invest in spaces for housing units, commercial uses, and health, education, and employment training programming. Rhode Island Housing (RIHousing) is distributing grants through requests for proposals (RFPs) that are open to for-profit and nonprofit developers, municipalities, owners of existing affordable housing developments, and public housing authorities to redevelop existing real estate for these uses. All developments must be in a qualified census tract (QCT). The maximum grant amount is \$2 million, and each grant has a term of affordability of at least 30 years.

Timeline: The first RFP was issued in November 2022 in concert with a public awareness effort and communication with the developer community. Projects were awarded funding in May 2023. A second RFP is expected to be released in September 2023, with projects selected by April 2024, and a third RFP is expected to be released in spring 2024, with projects selected by November 2024.

Mechanisms and Partners: The RFPs are being coordinated with other programs, such as Building Homes Rhode Island (BHRI), the Housing Production Fund, etc., to streamline the process for applicants, facilitate the underwriting of the projects by RIHousing staff, and allow RIHousing to calibrate the resource mix appropriate for each project to ensure compliance with each program's requirements and maximize the use of available resources.

Use of Evidence: There is a wide range of research demonstrating the positive impact that stable, affordable housing has on health, educational, and economic outcomes for families and individuals. Research also has shown a clear link between infrastructure investments and economic growth and development. A Brookings Institution report found that infrastructure investments provide demand stimulus to the economy in the short term and serve as a critical component of economic growth in the medium and long term.⁶⁹ The \$9 million American Revitalization Program run by RIHousing, which is like the *Community Revitalization* project, has funded the creation of 100 rental units, 15 commercial spaces, and 11 public facilities throughout Rhode Island.

Equity Impact: This program is providing resources to create housing and spaces to support communities disproportionately impacted by Rhode Island’s affordable housing crisis. Facilities funded by this program are promoting economic opportunity, self-sufficiency, and positive physical and behavioral health outcomes for low-income Rhode Islanders. In Rhode Island, racial and ethnic minorities represent 22% of the population, but 30% of households earning less than 80% of the area median income (AMI).⁷⁰ The U.S. Department of Housing and Urban Development’s (HUD) *2020 Annual Homeless Assessment Report* found that people identifying as Black or African American comprise 12% of the U.S. population but account for 39% of people experiencing homelessness.⁷¹ Community spaces funded by this program will serve to reduce instances of homelessness, build opportunity for low-income residents, and expand the safety net that supports low-income communities.

According to the National Low Income Housing Coalition, Black, Native American, and Hispanic households are more likely than white households to be extremely low-income renters.⁷² In Rhode Island, affordable rental units are primarily occupied by households of color. Across the 2,651 RIHousing-administered HOME Investment Partnership Program units for which race and ethnicity information was available, 83.4% of occupants identified as racial or ethnic minorities, with 46.2% of occupants identifying as Hispanic. Similarly, 94.1% of the 7,001 households residing in Low-Income Housing Tax Credit-finance (LIHTC) developments for which demographic data was available identified as racial or ethnic minorities, with 36.8% of occupants identifying as Hispanic. More than half of all households residing in LIHTC-financed housing units were Black or African American (54.7%).⁷³

RIHousing is working with developers and property managers to ensure that minority populations and other members of disadvantaged classes are made aware of and have access to the affordable housing created by this program. All participating developers are required to produce an Affirmative Fair Housing Marketing Plan for assisted developments. RIHousing is collecting information relating to minority and disproportionately impacted communities, such as the number of minority developers and projects in qualified census tracts (QCTs).

Labor Requirements: As of the current reporting period, no grants have been distributed by RIHousing and no construction has begun. As the grants are distributed and the construction of affordable housing or mixed-use developments begins, the State will report the relevant labor requirements.

⁶⁹ [The start of America’s infrastructure decade: How macroeconomic factors may shape local strategies](#)

⁷⁰ US Census American Community Survey

⁷¹ [The 2020 Annual Homeless Assessment Report to Congress](#)

⁷² [The GAP | National Low Income Housing Coalition \(nlihc.org\)](#)

⁷³ RIHousing Program Data

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of community revitalization projects obligated	0	10
Number of housing units funded	0	810
Number of community revitalization projects completed	0	0
Number of housing units completed	0	0

Middle Income Housing

Project Identification Number: 10039

Funding Amount: \$20,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: Rhode Island is experiencing a critical housing shortage at all price points. Affordable housing, especially for low-income renters earning less than 80% area median income (AMI), is particularly limited because of rapidly rising housing costs and an extremely low inventory – resulting from an influx of out-of-state buyers and years of under-production. Rent for a market-rate two-bedroom apartment is approximately \$1,700, up about 8.5% from 2019, when it was \$1,575.⁷⁴

Most state- and federally financed affordable housing programs are limited to renters earning no more than 80% AMI. This project is supporting the development of apartments affordable to middle-income households earning up to 100% AMI. More than 22,000 renter households earning between 80% and 100% AMI live in apartments that are affordable to households earning less than 80% AMI.⁷⁵ By constructing middle income housing, these renters will be able to move to rental units targeted to their income level, thereby freeing up the rental units targeted for lower-income renters that they currently occupy. This program is building on Rhode Island Housing’s (RIHousing) \$9 million Workforce Housing Innovation Challenge (WHIC).

No-interest loans, which are being distributed through requests for proposals (RFPs) to for-profit and not-for-profit developers, are covering hard and soft development costs, including property acquisition, site remediation, construction, legal fees, architectural and consulting fees, etc. The maximum, per-project award is the lesser of \$2.5 million or the maximum allowable per housing rental unit. In no event can the award amount exceed 25% of the total development cost.

⁷⁴ CoStar Market Analytics

⁷⁵ US Census American Community Survey

Timeline: Projects are being selected through the RFP process from January 2023 through June 2024, and it is anticipated that all units will be built by March 2026.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of projects funded	0	7
Number of units between 80% and 100% AMI funded	0	116
Number of units between 80% and 100% AMI completed	0	0

Homelessness Assistance

Project Identification Number: 10017

Funding Amount: \$14,500,000

Project Expenditure Category: 3.11 Services for Disproportionally Impacted Communities: Housing Support: Services for Unhoused Persons

Pandemic-related Problem Statement: The homelessness crisis in Rhode Island increased significantly during the pandemic as documented by the 2021 RI Point in Time Count conducted on January 26, 2021.⁷⁶ This census found:

- A total of 1,267 persons experienced homelessness, an increase of 14% compared to January 2020.
- 869 persons were living in emergency shelters, a 17% increase from 2020.
- 181 persons were living outdoors, a 67% increase from 2020.

The 2022 Point in Time Count indicated that Rhode Island continues to see dramatic increases in the number of individuals and families experiencing homelessness. Findings included:

- 1,576 people experienced homelessness on January 26, 2022 (a 24% increase from the same date in 2021).
- 506 family members (adults and children) experienced homelessness (a 7% increase from 2021).⁷⁷

Project Overview: Through the Consolidated Homeless Fund Program, the Rhode Island Department of Housing, Office of Housing and Community Development (OHCD) issued a request for proposals (RFP) for a range of new housing stabilization services, especially those targeting homeless populations that have traditionally had difficulty accessing services. These services include:

⁷⁶ [Point In Time Count | End Homelessness RI \(rihomeless.org\)](https://rihomeless.org)

⁷⁷ Ibid

- Increased homelessness prevention, diversion, and rapid rehousing services to help prevent homelessness and to find safe, healthy, and affordable housing for individuals experiencing homelessness.
- Emergency shelter and housing stabilization services for individuals who identify as LGBTQ+ and victims of domestic violence, with the goal of obtaining permanent housing.

OHCD contracted with the Rhode Island Coalition to End Homelessness for the development and implementation of a best practices training program for social service, rapid housing, and administrative staff working at Rhode Island Continuum of Care, Emergency Solutions Grant, and Consolidated Homeless Fund programs to ensure that staff are properly equipped to deliver effective services and programming.

Timeline: In January 2022, OHCD issued the RFP in partnership with Consolidated Homeless Fund Program partners. Proposals were received in February 2022 and selected in April 2022. Projects began in July 2022 and are scheduled to be completed by September 2023.

Mechanisms and Partners: OHCD is partnering with the RI Continuum of Care, the Rhode Island Department of Human Services, and the cities of Providence, Woonsocket, and Pawtucket to deliver housing stabilization services.

Use of Evidence: The U.S. Department of Housing and Urban Development’s (HUD) Family Options Study demonstrated that access to rapid rehousing and housing stability services resulted in key improvements for housing stability, family preservation, adult well-being, and self-sufficiency, as highlighted below:

- Families participating in rapid rehousing interventions were less likely to be separated from their children.
- Adults receiving rapid rehousing services demonstrated reduced psychological distress, reduced evidence of alcohol and drug problems, and halved intimate partner violence compared with usual care (shelter).
- Children whose families received rapid rehousing services had fewer school absences and reduced behavior problems reported by parents.
- Families served by rapid rehousing programs reported improvements in food security.⁷⁸

From 2014 to 2018, Building Changes, a nonprofit in Washington state, used data from 1,898 families to test diversion as an approach to help families exit homelessness. The results of this study, which were highlighted in *Homeless to Housed in a Hurry*, revealed that diversion costs less than shelter care, takes less time to get families successfully housed, and keeps families out of homelessness.⁷⁹

Equity Impact: Homelessness prevention and housing stabilization programs provide an immediate benefit to low-income Rhode Islanders and Rhode Islanders of color. According to the RI Point in Time Count for 2021, while 6.6% of the state’s population identified as African American/Black, 53.3% of families living outside or in cars are African American/Black. Similarly, while 15% of the state’s population identify as Hispanic/Latino, 41.5% of families living in homeless shelters are Hispanic/Latino.⁸⁰ As a result, programs reducing homelessness by expanding affordable and supportive

⁷⁸ [The Family Options Study](#)

⁷⁹ [Resources Archive - Building Changes](#)

⁸⁰ [Point In Time Count | End Homelessness RI \(rihomeless.org\)](#)

housing disproportionately benefit Rhode Islanders of color. HUD reports that LGBTQ+ young people are 2.2 times more likely to become homeless than their non-LGBTQ+ peers.⁸¹

The National Network to End Domestic Violence reports that domestic violence is the leading cause of homelessness for women and their children. In 2020, 333 adults and children stayed in domestic violence shelters in Rhode Island, according to the Rhode Island Coalition Against Domestic Violence.⁸² In 2021, Rhode Island’s Victims of Crime Act helpline received 4,645 calls, of which 74% were related to domestic and sexual violence.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
U.S. Treasury Required Number of people or households receiving eviction prevention services	0	83
Number of households receiving financial literacy training/diversion assistance	0	156
Number of homeless households receiving emergency housing and stabilization services	0	124
Number of provider staff receiving Housing First and other Best Practice Training	0	753
Percent of households avoiding the homelessness system as a result of diversion assistance	0	86%
Percent of exits to positive housing destinations	0	41%

⁸¹ [Missed opportunities: LGBTQ youth homelessness in America](#)

⁸² [RICADV 2020 Annual Report](#)

Key Performance Indicator	Baseline	Performance-to-date
Percent of trainees able to display increased knowledge of Housing First and Best Practices Training determined by pre/post tests	0	100%

Affordable Housing Predevelopment

Project Identification Number: 10021

Funding Amount: \$10,000,000

Project Expenditure Category: 2.15 Negative Economic Impacts: Long-term Housing Security: Affordable Housing

Pandemic-related Problem Statement: In recent years, sale and rent prices have increased significantly. Rent for a market-rate, two-bedroom apartment is about \$1,700, up about 8.5% from 2019, when it was \$1,575. The rental vacancy rate and inventory of homes for sale are also at historically low levels. The rental vacancy rate, the number of unoccupied rental units, is 2.8%, down from 3.7% in May 2021, and 6.2% in 2019. A vacancy rate that would not be expected to have an impact on prices is between 6% and 7%.⁸³

To increase housing production, Rhode Island must create a pipeline of sites ready for redevelopment. Building that pipeline requires developers to identify sites for future development, determine if those sites are suitable for affordable housing, and design a project. Many developers may have limited capacity to finance these costs, restricting the number of developments they can have in predevelopment at one time. With the new resources being proposed to finance developments in the pipeline, it is important that Rhode Island also fund the work to replenish that pipeline with new projects.

Typical unreimbursed predevelopment costs for multifamily projects – such as architectural and engineering studies, filing fees to obtain permits and approval, and site control costs – can range from \$100,000 to \$750,000, and create delays and financial hardship particularly for nonprofit developers.

Project Overview: This program is making grants available to affordable housing developers for critical predevelopment tasks, such as soil testing and environmental assessment, site remediation, preliminary architectural and engineering planning, and municipal zoning and planning approval processes. Having access to predevelopment funding allows developers, particularly nonprofit entities, to complete these activities on an accelerated track, resulting in projects being ready for development activity sooner. This will maintain a development pipeline for the next several years as Rhode Island Housing (RIHousing) implements other State Fiscal Recovery Fund (SFRF) affordable housing projects. RIHousing will fund at least 40 projects at a maximum cost of \$250,000 per project, and projects must include deed restrictions that specify that units must be at or below 80% area median income (AMI) for at least 30 years.

⁸³ CoStar Market Analytics

U.S. Treasury presumes that any housing project that is eligible to be funded under any of the following federal housing programs is an eligible use of SFRF under Negative Economic Impacts:

- National Housing Trust Fund.
- Home Investment Partnerships Program (HOME).
- Low-Income Housing Tax Credit (LIHTC).
- Public Housing Capital Fund.
- Section 202 Supportive Housing for the Elderly Program and Section 811 Supportive Housing for Persons with Developmental Disabilities Program.
- Project-Based Rental Assistance.
- Multifamily Preservation & Revitalization Program.

The *Affordable Housing Predevelopment* project aligns with HOME and LIHTC.

Timeline: The first RFP was issued in May 2023, in concert with a public awareness effort and communication with the developer community. Projects are being awarded from June 2023 through December 2023. Units are expected to be funded through June 2024.

Mechanisms and Partners: RIHousing is considering responses to the RFPs for costs associated with predevelopment activities that include, but are not limited to:

- Architectural and engineering studies, environmental assessments, or costs associated with development professionals.
- Filing fees and other costs to obtain permits and approvals and apply for public or private grants.
- Site control costs.
- Other predevelopment activities approved by RIHousing.

Use of Evidence: While this intervention has not been identified as evidence based, the analysis of the key performance indicators will evaluate its effectiveness. Additionally, RIHousing maintains an existing predevelopment loan program that provides similar loans to developers. The program made 10 loans totaling about \$2.1 million that resulted in the development of 577 affordable units.

Equity Impact: By facilitating the rapid development of affordable housing for low-income people, RIHousing intends to expand housing opportunities for all to make access to housing fair, equitable, and widespread. These funds will be used in conjunction with other federal and state dollars to create homes for all Rhode Islanders, but the portion of the population needing extremely low-income housing is disproportionately households of color. Minority households have lower rates of homeownership, are rent cost burdened at higher rates, and face greater obstacles to being stably housed. This program will help relieve those challenges and expand opportunity to more Rhode Islanders.

According to the National Low Income Housing Coalition, Black, Native American, and Hispanic households are more likely than white households to be extremely low-income renters.⁸⁴ In Rhode Island, affordable rental units are primarily occupied by households of color. Across the 2,651 RIHousing-administered HOME Investment Partnership Program units for which race and ethnicity information was available, 83.4% of occupants identified as racial or ethnic minorities, with 46.2% of occupants identifying as Hispanic. Similarly, 94.1% of the 7,001 households residing in LIHTC-financed developments for which demographic data was available identified as racial or ethnic minorities, with

⁸⁴ [The GAP | National Low Income Housing Coalition \(nlihc.org\)](https://www.nlihc.org/)

36.8% of occupants identifying as Hispanic. More than half of all households residing in LIHTC-financed housing units were Black or African American (54.7%).⁸⁵

Performance:

Key Performance Indicator	Baseline	Performance-to-date
U.S. Treasury Required Number of affordable housing units preserved or developed	0	0
Number of projects given predevelopment grants	0	18
Number of units proposed to be created or preserved under 30% AMI (including permanent supportive housing)	0	97
Number of units proposed to be created or preserved between 30% and 60% AMI	0	403
Number of units proposed to be created or preserved between 60% and 80% AMI	0	208
Number/percentage of projects reaching development stage	0	Not yet applicable

Permanent Supportive Housing: Crossroads

Project Identification Number: 10024

Funding Amount: \$10,000,000

Project Expenditure Category: 2.15 Negative Economic Impacts: Long-term Housing Security: Affordable Housing

Pandemic-related Problem Statement: Crossroads Rhode Island (Crossroads) owns and operates The Tower – a 176-unit single-room occupancy building, with shared bathrooms and kitchens on each floor. These shared spaces are a high-risk environment for the spread of infections and viruses because it is

⁸⁵ RIHousing Program Data

difficult for residents to adhere to physical distancing and other measures intended to reduce the spread of COVID-19. The Tower houses individuals experiencing homelessness at or below 30% area median income (AMI) who have been disproportionately impacted by the pandemic.

Project Overview: Crossroads is launching the Summer Street project to replace The Tower with 176, one-bedroom units, with private bathrooms and kitchens. The development decreases the potential of COVID-19 among an at-risk population by providing safe and affordable housing, and it also allows for The Tower to be redeveloped in to 84 units (32 one-bedroom units and 52 efficiency units) in a future phase that is not part of the *Permanent Supportive Housing: Crossroads* project. The Summer Street site, which is a vacant parking lot adjacent to The Tower, will be developed in two phases. All the units will be reserved for individuals experiencing homelessness at or below 30% AMI.

Timeline: The project will be developed in two phases – 87 units in the first phase and 89 units in the second phase. Construction is anticipated to be completed by July 2024. Units are expected to be occupied between August and October 2024.

Mechanisms and Partners: Both phases of the project are a 9% Low-Income Housing Tax Credit transaction. Additionally, the first phase will be funded, in part, with \$2.5 million from the *Development of Affordable Housing* project.

Use of Evidence: Permanent supportive housing has been shown to significantly reduce healthcare and other institutional costs while improving outcomes for households. According to the United States Interagency Council on Homelessness, dozens of studies demonstrate that the costs of delivering permanent supportive housing are offset in large part by reductions in the use of crisis services, including shelters, jails, ambulances, and hospitals. Even tenants with the longest histories of homelessness and most complex needs remain stably housed once connected with supportive housing. Evaluations of supportive housing programs using a Housing First approach generally show housing retention rates between 75% and 85% for single adults and between 80% and 90% for families.⁸⁶

Equity Impact: The mission of Crossroads is helping secure stable homes for individuals and families experiencing homelessness. Through evidence-based Housing First, prioritizing services for households with the greatest needs, as determined through the Coordinated Entry System, Crossroads provides services based on need, regardless of race, ethnicity, or economic standing.

Even with this mission, Crossroads knows that people experiencing homelessness in Rhode Island are disproportionately people of color, as compared to the population of the state. The 2022 Point in Time Count showed that Rhode Island has seen drastic increases in homelessness among minority communities. While 9% of the state’s population identified as African American/Black, with 11% of this population falling below the poverty line, 28% of families and 22% of individuals experiencing homelessness are African American/Black. Similarly, while 16% of the state’s population identified as Hispanic/Latino, with 32% of this population falling below the poverty line, 15% of individuals and 36% of families experiencing homelessness are Hispanic/Latino.⁸⁷

⁸⁶ [Supportive Housing: A Community Solution \(csh.org\)](https://www.csh.org/)

⁸⁷ [2022 RI Point in Time Storybook | Tableau Public](#)

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
U.S. Treasury Required Affordable units built or preserved		0	0
Number of affordable one-bedroom units preserved for households at or below 30% AMI		0	0
Occupancy rate	Percent of total number of units occupied	0	0
Annual turnover rate	Turnover rate for one-bedroom apartments will be at least 5% less than the annual turnover rate for the existing SRO units	18% for The Tower	Not yet applicable

Public Housing Pilot Program

Project Identification Number: 10054

Funding Amount: \$10,000,000

Project Expenditure Category: 2.15 Negative Economic Impacts: Long-term Housing Security: Affordable Housing

Pandemic-related Problem Statement: In recent years, sale and rent prices have increased significantly. Rent for a market-rate, two-bedroom apartment is about \$1,700, up about 8.5% from 2019, when it was \$1,575. The rental vacancy rate and inventory of homes for sale are also at historically low levels. The rental vacancy rate, the number of unoccupied rental units, is 2.8%, down from 3.7% in May 2021, and 6.2% in 2019. A vacancy rate that would not be expected to have an impact on prices is between 6% and 7%.⁸⁸

In many communities, public housing authorities (PHAs) administer subsidized units to serve very low-income residents. Historic disinvestment in PHAs has resulted in deferred maintenance of the physical housing stock. Additionally, PHAs are restricted from putting debt on their properties, removing many forms of financing which could be used to improve the units and/or increase the number of PHA-administered units that can be developed. With proper funding, PHAs can improve their technical ability to conduct redevelopment or construction of new units, investigate how they can leverage their resources

⁸⁸ CoStar Market Analytics

to serve more Rhode Islanders, and engage in meaningful predevelopment work to help ease the shortage of available units.

Project Overview: This program is providing zero-interest loans and grants to PHAs to help increase the supply of affordable housing and stabilize existing affordable housing. These funds are building technical capacity, securing needed predevelopment services, and beginning the process of redevelopment and/or repositioning of existing units.

Of the \$10 million in project funding:

- \$8.1 million is providing development loans to PHAs or nonprofit affiliates to finance the demolition of obsolete housing in conjunction with the construction of net new housing units. Loans may also be used to rehabilitate or reposition existing units and/or create new, subsidized units.
- \$1.25 million is providing predevelopment grants to investigate and assess the feasibility of development projects.
- \$400,000 is financing consultants for PHAs to assist in the evaluation of opportunities to create new units and/or transition their portfolios to a more stable financial model.
- \$200,000 is covering administrative costs.

U.S. Treasury presumes that any housing project that is eligible to be funded under any of the following federal housing programs is an eligible use of State Fiscal Recovery Funds under Negative Economic Impacts:

- National Housing Trust Fund.
- Home Investment Partnerships Program (HOME).
- Low-Income Housing Tax Credit.
- Public Housing Capital Fund.
- Section 202 Supportive Housing for the Elderly Program and Section 811 Supportive Housing for Persons with Developmental Disabilities Program.
- Project-Based Rental Assistance.
- Multifamily Preservation & Revitalization Program.

The *Development of Affordable Housing* project aligns with HOME and the Public Housing Capital Fund.

Timeline: To select eligible projects, Rhode Island Housing (RIHousing) is issuing two rounds of requests for proposals (RFPs), one in June 2023 and one in September 2023.

Mechanisms and Partners: Rhode Island (RIHousing) is the subrecipient for this project. The maximum development loan amount is \$2.5 million per project/\$50,000 per unit. The no-interest loans have 30-year terms. The maximum predevelopment grant amount is \$250,000. The maximum grant amount to retain the services of a consultant is \$50,000.

Use of Evidence: Public housing has been a critical resource for low-income households for over 75 years. It has been especially critical for extremely low-income households, which often includes households experiencing homelessness. Through job loss and/or the inability of wage earners to work due to the pandemic, the demand for affordable rental housing has increased. Increasing the affordable housing stock, as well as preserving the existing stock, is vital to addressing this demand. This program supports the creation of new housing through PHAs by providing funds for technical assistance, predevelopment and construction financing. This program also provides the same resources to assist in preserving existing stock by taking advantage of HUD-sponsored programs that enable the transition of

PHA units to a different housing subsidy program that will put this housing on a more stable financial footing in the long term and result in capital improvements of the existing stock.

Equity Impact: By facilitating the rapid development of affordable housing for low-income people, RIHousing intends to expand housing opportunities for all to make access to housing fair, equitable, and widespread. These funds will be used in conjunction with other federal and state dollars to create homes for all Rhode Islanders, but the portion of the population needing extremely low-income housing is disproportionately households of color. Minority households have lower rates of homeownership, are rent cost burdened at higher rates, and face greater obstacles to being stably housed. This program will help relieve those challenges and expand opportunity to more Rhode Islanders.

According to the National Low Income Housing Coalition, Black, Native American, and Hispanic households are more likely than white households to be extremely low-income renters. In Rhode Island, affordable rental units are primarily occupied by households of color. Across the 2,651 RIHousing-administered HOME Investment Partnership Program units for which race and ethnicity information was available, 83.4% of occupants identified as racial or ethnic minorities, with 46.2% of occupants identifying as Hispanic. Similarly, 94.1% of the 7,001 households residing in LIHTC-financed developments for which demographic data was available identified as racial or ethnic minorities, with 36.8% of occupants identifying as Hispanic. More than half of all households residing in LIHTC-financed housing units were Black or African American (54.7%).⁸⁹

Performance:

Key Performance Indicator	Baseline	Performance-to-date
U.S. Treasury Required Affordable units built or preserved	0	0
Number of technical assistance grants awarded	0	0
Number of predevelopment grants awarded	0	0
Number of development loans awarded	0	0
Additional annual operating subsidy for PHAs	0	Not yet applicable

Homelessness Assistance: Warming Center and Shelter

Project Identification Number: 10045

Funding Amount: \$7,000,000

⁸⁹ RIHousing Program Data

Project Expenditure Category: 2.16 Negative Economic Impacts: Long-term Housing Security: Services for Unhoused Persons

Pandemic-related Problem Statement: Homelessness in Rhode Island increased significantly during the pandemic as documented by the 2021 Rhode Island Point in Time Count, which highlighted substantial increases in homelessness from 2020. Findings included:

- 1,267 people experienced homelessness on January 26, 2021 (a 14% increase from the same date in 2020).
- 869 people were in emergency shelter (a 17% increase).
- 181 people were living outdoors on (a 67% increase).

The 2022 Point in Time Count indicated that Rhode Island continues to see dramatic increases in the number of individuals and families experiencing homelessness. Findings included:

- 1,576 people experienced homelessness on January 26, 2022 (a 24% increase from the same date in 2021).
- 506 family members (adults and children) experienced homelessness (a 7% increase).⁹⁰

Project Overview: The State used \$2 million to operate a warming center at the State-owned Cranston Street Armory from December 7, 2022, through May 15, 2023. The facility provided shelter to individuals experiencing homelessness and allowed for these individuals to receive housing-related services to improve their chances of becoming stably housed. The State provided the remaining \$5 million to nine housing providers to operate shelters and expand capacity.

Timeline: All programs ran through June 30, 2023, except for the Cranston Street Armory (May 15, 2023) and the Newport Mental Health Warming Center (March 25, 2023).

Mechanisms and Partners: The Rhode Island Department of Housing selected organizations, such as Amos House, Crossroads Rhode Island, Open Doors, and Thrive, to operate warming centers and shelters through a letter of interest process.

Use of Evidence: According to The National Alliance to End Homelessness, the five keys to effective emergency shelter are: a Housing First approach, safe and appropriate diversion, immediate and low-barrier access, housing-focused rapid exit services, and data to measure performance.⁹¹ Shelters in Rhode Island are encouraged to adhere to Continuum of Care Standards and Guidelines, which emphasize these five keys as central to ensuring that homelessness “is a rare and brief event.” With training on Housing First and Best Practices and these five keys in place, Rhode Island shelters are using evidence-based interventions to address the homelessness crisis, and this program, which seeks to expand available shelter beds, was also evidence based.

Equity Impact: The intended outcome of this program was to ensure that individuals experiencing homelessness have access to a safe place to stay and appropriate services so that they can move toward finding a more permanent housing situation. As racial and ethnic minorities are disproportionately represented among the homeless population, this program addressed significant disparities experienced by these populations in accessing needed services. The 2022 Point in Time Count showed that Rhode Island has seen drastic increases in homelessness among minority communities. While 9% of the state’s population identified as African American/Black, with 11% of this population falling below the poverty line, 28% of families and 22% of individuals experiencing homelessness are African American/Black.

⁹⁰ [2022 RI Point in Time Storybook | Tableau Public](#)

⁹¹ [Emergency Shelter Learning Series - National Alliance to End Homelessness](#)

Similarly, while 16% of the state’s population identified as Hispanic/Latino, with 32% of this population falling below the poverty line, 15% of individuals and 36% of families experiencing homelessness are Hispanic/Latino.⁹²

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of temporary shelter beds	16 beds for every \$300,000	304
Number of people receiving emergency shelter and supportive services	3.75 people per bed	447
Number of people served by the warming center	CSA	591

Statewide Housing Plan

Project Identification Number: 10032

Funding Amount: \$2,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: In December 2022, the Rhode Island Department of Housing issued a request for proposals to assist the State in the development of the *Statewide Housing Plan*. It is expected that a consultant team will be selected by the end of July 2023 to create an actionable plan that contains the following information:

- Evaluation of existing plans related to housing and homelessness.
- Assessment of current and future housing needs for each municipality and across the spectrum of age and income demographics, and housing typologies, as well as recommendations for metrics to measure success.
- Identification of barriers to housing development, homeownership, affordability, and to preservation of existing affordable housing, and recommendations to address same.
- Identification of the opportunities and means for increased investments toward disproportionately impacted individuals and communities.
- Identification of best practices from other jurisdictions that would contribute to addressing Rhode Island’s housing needs.
- Evaluation of the strengths and weaknesses of the state’s current housing production and preservation delivery system, and provider developer network.
- Evaluation of the strengths and weaknesses of the state’s housing stabilization/homelessness provider network.

⁹² [2022 RI Point in Time Storybook | Tableau Public](#)

- Two-year, five-year, and 10-year goals for housing production and preservation that align with the goals of the Rhode Island 2030 plan.⁹³

Timeline: It is anticipated that the *Statewide Housing Plan* will be completed by the end of September 2023.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Consultant team hired to produce the statewide housing plan	0	1*
Development of statewide housing plan	0	1*

*These are yes/no binary indicators: 0 meaning 'no', 1 meaning 'yes'.

OHCD Support and Capacity

Project Identification Number: 10007

Funding Amount: \$1,500,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: The programs administered by the Rhode Island Department of Housing, Office of Housing and Community Development (OHCD) have been severely understaffed for some time. During the pandemic, additional initiatives have been assigned to the office, adding functions to an already strained staff. This project is allowing OHCD to onboard 13 staff or contract resources to expand and enhance the capacity of the Rhode Island Department of Housing and OHCD in the areas of housing/homelessness.

Timeline: Recruitment for five contracted positions began in February 2022, with training and workplan development in March 2022. Recruitment and hiring activities for the remaining resources is scheduled to continue through the first quarter of State Fiscal Year 2024.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Hiring of contractors		0	8
Hiring of FTE roles		0	0

⁹³ [Homepage \(ri2030.com\)](http://ri2030.com)

Key Performance Indicator	Description	Baseline	Performance-to-date
Increased compliance reviews of subrecipients	Complete six CDBG and six homeless compliance review over six months	0	6
Assessment reports for potential acquisitions for new purchases and provider locations		0	0

Climate

Project	U.S. Treasury Expenditure Category	Planned Expenditures	Expenditures to Date
Port of Davisville	Revenue Replacement: Provision of Government Services	\$65,000,000	\$6,000,000.02
Total		\$65,000,000	\$6,000,000.02

Port of Davisville

Project Identification Number: 10034

Funding Amount: \$65,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: The Quonset Development Corporation (QDC) is making the following infrastructure improvements at the Port of Davisville, which is one of the top auto and frozen seafood ports on the East Coast: reconstructing a portion of Pier 1; constructing the Terminal 5 Pier, including dredging to access the Pier; creating approximately 40 additional acres of cargo laydown space; and creating new access drives and security gate in compliance with federal standards. The Terminal 5 Pier will increase the port's capacity to ship offshore wind turbine components, such as blades, towers, and foundations, while meeting the needs of existing users.

Timeline: The Pier 1 reconstruction is scheduled to completed by June 2024, and the construction of Terminal 5 Pier, dredging, access improvements, and completion of approximately 40 additional acres of cargo laydown space is scheduled to be completed by December 2026.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of berths with a service life of 30 years or greater	2	Not yet applicable
Number of ship arrivals per quarter	40	Not yet applicable
Acres available for cargo laydown	200	Not yet applicable
Short tons of cargo delivered at the port per quarter	87,500	Not yet applicable

Children, Families, and Education

Project	U.S. Treasury Expenditure Category	Planned Expenditures	Expenditures to Date
Child Care Retention Bonuses	Negative Economic Impacts: Aid to Other Impacted Industries	\$37,400,000	\$21,640,135.23
DCYF Workforce Stabilization	Negative Economic Impacts: Aid to Other Impacted Industries	\$22,131,723	\$13,498,439.86
Nonprofit Assistance	Negative Economic Impacts: Assistance to Impacted Nonprofit Organizations	\$20,000,000	\$20,000,000
Early Intervention Provider Relief and Recovery	Public Health: Mental Health Services	\$11,000,000	\$9,549,564.77
Support for Survivors of Domestic Violence	Public Health: Community Violence Interventions	\$10,500,000	\$0
Pediatric Provider Relief and Recovery	Public Health: Other Public Health Services	\$7,500,000	\$7,500,000
Pediatric Provider Relief and Recovery: Phase II	Public Health: Other Public Health Services	\$7,500,000	\$3,711,702.92
Adult Education Providers	Negative Economic Impacts: Assistance to Unemployed or Underemployed Workers	\$5,000,000	\$0
Child Care Enhanced TEACH Program	Revenue Replacement: Provision of Government Services	\$2,000,000	\$2,475
Child Care Workforce Registry	Negative Economic Impacts: Healthy Childhood Environments: Child Care	\$1,000,000	\$0
Child Care Quality Improvements	Negative Economic Impacts: Healthy Childhood Environments: Child Care	\$1,000,000	\$44,188

Project	U.S. Treasury Expenditure Category	Planned Expenditures	Expenditures to Date
DCYF Sign-on Bonuses	Negative Economic Impacts: Aid to Other Impacted Industries	\$789,043	\$386,009.26
Child Care Family Provider Support	Negative Economic Impacts: Business Incubators and Start-Up or Expansion Assistance	\$600,000	\$562,188.24
Total		\$126,420,766	\$76,894,703.28

Child Care Retention Bonuses

Project Identification Number: 10001

Funding Amount: \$37,400,000

Project Expenditure Category: 2.36 Negative Economic Impacts: Aid to Other Impacted Industries

Pandemic-related Problem Statement: According to the U.S. Bureau of Labor’s Quarterly Census of Employment and Wages, the child day care services industry in Rhode Island experienced a 21.6% employment loss from 2019 to 2020.⁹⁴ Nationally, the industry had an average employment loss of 9.8% from early 2020 compared to the fall of 2021.⁹⁵

U.S. Bureau of Labor’s Quarterly Census of Employment and Wages					
Child Day Care Services in Rhode Island					
January 2020	February 2020	March 2020	April 2021	May 2021	June 2021
3,831	3,838	3,812	3,224	3,233	3,338
2020 Q1 Average			2021 Q2 Average		
3,838			3,265		

A National Association for the Education of Young Children survey found that 78% of respondents identified low wages as the main obstacle to recruiting educators, while 81% cited low wages as a key reason for educators to leave. In Rhode Island’s Coronavirus Response and Relief Supplemental Appropriations Act Child Care Stabilization Grant program, 95% of grant recipients used at least 20% of their grant for wage bonuses, demonstrating the need to financially recognize staff and promote retention. The retention of these essential workers impacts nearly every single child care provider in the state by ensuring that centers remain open and serve families at their licensed capacity. Families cannot return to

⁹⁴ U.S. Bureau of Labor Statistics Quarterly Census of Employment and Wages (2019 – 2020)

⁹⁵ U.S. Bureau of Labor Statistics Quarterly Census of Employment and Wages (Jan. 2020 – March 2020, April 2021 – June 2021)

work if there are not enough quality child care options, and child care providers cannot operate at capacity because of employee shortages.

Project Overview: To address these challenges, Rhode Island initially paid \$1,500 semiannual retention bonuses (up to \$3,000 per person) during State Fiscal Year 2022 to all child care staff who had been employed with a provider for at least six consecutive months. The State extended the project for State Fiscal Year 2023, with \$750 quarterly bonuses.

Timeline: The Rhode Island Department of Human Services (DHS) drafted the application and established the application portal in March 2022. The following table shows the application periods for each retention bonus period:

Application Window	Application Period	Eligibility
1	March 18, 2022 – April 22, 2022	Employed for six consecutive months as of December 1, 2021
2	June 1, 2022 – June 30, 2022	Employed for six consecutive months as of June 1, 2022
3	October 1, 2022 – October 31, 2022	Employed for three consecutive months as of September 1, 2022
4	January 1, 2023 – January 31, 2023	Employed for three consecutive months as of December 1, 2022
5	April 1, 2023 – April 30, 2023	Employed for three consecutive months as of March 1, 2023
6	July 1, 2023 – July 31, 2023	Employed for three consecutive months as of June 1, 2023
7	October 1, 2023 – October 31, 2023	Employed for three consecutive months as of September 1, 2023
8	January 1, 2024 – January 31, 2024	Employed for three consecutive months as of December 1, 2023
9	April 1, 2024 – April 30, 2024	Employed for three consecutive months as of March 1, 2024
10	July 1, 2024 – July 31, 2024	Employed for three consecutive months as of July 1, 2024

Mechanisms and Partners: DHS engaged with a fiscal intermediary, Public Consulting Group (PCG), to set up the application portal for child care educators, distribute the funds, and assist with data collection and analysis. The review of applications and payment of bonuses occur on an ongoing basis during the application windows.

Use of Evidence: This project is modeled, in part, on the evidence-informed WAGES Model, which provides pay supplements to early childhood educators every six months as attraction and retention incentives.⁹⁶ Fifteen states have implemented a model like WAGES. To address the unique and pressing

⁹⁶ <http://www.teachecnationalcenter.org/wp-content/uploads/2014/10/WAGE-Overview-2015.pdf>

needs of the pandemic, the *Child Care Retention Bonuses* project provides the same bonus to all eligible educators to expedite payments and simplify the message to the workforce to increase engagement.

Equity Impact: The early childhood workforce is made up primarily of women. By increasing compensation for child care employees, this project is addressing the persistent gender pay equity gaps. Additionally, this workforce shortage impacts women, who are often the primary caretakers of young children and struggle to re-enter the workforce without access to child care. By stabilizing and growing the supply of child care, more women have the opportunity to return to work.

DHS allocated resources for outreach to eligible educators regarding the program. Making the retention bonus amount the same for all workers not only simplified the application process by reducing the amount of paperwork or attestations needed, but also provides a higher pay increase rate for lower-wage earners.

To ensure underserved populations are being reached by the program, all outreach materials, applications, program materials, and the [Funding Opportunities](#) webpage are available in English and Spanish. All application materials are accessible via cellphone or desktop, require no more than 15 minutes, and are free of jargon or technical language. Ninety-seven percent of applicants for the second round of the semiannual retention bonuses responded neutrally or positively to a question regarding the ease of the application process.

DHS works closely with vendors and community partners who have trusted relationships in the field and act as its liaison on all programming. Intensive outreach for the child care worker retention bonus program included:

- Emails to child care programs, potential applicants, vendors, etc.
- All employers and previous grant recipients received direct outreach with updates on the program.
- For the first round of the retention bonus program, the team conducted 1,837 direct contacts.
- When an applicant required additional support, DHS, a vendor, and community partners worked together to provide direct outreach via phone or email, often multiple times, to resolve the issue and provide technical assistance where necessary.

As a result, in the first round of the current retention bonus program, most licensed programs had at least one employee apply.

As of June 30, 2023, the distribution of bonuses by race was:

- White: 69.7%
- Other: 9.0%
- Black or African American: 9.4%
- Preferred not to answer: 6.1%
- Two or more races: 3.1%
- Asian: 1.5%
- American Indian or Alaska Native: 0.8%
- Native Hawaiian or Pacific Islander: 0.4%

In terms of ethnicity, of the 69.7% of recipients who identified as white, 87.2% identified as Not Hispanic or Latino; 10.8% of recipients across all races identified as Hispanic or Latino and 2.0% preferred not to answer. In terms of gender, 92% of recipients identified as female, 7.1% as male, and 0.5% as non-binary. Additionally, 0.4% preferred not to answer.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of unique educators submitting a complete application during the first and second application windows	0	4,463
Number of semi-annual bonuses distributed during the first and second windows	0	6,998
Retention rate for the first and second windows	0	91%
Number of unique educators submitting a complete application for the third through the tenth windows	0	5,011
Number of quarterly bonuses distributed during the third through the tenth application windows	0	12,388
Retention rate for the third through the tenth windows	0	Not yet applicable

DCYF Workforce Stabilization

Project Identification Number: 10005

Funding Amount: \$22,131,732

Project Expenditure Category: 2.36 Negative Economic Impacts: Aid to Other Impacted Industries

Pandemic-related Problem Statement: The Rhode Island Department of Children, Youth and Families (DCYF) works with approximately 34 contractors, many of which are nonprofit agencies, that provide congregate care, foster care, and home- and community-based support for the state’s most vulnerable children and families. The contractors are experiencing crisis-level staffing shortages that severely compromise the availability and quality of care for abused and traumatized children.

DCYF administered a survey in October 2021 that demonstrated the staffing crisis relative to pre-pandemic levels. In March 2020, providers reported 183 vacancies compared to 350 vacancies in October 2021, an increase of 91% and making up over 25% of the total full-time equivalent employees reported. A comparison of DCYF placement capacity from March 2020 to October 2021 showed a reduction in available beds from 343 to 240, a 30% reduction, which is often attributed to the critical staffing shortage among providers.

The consequences for the workforce shortage include children remaining in psychiatric hospitals past medical necessity and children being placed at out-of-state facilities at a greater cost, which makes maintaining family connections and achieving reunification significantly more difficult. Additionally, DCYF's three residential treatment centers limited admissions below their current capacity.

Project Overview: The project provides foster care, congregate care, and home- and community care-based provider staff who earn less than \$75,000 annually with retention payments of up to \$694.50 per full-time equivalent position per month for work done beginning July 1, 2021.

Timeline: DCYF distributed and collected current staffing data from the provider agencies. All individuals within the income requirements and employed at a provider agency as of July 1, 2021, were eligible for retention payments assuming that they were still employed on January 4, 2022. Retroactive payments for work done from July 2021 through December 2021 were made to eligible individuals. Monthly retention payments will be distributed to all staff employed from January 2022 through June 2024.

Mechanisms and Partners: DCYF maintains a close relationship with the foster care, congregate care, and home- and community-based service providers taking part in this program. As a result, DCYF is administering this project, with the providers distributing the retention payments in accordance with an agreement with DCYF. DCYF requires providers to provide demographic, expenditure, and performance data.

Use of Evidence: While this intervention has not been identified as evidence based, the analysis of the key performance indicators will evaluate its effectiveness.

Equity Impact: The staff supporting DCYF's most vulnerable children and youth tend to be women and on the lower end of the economic spectrum. The staff who were targeted with the intervention provide care to some of the most vulnerable children in the state who are historically underserved and marginalized, and the crisis-level staffing shortages severely compromise the availability and quality of care provided.

As of June 30, 2023, the project served 1,728 eligible workers. The following is the racial breakdown of the eligible workers:

- White: 58.3%
- Black or African American: 25%
- Preferred not to answer: 10.2%
- Two or more races: 4.0%
- Asian: 2.0%
- American Indian or Alaska Native: 0.4%
- Native Hawaiian or Pacific Islander: 0.1%

In terms of ethnicity, of the 58.3% of eligible workers who identified as white, 58.7% identified as Not Hispanic or Latino; 14.7% of eligible workers across all races identified as Hispanic or Latino.

In terms of gender, 68.6% of the eligible workers identified as female, 29.9% as male, and 0.3% as non-binary. Additionally, 1.2% preferred not to answer.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Placement availability to support children and youth	Increase in number of placements available in the foster care, congregate care, and home- and community-based services provider agencies	0	41
Retention of existing provider staff	Percentage of current provider agency staff retained from March 2022 to June 2023	0%	96.91%
Net increase in provider staff	Number of new hires and departures per month	0	131
Number of workers served	Cumulative number of staff receiving some level of wage stabilization payment	0	1,728

Nonprofit Assistance

Project Identification Number: 10026

Funding Amount: \$20,000,000

Project Expenditure Category: 2.34 Negative Economic Impacts: Assistance to Impacted Nonprofit Organizations

Pandemic-related Problem Statement: A survey administered to nonprofit organizations by the Rhode Island Foundation (RI Foundation) in March 2020 found that most nonprofits experienced direct revenue loss due to cuts in direct programming or payment by clients, or through the loss of reimbursement for services provided through contracts. In September 2021, the Grantmakers Council of Rhode Island conducted a survey to understand the challenges facing nonprofit organizations and the communities they serve. Key findings included:

- 75% of respondents started new programs in response to the pandemic, yet 73% did not reduce pre-pandemic programming.
- 59% of respondents believed that demand for their services would continue increasing as government relief programs ended.
- The most pressing challenges were financial (64%), staffing (55%), and organizational capacity (53%).⁹⁷

Project Overview: RI Foundation is providing general operating grants, ranging from \$50,000 to \$150,000, to approximately 250 nonprofit organizations that are working to address food insecurity, housing instability and homelessness prevention, and behavioral health needs. Applicants must be a 501(c)(3) nonprofit organization in Rhode Island or have a fiscal sponsor/agent. Nonprofit hospitals, educational institutions, and foundations are ineligible.

Timeline: Applications were accepted in November 2022. Eligible nonprofits received one grant.

Mechanisms and Partners: Applications were submitted to RI Foundation through an online portal. Applicants had to attest that they were negatively impacted by the pandemic through revenue loss, staffing shortages, increased costs, etc. RI Foundation staff reviewed the applications and made funding recommendations to be reviewed and approved by RI Foundation leadership.

Use of Evidence: The project provided operating grants to nonprofits, which are shown to be a best practice. Unrestricted funding, also referred to as general operating support or flexible funding, is financial support that a nonprofit can use to support their mission any way they see fit. The Trust Based Philanthropy project identifies the following benefits of unrestricted funding: it supports the stability of grantee organizations; it encourages emergent action, innovation, and creativity instead of sticking to proposal outcomes that may become outdated; and it supports grantees’ long-term planning by allowing them to project resources and make strategic investments to meet emerging needs.⁹⁸

Equity Impact: The project prioritized support for nonprofits operating in qualified census tracts (QCTs), which are locations where at least 50% of households have an income below 60% area median income (AMI). In Rhode Island, there are 51 QCTs primarily located in urban areas and are home to approximately 218,000 individuals.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
U.S. Treasury Required Number of nonprofits served	0	240
Percentage of nonprofits given grants to address	0	20.8%

⁹⁷ [Survey Highlights with Additional Info.pdf - Google Drive](#)

⁹⁸ <http://trustbasedphilanthropy.org>

Key Performance Indicator	Baseline	Performance-to-date
behavioral health needs		
Percentage of nonprofits given grants to address food insecurity	0	22.1%
Percentage of nonprofits given grants to address housing instability and homelessness prevention	0	10%
Percentage of nonprofits given grants that address more than one of the three areas of need	0	47.1%
Total dollars awarded to nonprofits operating in QCTs	0	47.5%
Number of nonprofits awarded grants that end their fiscal year with a budget surplus	0	Not yet applicable
Number of grant recipients who report decreased challenges in covering payroll, rent or mortgage, and other operating costs	0	Not yet applicable
Percentage of grant recipients that continue operations for the full duration of the award period	0	Not yet applicable

Early Intervention Provider Relief and Recovery

Project Identification Number: 10003

Funding Amount: \$11,000,000

Project Expenditure Category: 1.10 Public Health: Mental Health Services

Pandemic-related Problem Statement: The Early Intervention (EI) Part C program of the Individuals with Disabilities Act provides crucial services to Rhode Island families with children experiencing developmental delays or medical conditions associated with developmental delays. During the pandemic, all nine EI providers in Rhode Island struggled to accept direct referrals due to significant staffing shortages. The State’s EI system was serving 87% of typical referrals, meaning that since March 2020, over 1,100 families who may have been eligible for EI services were never referred.

The families enrolled in EI services before this project received fewer service hours per month (an average of 2.87 hours) than in Fiscal Year 2019 (3.31 hours) and disengaged in EI services at a higher rate (31% as compared to 25% in FY 2019). This led to declines in billing for these programs, creating financial solvency concerns in addition to the decrease in critical services for Rhode Island children. The EI system needed 54 additional workers to meet the typical capacity to serve the number of families in Rhode Island in need of EI services.

An October 2020 *Pediatrics* article reported on a national survey of parents with children under the age of 18 and found that since March 2020, 27% of parents reported worsening mental health for themselves, and 14% reported worsening behavioral health for their children.⁹⁹

Project Overview: The Executive Office of Health and Human Services (EOHHS) is providing stabilization grants totaling \$5.2 million to all nine EI providers. The grant amount was calculated based on the size of the population served by each provider, in accordance with EOHHS’s survey noted in the prior section. Eligible uses for the stabilization grant included, but were not limited to, enhanced outreach activities to ensure equitable access and family engagement in EI services; retention bonuses for staff; workforce costs due to labor market conditions; professional development activities; and costs required to increase in-person visits.

EOHHS developed a pay-for-performance model to incentivize providers to increase service activity. A total of \$5.8 million is available in bonus payments based on EI providers meeting targets, such as recovering referral and staffing figures to 2019 levels, increasing the percentage of children referred to EI who completed the eligibility process and engaged in services, and reducing disproportionality for families with Medicaid coverage and families of color.

Timeline: EOHHS developed, distributed, and approved the applications to EI providers in mid-March 2022. Stabilization grants were distributed once applications were approved, with the last grants distributed by the end of March 2022. Once they received their grants, EI providers developed an individualized performance plan with EOHHS, through which performance is tracked monthly. Providers received a performance grant at the end of each quarter (June 2022, September 2022, and December 2022) if they met certain identified targets.

EOHHS provided an additional stabilization grant to all nine EI providers in March 2023. The grant amount was calculated based on the size of the population served by each provider, in accordance with EOHHS’s survey noted in the prior section. An additional pay-for-performance bonus was provided in June 2023, and two more are scheduled in September 2023 and December 2023.

⁹⁹ <https://pediatrics.aappublications.org/content/146/4/e2020016824>

Mechanisms and Partners: The project is overseen by EOHHS, which is partnering with the State’s nine EI providers.

Use of Evidence: EI is federally required as part of the Individuals with Disabilities Act to address the developmental and behavioral needs of children.

- The National Early Intervention Longitudinal Study Special Education and Part C Programs tracked children with a developmental delay and found 46% did not need special education by the time they reached kindergarten due to EI services.
- Studies found that children who participate in high-quality EI/early childhood development programs tend to have less need for special education and other remedial work, greater language abilities, improved nutrition and health, and experienced less child abuse and neglect.

Rhode Island is nationally recognized for implementing a high-quality EI model that delivers services through a caregiver coaching model in natural settings for children (i.e., the home or a care setting), which is the best practice.

Equity Impact: Medicaid-enrolled children represent 57% of the EI referral population, yet they represent 72% of the children referred but never enrolled. Similarly, Hispanic children represent 33% of the EI referral population, yet they represent over 41% of the children referred but never enrolled (as of SFY 2021).

Medicaid-enrolled children represent 57% of the discharge population, yet they represent 76% of the children who started services and disengage due to either lost contact or family withdrawal. Similarly, Hispanic children represent 33% of the discharge population, yet they represent 42% of the children who started services and disengaged due to either lost contact or family withdrawal (as of SFY 2021).

Additionally, programmatic data shows that among children enrolled in EI, Hispanic and Black children are disproportionately exiting the program without meeting outcomes relative to the distribution by race/ethnicity of children enrolled in the program.

To address these disparities, the pay-for-performance portion of this plan is designed to promote engagement in and retainment of services. While this goal applies to the overall EI population, the project sets a goal that the disproportionalities mentioned above are brought within 3% of the overall population; this is the standard of the U.S. Department of Education Office of Special Education and Rehabilitative Services. This standard is used when analyzing state EI data regarding representativeness and disproportionalities.

Performance: As part of the pay-for-performance bonus agreement, EI providers submitted individualized performance plans with specific benchmarks.

Key Performance Indicator	Description	Baseline	Performance-to-date
Referrals	Increase referrals to 100% of calendar year 2019 numbers	4,176 in calendar year 2019	110.06%

Key Performance Indicator	Description	Baseline	Performance-to-date
Staffing capacity	Increase staffing capacity to calendar year 2019 numbers	242	29
Eligibility process completion	Increase the percentage of children referred to EI who complete the eligibility process	Fiscal Year 2021: 67%	78.99%
Disengagement in services	Of the children who fully enroll in EI services, decrease the percentage of children who disengage with EI services before program completion	Fiscal Year 2021: 31%	18.74%

Support for Survivors of Domestic Violence

Project Identification Number: 10033

Funding Amount: \$10,500,000

Project Expenditure Category: 1.11 Public Health: Community Violence Interventions

Pandemic-related Problem Statement: The pandemic impacted nonprofits' capacity to provide services to victims of domestic violence and sexual assault because of reduced fundraising opportunities, higher costs, reduced staffing, and increased demand. Annual reports by the Rhode Island Coalition Against Domestic Violence show a decline in services provided by its member agencies from 2019 to 2020, with 10,134 victims served in 2019 and 9,259 in 2020, a reduction of 9%. This decrease occurred while there was an increase in demand. Domestic violence calls to the Rhode Island Victims of Crime Helpline in July 2020 and August 2020 increased year over year by 93.7% and 69.5%, respectively.

On September 9, 2021, 80% of identified Rhode Island domestic violence programs participated in a national count of services conducted by the National Network to End Domestic Violence. In all, 493 victims received services, including emergency shelter, transitional housing, other housing services, counseling, legal advocacy, and support groups. Victims made 61 requests for services that the programs could not provide because they lacked the resources. Of the 61 unmet requests, 93% were for housing and emergency shelter.¹⁰⁰

Project Overview: The funding is being distributed to nonprofits whose primary mission is providing services to adult and youth survivors of domestic violence and sexual abuse. The Rhode Island

¹⁰⁰ [16th Annual Domestic Violence Counts Rhode Island Summary](#)

Department of Public Safety (DPS) issued a request for proposals (RFP) for programs to apply for funding by describing their specialized skills, experience providing services, and plans to use the funding to expand clinical and mental health services and/or access to temporary and long-term housing.

Timeline: DPS expects to distribute funds in November 2023 to programs selected through the RFP process. Additional disbursements are expected to be made from July through September in 2024 and 2025.

Mechanisms and Partners: DPS is publishing the RFP, evaluating program submissions, and awarding funding based on the strength of the proposals and program needs.

Use of Evidence: Studies have shown that government-directed funding to community nonprofits can contribute to improved delivery of services.¹⁰¹

Equity Impact: According to the National Crime Victimization Survey, between 2003 and 2012, individuals who identified as Black/African/African American had the highest rate of intimate partner violence (4.7 per 1,000) compared to whites (3.9 per 1,000) and Hispanics (2.3 per 1,000). Additionally, women are disproportionately the victims of domestic violence, according to data from the National Coalition Against Domestic Violence.¹⁰²

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Number of victims of domestic violence and sexual assault receiving services by program nonprofits		13,699 in calendar year 2021	0
Number of victims of domestic violence and sexual assault receiving housing assistance	Individuals placed in temporary shelters and/or transitional housing units	884	0
Number of victims of domestic violence and sexual assault receiving clinical/mental health services		1,571	0
Percentage increase in victims receiving housing assistance		0	0

¹⁰¹ [Best Practices – Fact or Myth? New Research Challenges Conventions in Nonprofit Management](#)

¹⁰² [National Statistics Domestic Violence Fact Sheet](#)

Key Performance Indicator	Description	Baseline	Performance-to-date
Percentage increase in victims receiving clinical/mental health services		0	0

Pediatric Provider Relief and Recovery

Project Identification Number: 10004

Funding Amount: \$7,500,000

Project Expenditure Category: 1.14 Public Health: Other Public Health Services

Pandemic-related Problem Statement: Healthy child development and infant/child mental health are essential to positive academic and health outcomes. Throughout the public health emergency (PHE), many children and their families with behavioral health conditions and related developmental delays were unable to access services and family supports. Early data demonstrated the significant negative impacts on child development and early childhood mental health.

According to a *Journal of the American Medical Association* article, “The COVID-19 pandemic may worsen existing mental health problems and lead to more cases among children and adolescents because of the unique combination of the public health crisis, social isolation, and economic recession.”¹⁰³ Furthermore, COVID-19 threatens the healthcare system’s ability to effectively screen for and identify behavioral health needs that cause and/or co-occur with developmental delays to initiate referrals for critical services, such as Early Intervention (EI), Family Home Visiting, and Early Childhood Special Education.

Children in Rhode Island experienced delayed healthcare and developmental supports and were exposed to trauma due to the PHE, which could have a devastating long-term impact on development. Addressing the delayed access to supports and services is critical so that children enter the education system ready to learn.

The project builds on the successful Coronavirus Aid, Relief, and Economic Security Act-funded Pediatric Relief Programs to address the critical gap in preventative care that is harming children in Rhode Island, particularly publicly insured children. As a result of the funding, Rhode Island children will catch up on critical preventative care, such as vaccines and crucial developmental screenings.

Project Overview: The project provided payments to pediatric and family practice primary care providers who serve Medicaid-covered children. The first phase of the project was part of Rhode Island Rebounds and had two components:

Grants for Reporting and Performance on Child and Adolescent Well Visits, \$6,000,000: These funds created an incentive for pediatric primary care providers to improve access to care and drive investment into their practices. Support was necessary for staffing and infrastructure to rebound from COVID-19-related delays in care. Payments were contingent on practices reporting baseline data and either meeting targets or demonstrating measurable improvement in the Child and Adolescent Well Care Visit measure. The Rhode Island Executive Office of Health and Human Services (EOHHS) tracked additional measures

¹⁰³ <https://jamanetwork.com/journals/jamapediatrics/fullarticle/2764730>

related to immunizations, including COVID-19 immunizations, and lead screening rates, which are expected to be closely tied to performance on the Child and Adolescent Well Care Visit measure.

Grants for Participation in Technical Assistance Activities to Enhance Efforts to Conduct Developmental, Psychosocial, and Behavioral Health Screenings, \$1,266,993: EOHHS provided an additional round of grants to pediatric and family practice primary care providers who participated in the technical assistance outlined below. These performance grants were a meaningful incentive for providers to adopt new training and workflow designs to screen children for healthy physical, cognitive, and socio-emotional development. These grants were distributed to providers who engaged with the technical assistance vendor, Care Transformation Collaborative of Rhode Island (CTC).

Technical Assistance, \$233,008: The funds supported CTC to support training and workflow redesign, data collection and reporting, and best practice sharing to aid providers in improving performance. In addition, these funds supported CTC in evaluating practice performance.

As of June 30, 2022, 100% of providers engaged with CTC. According to the evaluation results as of June 7, 2022, 98.1% of respondents reported that the sessions were good (17.5%) or excellent (80.6%), and 46.9% (75 individuals) suggested that they were interested in customized psychosocial/behavioral health technical assistance.

Timeline: EOHHS engaged CTC in early March 2022. Applications were posted in mid-March 2022, with the first round of stabilization grants provided at the end of March 2022. Grant payments based on reporting and performance on the Child and Adolescent Well Care Visit measure were made on the following schedule: one in March 2022, one in April 2022, and one in July 2022. CTC began to engage providers in March 2022. The bonuses paid to providers who engaged with CTC were issued at the end of June 2022.

Mechanisms and Partners: EOHHS engaged CTC for the technical assistance portion of the project. EOHHS engaged with the pediatric and family practice primary care providers to manage and disburse funds.

Use of Evidence: The program builds on Rhode Island's decade-plus investment in Person-Centered Medical Homes for Children (PCMH Kids). PCMH Kids is a national practice model supported by the American Academy of Pediatrics (AAP) and the National Committee on Quality Assurance to ensure that children have comprehensive primary care.¹⁰⁴ Through investments by EOHHS and the Rhode Island Department of Health (RIDOH), about 80% of practices in the state are PCMH Kids practices. Additionally, pediatric screening is an established evidence-based practice. The AAP supports screening tools and practices that EOHHS used in this program.

Equity Impact: Equity is at the heart of the program by placing children on a path toward healthy development, mental health, and school readiness. There are racial and ethnic disparities in rates of children who receive screening and childhood immunizations in Rhode Island. This is likely driven by disparate use of pediatric primary care services more broadly, which threatens to widen disparities in identification of early developmental/mental health risks and referral to follow-up services. EOHHS is stratifying measures by race and ethnicity (where applicable) to understand the project's impact on closing disparities and tracking progress on the metrics across all races and ethnicities.

¹⁰⁴ <https://publications.aap.org/pediatrics/article/145/1/e20193449/36971/Promoting-Optimal-Development-Identifying-Infants>

EOHHS maintains a list of every pediatric provider that provides services to Medicaid-covered children, along with contact information. EOHHS notified all providers that they were eligible. EOHHS also worked with the AAP and other local pediatric community stakeholders to publicize the project.

Performance:

Key Performance Indicator	Description	Baseline	Goal	Final Performance
Child and adolescent well visit	Practice performance on the HEDIS Child and Adolescent (ages 3-17) Well Care Visit measure	CY 2019: 73.2% of children ages 3-17 in these practices received at least one well-care visit	June 2022: 78%	March 2022: 78% June 2022: 79%
Childhood vaccinations	Percentage of children eligible to enter kindergarten on August 31, 2022 meeting kindergarten immunization requirements (KidsNet Data)	December 2021: 73.6%	June 2022: 85% August 2022: 87%	March 2022: 74% April 2022: 75% May 2022: 78% June 2022: 79% July 2022: 80% August 2022: 81%
COVID-19 vaccinations	Percentage of Medicaid-covered children ages 5-11 vaccinated against COVID-19	January 2022: 14.8%	June 2022: 20% August 2022: 25%	March 2022: 23% April 2022: 25% May 2022: 26% June 2022: 26% July 2022: 27% August 2022: 27%
Technical assistance participation	Percentage of providers participating in technical assistance to stand up developmental, psychosocial, and behavioral health screenings	0%	June 2022: 50% August 2022: 70%	April 2022: 89% May 2022: 100% June 2022: 100% July 2022: 100% August 2022: 100%
Lead screenings administered	Percentage of children between 12 and 24 months, with at least one lead screening (KidsNet data)	December 2021: 72.7%	June 2022: 80% August 2022: 83%	March 2022: 73% April 2022: 75% May 2022: 77% June 2022: 78% July 2022: 78% August 2022: 79%

Pediatric Provider Relief and Recovery: Phase II

Project Identification Number: 10031

Funding Amount: \$7,500,000

Project Expenditure Category: 1.14 Public Health: Other Public Health Services

Pandemic-related Problem Statement: Healthy child development and infant/child mental health are essential to positive academic and health outcomes. Throughout the public health emergency (PHE), many children and their families with behavioral health conditions and related developmental delays were unable to access services and family supports. Early data demonstrated the significant negative impacts on child development and early childhood mental health.

According to a *Journal of the American Medical Association* article, “The COVID-19 pandemic may worsen existing mental health problems and lead to more cases among children and adolescents because of the unique combination of the public health crisis, social isolation, and economic recession.”¹⁰⁵ Furthermore, COVID-19 threatens the healthcare system’s ability to effectively screen for and identify behavioral health needs that cause and/or co-occur with developmental delays to initiate referrals for critical services, such as Early Intervention (EI), Family Home Visiting, and Early Childhood Special Education.

Children in Rhode Island experienced delayed healthcare and developmental supports and were exposed to trauma due to the PHE, which could have a devastating long-term impact on development. Addressing the delayed access to supports and services is critical so that children enter the education system ready to learn.

The project builds on the successful Coronavirus Aid, Relief, and Economic Security (CARES) Act-funded Pediatric Relief Programs to address the critical gap in preventative care that is harming children in Rhode Island, particularly publicly insured children. As a result of the funding, Rhode Island children will catch up on critical preventative care, such as vaccines and crucial developmental screenings.

Project Overview: The project is continuing to incentivize pediatric primary care providers to improve access to care, immunizations, and screenings, and invest in primary care practices to support the staffing and infrastructure necessary to rebound from pandemic-related delays in care. The Rhode Island Executive Office of Health and Human Services (EOHHS) is making six payments to participating practices:

- The first payment is based on the submission of the program application, including a practice improvement plan and a commitment to participate in the technical assistance program.
- Four quarterly payments are contingent on practices’ performance on several vaccine and screening measures.
- One payment is based on participation in the program’s robust learning component, a six-session Behavioral Health Learning Initiative. The learning initiative took place from January 2023 through June 2023.

Some funds support a technical assistance contractor tasked with training and workflow redesign, data collection and reporting, and best practice sharing to aid providers in successfully improving performance, as well as evaluating practice performance. The contractor is providing the quality improvement practice facilitation and implementing the Behavioral Health Learning Initiative. Practices have access to a customized behavioral health practice facilitator as an optional service to assist with the development of responses to behavioral health needs.

Timeline: The first payment for applying to the program and committing to participate in the technical assistance program was made in October 2022. Quarterly payments were made in January 2023 and April 2023, and two more are scheduled for July 2023 and October 2023. The payment contingent on participating in the six-session Behavioral Health Learning Initiative was scheduled for July 2023.

¹⁰⁵ <https://jamanetwork.com/journals/jamapediatrics/fullarticle/2764730>

Mechanisms and Partners: EOHHS engaged Care Transformation Collaborative of Rhode Island (CTC) for the technical assistance portion of the project. EOHHS engaged with the pediatric and family practice primary care providers to manage and disburse funds.

Use of Evidence: The program builds on Rhode Island’s decade-plus investment in Person-Centered Medical Homes for Children (PCMH Kids). PCMH Kids is a national practice model supported by the American Academy of Pediatrics (AAP) and the National Committee on Quality Assurance to ensure that children have comprehensive primary care.¹⁰⁶ Through investments by EOHHS and the Rhode Island Department of Health (RIDOH), about 80% of practices in the state are PCMH Kids practices. Additionally, pediatric screening is an established evidence-based practice. The AAP supports screening tools and practices that EOHHS is proposing in this program.

In 2022, the *Pediatric Provider Relief and Recovery* project provided another round of payments to pediatric and family medicine practices to catch up Rhode Island children on critical preventative care, including vaccinations and crucial developmental screenings. Payments were contingent on practices meeting well-child visit targets or demonstrating improvement. Each of the 44 practices enrolled in the program met the April 2022 and July 2022 targets or improvement targets, resulting in 38,000 Medicaid-covered children receiving well-child visits from July 1, 2021, through June 30, 2022. In addition, each of the 44 practices participated in learning sessions related to developmental, psychosocial, and behavioral health screening.

Equity Impact: Equity is at the heart of the program by placing children on a path toward healthy development, mental health, and school readiness. There are racial and ethnic disparities in rates of children who receive screening and childhood immunizations in Rhode Island. This is likely driven by disparate use of pediatric primary care services more broadly, which threatens to widen disparities in identification of early developmental/mental health risks and referral to follow-up services. EOHHS is stratifying measures by race and ethnicity (where applicable) to understand the project’s impact on closing disparities and tracking progress on the metrics across all races and ethnicities.

EOHHS maintains a list of every pediatric provider that provides services to Medicaid-covered children, along with contact information. EOHHS notified all providers that they were eligible. EOHHS also worked with the AAP and other local pediatric community stakeholders to publicize the project.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Share of practices enrolled in ECHO	Practices are incentivized to increase psychosocial behavioral screenings through participation in this program	0	100%

¹⁰⁶ <https://publications.aap.org/pediatrics/article/145/1/e20193449/36971/Promoting-Optimal-Development-Identifying-Infants>

Key Performance Indicator	Description	Baseline	Performance-to-date
Share of practices participating in four of six ECHO sessions	Practices are incentivized to increase psychosocial behavioral screenings through participation in this program	0	100%
Kindergarten vaccine readiness	Percentage of children eligible to enter kindergarten on August 31, 2023, who meet immunization requirements	August 2021: 81.2%	92%
7 th grade vaccine readiness	Percentage of children eligible to enter 7 th grade on August 31, 2023, who meet immunization requirements	August 2021: 59.6%	75%
One lead screening by 24 months of age		September 2021: 79.5%	89%
Two lead screenings by 36 months of age		September 2021: 59.6%	65%

Adult Education Providers

Project Identification Number: 10058

Funding Amount: \$5,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: Rhode Island’s publicly funded network of 19 Adult Education providers delivers high-quality services that support adults in reaching their diverse college and career goals, including high school equivalency preparation, English for Speakers of Other Languages, digital literacy skills development, and workforce preparation and training, including Integrated Education and Training (IET). IET is a nationally recognized workforce development model shown to accelerate successful completion of sectoral job training by adults with foundational skill gaps. Specifically, the project will fund:

- Direct grants to create regional hubs to streamline access to services statewide and facilitate knowledge transfer.
- Direct grants to purchase devices and software to support the integration of digital literacy and use of eTests statewide.
- Direct grants for the expansion of Adult Education services statewide.

- Temporary increased capacity of the Rhode Island Department of Education (RIDE) to oversee implementation, ongoing evaluation, and strategic planning of the project.
- Third-party evaluation to identify service gaps and ensure regional equity.
- Third-party marketing and outreach campaign in multiple languages.

The Adult Education providers will apply for these direct grants, and the Rhode Island Department of Elementary and Secondary Education (RIDE) will review proposals and award grants.

Timeline: RIDE will hire a new full-time employee by September 2023 with outreach campaigns beginning that same quarter. These expenditures are anticipated to remain steady through the remainder of the project. Using a reimbursement model, the three direct grant programs will begin in State Fiscal Year 2024. The Digital Literacy Grants will wrap up in State Fiscal year 2025, and *Regional Referral Hub Grants* and *Expansion of Core Services Grants* will end in State Fiscal Year 2026.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of participants who receive orientation, assessment, and referral services	5,000 annually	0
Number of participants who enroll with 12 or more hours	3,900 annually	0
Number of enrolled participants who demonstrate a measurable skill gain	1,350 annually	0
Number of enrolled participants who demonstrate a digital literacy skill gain	650 annually	0
Number of exited participants who are employed in the second quarter after exit	1,200 annually	0

Child Care Enhanced TEACH Program

Project Identification Number: 10053

Funding Amount: \$2,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: The funds are supporting the TEACH Early Childhood RI (TEACH) program that helps child care businesses implement best practices, reduce staff turnover, onboard staff, and continue to

provide high-quality early child care and education. TEACH provides access to a higher-education curriculum on the academic, social, and cognitive skills that develop from birth through school age. It has a track record of supporting the incumbent workforce by funding their credential attainment and, in turn, increasing earnings and reducing turnover. The funds are supporting the research and development of new TEACH models tailored to meet the needs of the provider and scholar and allowing the program to expand options and incentives to increase enrollment.

Timeline: The program started in April 2023 and will end in March 2026.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of new scholars in the TEACH program	107	7
Number of new sponsoring programs	62	67
Additional training and/or degree pathways	5	Not yet applicable

Child Care Workforce Registry

Project Identification Number: 10038

Funding Amount: \$1,000,000

Project Expenditure Category: 2.11 Negative Economic Impacts: Healthy Childhood Environments: Child Care

Pandemic-related Problem Statement: The pandemic has had a devastating effect on the child care industry, resulting in a significant reduction in available child care seats. The child day care services industry in Rhode Island experienced a 14.9% employment loss (9.8% loss nationally) from the first quarter of 2020 to the second quarter of 2021. This affects families who face immense pressure to re-evaluate how to meet their child care needs. Faced with this burden, families are having to make tough decisions regarding their employment situation.

Without a child care workforce registry, the Rhode Island Department of Human Services (DHS) is unable to regularly assess the state of the early learning workforce in terms of credentialing, turnover, retention, and compensation, or capture aggregate information about gaps and opportunities for workforce development. DHS is unable to regularly communicate with the early learning workforce about workforce development opportunities, compensation programs, etc. Much of DHS' staff time has been devoted to the manual collection of data rather than monitoring and structuring policies targeted at improving the sector.

Project Overview: DHS is creating a workforce registry to better serve providers by targeting interventions to the workforce's needs. Child care employees will be required to use the registry within six months of its launch. Having an accurate list of past and present educators will allow the State to survey educators on the working conditions in child care facilities and tailor policies to address these

conditions and reduce staff turnover. The improvements that will be made in the child care workforce will benefit children and families.

Timeline: Through a request for proposals (RFP) process, the State will contract with a vendor by July 2023. The vendor will provide a registry for testing purposes by November 2023. After user testing, the vendor will make any necessary revisions to the platform, and it is expected to launch in January 2024.

Mechanisms and Partners: The State will work with a contracted vendor to design the child care workforce registry and develop a cloud-based platform to house it. Promoting workforce participation among early educators will require significant and ongoing outreach to licensed programs who will act as the liaisons to their educators. DHS will use the personal data gathered from the *Child Care Retention Bonuses* project to input current educator profile data.

Use of Evidence: A 2016 study found that Early Childhood Education registry data can inform training needs and opportunities for the child care sector.¹⁰⁷ Further, many large states have implemented workforce registries to collect large-scale data, communicate with the workforce, and directly disburse workforce stipends, especially during the pandemic.

Equity Impact: The early child care workforce is comprised of 92% women. As of June 30, 2023, educators who identified as Black or African American made up 9.4% of those who received Child Care Retention Bonuses, and 10.8% identify as Hispanic or Latino.¹⁰⁸ This program will increase communication to this workforce about opportunities to increase professional development, credentials, and any ongoing and future compensation benefits.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
U.S. Treasury Required Number of children served by child care and early learning (pre-school/pre-K/ages 3-5)	20,240	0
Launch of workforce registry	0	Not yet applicable
Number of educators with complete profiles	0	Not yet applicable
Percentage of licensed programs with employee participation	0	Not yet applicable
Percentage of licensed programs	0	Not yet applicable

¹⁰⁷ [Using State Early Care and Education Workforce Registry Data to Inform Training-Related Questions: Issues to Consider](#)

¹⁰⁸ [Rhode Island PDG B-5 Workforce Needs Assessment Final Report](#)

Key Performance Indicator	Baseline	Performance-to-date
reporting 80% employee participation		

Child Care Quality Improvements

Project Identification Number: 10055

Funding Amount: \$1,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: The project will increase the Rhode Island Association for Education of Young Children’s (RIAEYC) capacity to focus on improving the environmental rating scale (ERS) scores for child care providers. ERS scores are tied to improved quality interactions and environments for children, while also increasing reimbursement rates for participating programs. The project will add three contracted positions (two navigators and one assessment staff) within RIAEYC to be able to enroll 150 new participants into the LearnERS cohort. LearnERS is a series of modules and professional development for educators to address quality improvement.

The project will also provide additional operating support to RIAEYC, including additional licenses for LearnERS software, stipends to enrolled child care staff to incentivize participation, materials early learning educators need to meet ERS evaluations, travel costs for the navigators, and consultants to administer ERS assessments. Using the LearnERS model and a similar model developed by BrightStars for school-age programs, participating providers will be selected to join cohorts of 10 to 12 participants who have identified the same areas of improvement through an ERS pre-assessment.

This project will work in concert with the other child care investments, such as tailored technical assistance for early learning programs to increase BrightStars ratings and data system and workforce development initiatives, to maximize the targeted technical assistance and financial support available to providers.

Timeline: The project started in April 2023 and will end in June 2025.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of participants enrolled in professional development cohorts	43	10
Percentage of participants who have improved their ERS score	0%	0%

DCYF Sign-on Bonuses

Project Identification Number: 10006

Funding Amount: \$789,043

Project Expenditure Category: 2.36 Aid to Other Impacted Industries

Pandemic-related Problem Statement: According to an August 2021 report from the Rhode Island Coalition for Children and Families, organizations are experiencing a 31% job vacancy rate overall, with a 36% vacancy rate in direct care positions and 25% vacancy rate in supervisory and clinical positions. These vacancy rates far exceed the national best practice rate of 10% and are considered unsustainable. A total of 75% of responding residential agencies and 38% of community-based agencies indicated that they have capped or reduced the census of youth they are able to serve because of staffing.

Capped or reduced capacity threatens the youth in the Rhode Island Department of Children, Youth, and Family (DCYF) custody and threatens DCYF's ability to fulfill its legislative mandate. Respondents indicated that residential programs are operating at 55% of contracted capacity, while community-based programs are operating at 64% capacity. Budgeting is based on 80% to 90% capacity, with variation among programs. Data shows that community-based agencies vacancies on average for 11.3 weeks, which indicates that there are not enough viable candidates for the pay community-based agencies can offer.

DCYF administered a survey in October 2021 that demonstrated the staffing crisis relative to pre-pandemic levels. In March 2020, providers reported 183 vacancies in comparison to 350 vacancies in October 2021, an increase of 91% and comprises over 25% of the total full-time equivalents reported.

Project Overview: DCYF worked with providers to offer a \$750 sign-on bonus contingent upon completion of 90 days of employment. The goal was to incentivize individuals to apply for employment so that providers were able to overcome the staffing shortages.

Timeline: The sign-on bonuses were offered to all new hires with a start date between January 4, 2022, and June 30, 2023. The 90-day retention tracking will continue through September 30, 2023. The first bonuses collected in calendar year 2023 were linked to new employees hired as of October 1, 2022. Additional funds were appropriated to this project in the State Fiscal Year 2024 that will extend this timeline.

Mechanisms and Partners: DCYF maintains a close relationship with the foster care, congregate care, and home- and community-based service providers who took part in this program. DCYF provided grants to the providers who then distributed the sign-on bonuses according to the agreement with DCYF. DCYF required providers to provide demographic, expenditure, and performance data.

Use of Evidence: While this intervention has not been identified as evidence based, the analysis of the key performance indicators will evaluate its effectiveness.

Equity Impact: The staff supporting DCYF's most vulnerable children and youth tend to be women and on the lower end of the economic spectrum. The staff targeted for the intervention provide care to some of the most vulnerable children in the state who are historically underserved and marginalized, and the crisis-level staffing shortages severely compromised the availability and quality of care provided.

As of June 30, 2023, the project has served 478 eligible workers. The following is the racial breakdown of the eligible workers:

- White: 53%
- Black or African American: 27.3%
- Preferred not to answer: 11.2%
- Two or more races: 5.5%

- Asian: 2.3%
- American Indian or Alaska Native: 0.5%
- Native Hawaiian or Other Pacific Islander: 0.2%

In terms of ethnicity, of the 53% of eligible workers who identified as white, 61% identified as Not Hispanic or Latino; 15.8% of eligible workers across all races identified as Hispanic or Latino.

In terms of gender, 68.8% of the eligible workers identified as female and 28.9% as male, 0.7% as non-binary, and 1.6% preferred not to answer.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of bonuses offered	0	681
Number of bonuses collected	0	478

Child Care Family Provider Support

Project Identification Number: 10002

Funding Amount: \$600,000

Project Expenditure Category: 2.32 Negative Economic Impacts: Business Incubators and Start-Up or Expansion Assistance

Pandemic-related Problem Statement: Families cannot return to work if there are not enough quality child care options. Demand for family child care (FCC) increased throughout the pandemic while the supply of FCC providers decreased. According to the licensing data gathered by the Rhode Island Department of Human Services (DHS), the state experienced a net loss of 113 providers, or over 25% of total FCC capacity, during the pandemic.

FCC providers typically care for a small group of children in a home and meet specific health and safety licensing requirements. Families may choose this care setting for a variety of reasons, including a smaller environment, a more culturally responsive setting (more than half of Rhode Island’s FCC provider community are native Spanish speakers), and/or more flexibility in terms of hours of care. The FCC workforce is, on average, an older workforce. During the pandemic, many FCC providers chose to retire or permanently close, even after child care was allowed to reopen, due to safety concerns.

Project Overview: This project is providing \$2,000 grants to 200 new FCC providers to cover the startup costs associated with opening an FCC setting and technical assistance to facilitate the startup process. For this program, new FCC providers are those without an active license with DHS. By covering startup costs, such as health and safety materials, inspections, and liability insurance, the State is removing a potential barrier to entry and encouraging more of these primarily women-owned small businesses to open and replenish the lost supply.

Timeline: Applicant submissions were opened at the end of March 2022, and grants began being distributed in April 2022. A follow-up survey to gather spending and quality data was conducted in September 2022 with another planned for September 2023.

Mechanisms and Partners: DHS engaged with a fiscal intermediary, Public Consulting Group (PCG), to assist in program implementation and stakeholder outreach. DHS and PCG are providing technical assistance to new FCC providers to ensure they serve Child Care Assistance Program families and participate in the State's Quality Rating and Improvement System.

Use of Evidence: A review of literature on the efficacy of home-based child care finds that most FCC settings are safe, and caregivers are generally nurturing.¹⁰⁹ Additional research finds that coaching and professional development efforts promote improved quality.¹¹⁰

Equity Impact: The project is investing in women- and minority-owned businesses, as FCCs are disproportionately owned and operated by women of color, particularly Hispanic women. FCCs are often a preferred care option for families of color and families who speak a language other than English. It is vital for Rhode Island to ensure an adequate supply of this child care model that meets the needs of communities of color and immigrant communities. Additionally, the workforce shortage in the child care sector impacts women, who are often the primary caretakers of young children and struggle to re-enter the workforce without access to child care. By stabilizing and growing the supply of child care, more women will have the opportunity to return to work.

To ensure underserved populations are reached by the program, all outreach materials, applications, program materials and the funding opportunities webpage are available in English and Spanish.¹¹¹ All application materials are accessible via cellphone or desktop, require no more than 15 minutes to complete and are free of jargon or technical language. All FCC provider startup grant applicants responded neutrally or positively to a question regarding the ease of the application process.

DHS works closely with vendors and community partners who have trusted relationships in the field and act as its liaison on all programming. Intensive outreach for the FCC program included:

- All current providers received emails, encouraging them to share the opportunity with their networks. Any recent participants in the FCC provider orientation received repeated outreach.
- DHS worked with community partners to share social media posts advertising the opportunities, and a promotional video about the FCC grants program which resulted in an increase in applications.
- When an applicant requires additional support, DHS, a vendor, and community partners contact the applicant via phone or email to resolve the issue and provide any necessary technical assistance.

As of June 30, 2023, the distribution of grants by race was:

- Other: 11%
- White: 42.9%
- Preferred not to answer: 17.6%
- Black or African American: 18.7%
- Asian: 2.2%
- Two or more races: 2.2%

¹⁰⁹ https://www.acf.hhs.gov/sites/default/files/documents/opre/lit_review.pdf

¹¹⁰ https://www.acf.hhs.gov/sites/default/files/documents/occ/occ_fcc_brief.pdf

¹¹¹ www.kids.ri.gov/cabinet/funding-opportunities/

- American Indian or Alaska Native: 2.2%
- Native Hawaiian or Pacific Islander: 3.3%

In terms of ethnicity, of the 42.9% of recipients who identified as white, 25.64% identified as Not Hispanic or Latino; 73.6% of recipients across all races identified as Hispanic or Latino.

In terms of gender, 95.6% of recipients identified as female and 4.4% as male.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Number of grants distributed	The number of pre-licensed applicants receiving a grant. DHS distributes grants during pre-licensure to help applicants cover startup costs and ensure the applicants become licensed.	0	92
Number of newly licensed FCC providers		0	55
Number of new child care seats available		0	336
Number of newly-licensed providers ranking 2-stars or higher on the BrightStars quality continuum		0	1
Number of seats in child care deserts* (among newly-licensed providers)		0	18

* Burrillville, Hopkinton, Little Compton, Narragansett, Newport, Richmond, Scituate, Tiverton, Woonsocket

Behavioral Health

Project	U.S. Treasury Expenditure Category	Planned Expenditures	Expenditures to Date
Certified Community Behavioral Health Clinics	Public Health: Mental Health Services	\$30,000,000	\$4,558,846.16
Psychiatric Residential Treatment Facility	Revenue Replacement: Provision of Government Services	\$11,000,000	\$675,202.53
Butler Hospital Short Term Stay Unit	Public Health: Mental Health Services	\$8,000,000	\$600,180.05
9-8-8 Mental Health Hotline	Public Health: Mental Health Services	\$3,475,000	\$115,356
Crisis Intervention Trainings	Public Health: Mental Health Services	\$2,200,000	\$0
Female Youth Residential Facility Design	Revenue Replacement: Provision of Government Services	\$1,000,000	\$244,862.32
Total		\$55,675,000	\$6,194,447.06

Certified Community Behavioral Health Clinics

Project Identification Number: 10020

Funding Amount: \$30,000,000

Project Expenditure Category: 1.12 Public Health: Mental Health Services

Pandemic-related Problem Statement: Challenges facing behavioral health providers in 2019 and early 2020, particularly low reimbursement rates, were exacerbated when the need for their services increased during the pandemic. Online surveys conducted during that time found that two-in-five Americans reported mental illnesses – double the usual prevalence. Rates of anxiety, depression, trauma-related disorders, and suicidal thinking were elevated, especially among youth, young adults, and racial/ethnic minority groups.¹¹² This spike in demand confronted a provider community that was struggling financially because of years of underinvestment and the economic harm created by the pandemic, evidenced by the following data.¹¹³

- 92.6% of behavioral health providers reduced operations.

¹¹² CDC MMWR, August 2020

¹¹³ Interdepartmental Serious Mental Illness Coordinating Committee (ISMICC) SAMHSA Update: Behavioral Health Issues and COVID 19. Elinore F. McCance Katz MD, PhD, Assistant Secretary for Mental Health and Substance Use, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services. September 29, 2020

- 31% of patients were turned away, cancelled, or rescheduled.
- 61.8% of providers closed at least one program.
- 46.7% laid off or planned to lay off staff.
- 82.9% did not have personal protective equipment (PPE) to last two months.
- 62.1% could survive financially for fewer than three months.

Project Overview: The Rhode Island Executive Office of Health and Human Services (EOHHS) is providing infrastructure development grants to community-based behavioral health and social services providers to recover from the pandemic and comply with federal Certified Community Behavioral Health Clinic (CCBHC) standards. These grants are supporting CCBHC providers and organizations seeking to become designated collaborating organizations (DCO). Specifically, this funding will be used to:

- Provide infrastructure grants to community-based behavioral health and social services providers to build capacity to operate as CCBHCs (e.g., electronic health records, data and payment/claims systems, staffing and training, capital needs and related infrastructure).
- Equip DCOs (focused on substance use, cultural competency, and related specialties) to participate in service delivery and collaboration with CCBHCs.
- Support the State’s implementation of this initiative through project management, evaluation, technical assistance, and administration.

EOHHS will provide up to \$25.5 million to be split among organizations as follows:

CCBHCs

Phase 1: Readiness Assessment – Estimated \$300,000 per grantee, provided upon award

Phase 2: Capacity Development/Planning Collaboration Participation – If selected, estimated \$760,000 per grantee based on funding request developed and submitted in Phase 1. Funds to be distributed upon completion of specified milestones, contingent on documented participation in the Rhode Island Executive Behavioral Health Interagency Collaborative planning collaborative.

Phase 3: Activities include start-up operational costs and the development of relevant memoranda of understanding (MOUs), contracts, and partnership agreements. (Funding based on remaining grant dollars and EOHHS’ state budget for these activities).

DCO Providing Other CCBHC Services

Phase 1: Readiness Assessment – Estimated \$30,000 per grantee, provided upon award.

Phase 2: Capacity Development/Planning Collaboration Participation – If selected, estimated \$370,000 per grantee based on funding request developed and submitted in Phase 1. Funds to be distributed upon completion of milestones.

Phase 3: Activities include start-up operational costs and the development of relevant MOUs, contracts, and partnership agreements. (Funding based on remaining grant dollars and EOHHS’ state budget for these activities).

The total amount and number of awards distributed will be determined by the number of qualified applicants. EOHHS projects the following number of awards by entity type for Phase 1: up to 10 CCBHCs and up to 22 DCOs offering other CCBHC services.

Timeline: All Phase 1 deliverables were submitted in February 2023. EOHHS reviewed all submitted deliverables and are reviewing contract renewal requests and notifying participants who were selected for Phase 2. Twenty-five percent of Phase 2 funds will be distributed upon selection; 65% will be distributed

as participants meet the milestones outlined in their Phase 1 workplan. Participants have 12 months to achieve their milestones and submit all Phase 2 deliverables to EOHHS. Participants who achieve a minimum of two milestones will be eligible for Phase 3 funding. Eighty percent of Phase 3 funding will be disbursed upon grant award, and the remaining 20% toward the end of Phase 3.

Mechanisms and Partners: Community organizations interested in participating in this grant program must submit a proposal detailing their existing capacity and ability to participate in these infrastructure development activities, including proven engagement with diverse populations and experience delivering relevant services. Successful applicants will need to demonstrate organizational and leadership readiness, a history of or capacity for community engagement, and a commitment to build capacity to become either a lead CCBHC or DCO within their community.

The CCBHC interagency team is committed to using a fair means of allocating funds to qualified community organizations that demonstrate the ability and intention to establish capacity related to the CCBHC model. The final allocation of grant funding will depend upon the number and quality of applications received.

Use of Evidence: The federal CCBHC model has been widely studied. As a demonstration program, there are requirements for rigorous evaluation that have begun to produce a compelling and deep evidence base. Continued assessment of the CCBHC model is underway across the country in a variety of settings. The U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) offers CCBHC Expansion Grants to selected states and clinics, including five recipients in Rhode Island. In addition to the evaluation completed by SAMHSA, other parties are analyzing CCBHCs' impact, including the National Council for Behavioral Health and Mathematica.

The EOHHS-led interagency team (with representation from the Rhode Island Department of Behavioral Healthcare, Development Disabilities and Hospitals (BHDDH); the Rhode Island Department of Children, Youth, and Families (DCYF); the Rhode Island Office of the Health Insurance Commissioner (OHIC); and Medicaid) conducted a mixed methods assessment of Rhode Island's behavioral health system from September 2020 through December 2020. This study included qualitative work engaging stakeholders from both state agencies and the community, as well as a quantitative assessment of Rhode Island's behavioral health system. The study culminated in a public report published in July 2021 – the Behavioral Health System Review Technical Assistance: Final Report (2021 BH Report).¹¹⁴ The CCBHC project seeks to address gaps in the Rhode Island behavioral health system that were identified by the 2021 BH Report.

Equity Impact: Investments in community behavioral health are equity investments. The population served by Rhode Island's behavioral health system is disproportionately Black (11.8% compared to 8.5% of the population) and Latino (22.2% compared to 16.3%).¹¹⁵ In addition, a health equity lens has been applied to this initiative in multiple ways.

- **Eligibility:** Organizations serving and operated by historically underserved communities are being encouraged to apply to be health equity partners for CCBHCs, enabling them to engage with diverse communities.
- **Deliverables:** Providers receiving these funds will be required to complete an organizational health equity assessment based on the Cultural and Linguistic Access Standards (CLAS).
- **Reporting:** Providers will be required to report their services and outcomes by race, ethnicity, sexual orientation, gender identity, and veteran status.

¹¹⁴ [Rhode Island Behavioral Health System Review Technical Assistance Final Report](#)

¹¹⁵ [Rhode Island 2020 Mental Health National Outcomes Measures \(NOMS\): SAMHSA Uniform Reporting System](#)

- Governance: Providers receiving these funds will be required to document feedback from a community that is representative of the community they serve.
- Provider technical assistance: Providers will be provided technical assistance to enable them to develop a plan to come into compliance with CLAS.

The policy outcomes are focused on closing gaps in the behavioral healthcare delivery system that impact all Rhode Islanders so that all Rhode Islanders have access to high-quality, affordable behavioral healthcare whenever they need it. The data show that the gaps in access are worse for Black and Latino Rhode Islanders, so one of the objectives of this initiative is to collect data that are refined, specific, and consistent enough that EOHHS can track access and outcomes by race, ethnicity, sexual orientation, gender identity, and veteran status.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Number of CCBHC infrastructure grantees that submit a qualified cost report and equity checklist	Grantees will use grant funding to begin infrastructure and capacity development activities for eligibility to be a CCBHC in year one of the program	0	8
Number of DCO infrastructure grantees that submit a continuation application and qualified workplan toward CCBHC partnership	Entities interested in becoming a DCO must submit a workplan for capacity and infrastructure development based on identified gaps in readiness and health equity	0	14
Number of potential CCBHC providers with electronic medical records (EMR) that complete a CCBHC certification application	Entities interested in becoming a CCBHC must have an EMR that meets minimum CCBHC standards	0	8

Key Performance Indicator	Description	Baseline	Performance-to-date
Number of CCBHC providers that are contingently or fully certified	Entities interested in becoming a CCBHC must complete a qualifying CCBHC certification application for certification determination	0	Not yet applicable
Number of DCO infrastructure grantees that complete the readiness assessment and equity checklist, and execute an MOU or contract with at least one potential CCBHC	The goal of the grant funding is to expand the network of community providers who have the capacity to become a CCBHC and/or partner with a CCBHC as a DCO	0	12
Number of individuals accessing behavioral healthcare services through a CCBHC	CCBHCs have demonstrated success in addressing gaps in the behavioral healthcare delivery system, including closing treatment gaps that result in unmet mental health and substance use treatment needs	26,282 individuals served by behavioral health system in State Fiscal Year 2019	Not yet applicable
Number of emergency department visits for individuals served by CCBHCs	The CCBHC model has demonstrated significant success in reducing ED utilization among enrolled members	6.6 ED visits per member over two years	Not yet applicable

Psychiatric Residential Treatment Facility

Project Identification Number: 10052

Funding Amount: \$11,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: Rhode Island needs expanded residential treatment capacity to care for and treat adolescent females who face some of the most severe and complex behavioral health challenges of any

youth in the state. Because of a long-standing shortage of intensive residential treatment options for this population, some youths have been treated in psychiatric hospitals for prolonged periods at enormous cost to the state and harm to the youth. Additionally, due to a lack of appropriate, in-state options, the Rhode Island Department of Children, Youth, and Families (DCYF) must identify out-of-state placements, where it can be difficult for family to visit a youth and where crucial work to help youths transition back to living with their families cannot be done.

The State is adding 12 psychiatric residential treatment facility (PRTF) beds for adolescent females, with the construction of a new facility or facilities on the campus of the state’s only existing PRTF provider. The provider will manage, plan, design, build, furnish, and own the new facility. Throughout the project, the provider and DCYF will maintain communication, so the State remains apprised of progress. The new residences will include all spaces necessary to support the PRTF, including bedrooms, bathrooms, offices, therapy spaces, sensory rooms, common areas, a kitchen, a dining area, laundry services, and janitorial and mechanical/electrical functions. Renovations to the school will provide classroom, office, and administrative capacity for the 12 additional students.

Timeline: On January 13, 2023, DCYF executed a contract with the PRTF provider in the state, through which the provider has agreed to design and construct its new facility and renovate common spaces by October 2024. The provider has also agreed to operate the new facility as a PRTF for 10 years following securing of its PRTF certification, a period which DCYF anticipates will be from November 2024 through November 2034.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Certificate of occupancy issued	0	Not yet applicable
Additional psychiatric beds for adolescent females	14	Not yet applicable

Butler Hospital Short Term Stay Unit

Project Identification Number: 10050

Funding Amount: \$8,000,000

Project Expenditure Category: 1.12 Public Health: Mental Health Services

Pandemic-related Problem Statement: Across Rhode Island, patients are seeking medical help for mental and behavioral health issues at hospital emergency departments (EDs) in numbers that the system cannot manage. The unprecedented demand for these services, driven in part by the COVID-19 pandemic, is resulting in delayed treatment for those with mental health and substance abuse issues, as well as overcrowding in EDs.

As reported during the Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals’ (BHDDH) behavioral health weekly “huddle call,” there are upwards of 30 patients who are waiting for a psychiatric hospital bed so that clinicians can begin to address their mental health needs. Between August 1, 2022, and October 21, 2022, the average daily number of behavioral health patients

awaiting placement was 73. The time that a patient is boarded in an ED can range from several hours to several days, resulting in patients leaving hospitals without treatment.

The pandemic added a new at-risk population for mental health problems – adolescents and young adults. Each cohort faced a myriad of challenges with the social and academic changes during the pandemic. Children ages 13-18 have had a staggering increase in the demand for treatment. According to Rhode Island Kids Count, in federal Fiscal Year 2021 (FFY), “there were 837 children and youth awaiting psychiatric inpatient admission (psychiatric boarding), almost double (a 92% increase) the number in FFY 2019 when there were 437 boarders.”¹¹⁶

Project Overview: The project is supporting the construction of a 25-bed short-term stay unit at Butler Hospital to provide behavioral healthcare services, crisis intervention, and other related services. The unit will care for patients with mental health needs and alleviate the overcrowding at EDs. It is being designed to accommodate distinct patient populations through flexible pod systems to ensure that access to care is not impacted by space limitations. Butler Hospital will have the capability of increasing or decreasing the number of adolescent beds, isolation rooms, and beds for varied adult populations.

Timeline: The goal is to open the short-term stay unit by February 29, 2024.

Mechanisms and Partners: Butler Hospital is the subrecipient of these funds and is engaging with a construction manager to estimate the construction costs throughout the design and provide timely feedback to the design team to keep the project on track and on budget. The construction manager will engage multiple subcontractors for each scope of work (including but not limited to mechanical, electrical, plumbing, fire protection, etc.) and will receive at least three bids for each scope of work to ensure fair and competitive pricing.

Use of Evidence: This project is based on the success of a similar model of care at Butler Hospital, the 24-bed Brief Stay Unit. The unit opened in January 2022 to address the overwhelming number of patients experiencing a mental health crisis that were boarding in EDs. Within three weeks of opening, the average daily census at Butler Hospital rose from 147.5 to 169.3. Patients were taken from emergency departments across the State. The census did not reach full capacity due to limitations imposed by the physical space (converted conference center), preventing high-acuity patients from being admitted despite referrals from medical EDs. This would not be the case with a purpose-built behavioral health unit.

Equity Impact: The 25-bed short-term stay unit will initiate treatment for patients of all economic and racial backgrounds, and serve other vulnerable populations, like those who are experiencing homelessness, all of whom may seek behavioral health treatment in EDs. At Butler Hospital, for Fiscal Year 2021, patients identifying as Black/African American constituted 6.5% of all in-patient admissions, and patients identifying as ethnically Hispanic constituted 13% of all in-patient admissions (excludes 3.7% of patients who did not disclose ethnicity). Data from the Mental Health Association of Rhode Island shows that for 2021 Black/African Americans constituted 5.5% of Rhode Island’s population, and 14.3% of Rhode Islanders identified as Hispanic. Butler Hospital will continue to track this data to identify any significant variances between the patient population and the general population of Rhode Island.¹¹⁷

Individuals seeking behavioral health treatment are historically underserved due to differences in insurance coverage and availability of services more generally. Additionally, Hispanic and Black/African

¹¹⁶ [RIKCFactbook2022 \(rikidscount.org\)](https://www.rikidscount.org/RIKCFactbook2022)

¹¹⁷ [The State of Behavioral Healthcare in Rhode Island – 2020 Report](#)

Americans are significantly more likely than white patients to use an ED for ongoing health conditions.¹¹⁸ The short-term stay unit will ensure that behavioral health patients are quickly moved out of EDs to start treatment and be dispositioned to the most appropriate level of care/provided with appropriate aftercare.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Status of construction completion	Unit construction will be completed	0	Not yet applicable
Statewide average daily behavioral health beds holding for placement	At the end of February 2024, the project will start tracking the rate reduction of daily weekday behavioral health beds holding across the state	72.9 beds	Not yet applicable

9-8-8 Mental Health Hotline

Project Identification Number: 10025

Funding Amount: \$3,475,000

Project Expenditure Category: 1.12 Public Health: Mental Health Services

Pandemic-related Problem Statement: The Centers for Disease Control and Prevention’s (CDC) Monthly Morbidity and Mortality Weekly Report showed that in June 2020 the U.S. adult population reported experiencing increased levels of mental health symptoms including anxiety, depression, trauma-related symptoms, substance use, and serious suicidal ideation compared to earlier pre-pandemic data. These findings were heightened for specific populations, including Black and Hispanic populations, essential workers, and younger respondents.¹¹⁹

Surveillance data has shown increased emergency department visits for individuals between the ages of 12 and 17, especially girls, presenting with suspected suicide attempts. According to the Rhode Island Student Survey, there was a slight increase in suicidal ideation among adolescents and significant increases in feeling very hopeless and depressed.¹²⁰

Project Overview: To address the increased demand for mental health services related to the pandemic, Congress designated 9-8-8 as the new, easy-to-remember dialing code for the National Suicide Prevention Lifeline. Launched on July 16, 2022, 9-8-8 is a mental health safety net, intended to reduce suicides, and mental health and substance use crises, and provide a pathway to well-being. Individuals who call, text, or chat the suicide and crisis lifeline have immediate access to effective suicide prevention, crisis services,

¹¹⁸ Parast L, Mathews M, Martino S, Lehrman WG, Stark D, Elliott MN. Racial/Ethnic Differences in Emergency Department Utilization and Experience. J Gen Intern Med. 2022 Jan.

¹¹⁹ [Ready to Respond: Mental Health Beyond Crisis and COVID-19](#)

¹²⁰ [2020 Rhode Island Student Survey](#)

and behavioral health care. Importantly, calls and texts are routed by area code to ensure crisis counselors have knowledge of available local resources and the ability to link those in need to these resources.

Through Rhode Island's 9-8-8 call center, which is called BH Link, residents have convenient access to a high-quality, personalized experience that includes connection to appropriate resources, localized community response, and follow-up. The 9-8-8 mental health lifeline aims to reduce the dispatch of law enforcement to persons in non-emergency mental health crises, resulting in more appropriate care.

Timeline: The National Suicide Prevention Lifeline 9-8-8 launched on July 16, 2022, with SFRF funding starting on December 28, 2022.

Mechanisms and Partners: BH Link is subcontracted to Community Care Alliance (CCA) through Horizon Healthcare Partners (HHP), which has administrative oversight of CCA's operation of the call center. CCA hires, trains, and employs the staff that work at the call center, including crisis counselors, supervisors, and managers. Program expenses represent items necessary to operate the 9-8-8 mental health lifeline, such as language line/translation services, printing costs, background checks for new employees, emergency on-call backup, and training.

Use of Evidence: Building out a behavioral health crisis service continuum anchored by the National Suicide Prevention 9-8-8 Lifeline is the first step in establishing the U.S. Substance Abuse and Mental Health Services Administration's (SAMHSA) vision for post-pandemic crisis services. This vision provides national guidelines focusing on a three-pronged system of someone to call, someone to respond, and somewhere to go.¹²¹ Crisis lines are effective suicide prevention tools. According to Gould and Lake, "Suicidal crisis callers report significant reductions in intent to die, hopelessness, and psychological pain over the course of their crisis call."¹²²

Equity Impact: In the same way that 9-1-1 is available to all, the target population for the 9-8-8 Mental Health Lifeline is all Rhode Islanders. As suicidal intention and mental health and substance use crises continue to rise, the need to connect people to appropriate local resources and support is more important than ever. Connecting those in crisis to trained behavioral health staff rather than law enforcement can help ensure better transition of care and outcomes.

Special attention in planning also considers historically marginalized populations, as well as those more frequently impacted by behavioral health crises. The Department of Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH) is working with HHP and BH Link, as well as state and community partners, to develop a standardized 9-8-8 mental health lifeline staff training curriculum that includes a focus on populations such as LBGTQ+, children and families, older Rhode Islanders, the deaf/hard of hearing community, veterans, victims of domestic violence, sexual assault, and/or trafficking, and people of color.

¹²¹ [Guidelines for Behavioral Health Crisis Care: Best Practice Toolkit](#)

¹²² Madelyn S., Gould, Ph.D., M.P.H., and Alison M. Lake, M.A. "[Suicide Prevention and 988: Beyond Beds Before, During and After COVID-19.](#)"

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Percentage of calls answered in state		198 calls per month – 98%	98%
Percentage of texts answered in state		0	46%
Percentage of chats answered in state		0	41%
Percentage of follow-up calls made within 24 to 72 hours of initial 9-8-8 call	A new federal requirement	0	77%

Crisis Intervention Trainings

Project Identification Number: 10059

Funding Amount: \$2,200,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: The Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals (BHDDH) is transferring project funds to Thundermist Health Center (Thundermist) to expand the Crisis Intervention Training (CIT) program. CIT is an evidence-based program aimed at training, educating, and building networks for law enforcement, mental health providers, hospitals, etc., to better respond to communities’ behavioral health needs. The expansion includes:

- 24 CIT training academies and several specialized training academies to train at least 700 police officers, first responders, behavioral health providers, and advocacy/peers.
- Monthly technical assistance to all four regional CIT programs including policy development, data specifications, dispatch workflows, and protocols.
- A quarterly statewide community of practice for new and emerging CIT programs.

Thundermist is hiring regional coordinators and collaborating with institutions of higher education in the state to research the following outcomes: behavioral and culture changes among police and police departments; diversion of consumers from criminal justice to treatment; reductions in consumer and officer injury; and decreases in officer use of force. Data and program evaluation will be used to improve curriculum and to inform program development in regions and municipalities.

Timeline: The program started January 1, 2023 and is anticipated to end in June 2026.

Performance:

Key Performance Indicator	Baseline	Performance-to-date
Number of eligible sworn officers trained	205	236
Percentage of Rhode Island police departments certified	0%	0%

Female Youth Residential Facility Design

Project Identification Number: 10027

Funding Amount: \$1,000,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: The funds are covering some design and architectural planning costs needed for a new youth residential facility to care for female clients, ranging in age from 13 to 18. The size of the new facility will be approximately 30,000 square feet and located on a State-owned property. The State has a goal is to create a facility with a residential-style atmosphere that has 16 residential beds, classrooms, treatment rooms, recreation areas, and support spaces for youth, staff, and families.

It is anticipated that total project costs will be approximately \$36.5 million, which will be funded through the Rhode Island Capital Plan Fund. The \$1.0 million State Fiscal Recovery Fund appropriation is supporting the preliminary technical assistance to start creating programming, design, and cost-estimate documents.

Timeline: In January 2023, the Rhode Island Department of Administration, Division of Capital Asset Management and Maintenance (DCAMM) executed a contract with DBVW Architects Inc. to serve as the State’s design agent. In March 2023, DCAMM executed a contract with Peregrine Group LLC to serve as the owner’s program manager. It is anticipated that programming, schematic, and preliminary design documents will be completed by March 2024 and that construction will begin by June 2024.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Design documents	Completion of the programming, schematic, and preliminary design documents	0	Not yet applicable
Construction begins		0	Not yet applicable

Public Infrastructure and Technology

RI Rebounds Project	U.S. Treasury Expenditure Category	Planned Expenditures	Expenditures to Date
RI Public Transit Authority R-Line Free Service Pilot	Revenue Replacement: Provision of Government Services	\$3,250,000	\$2,499,972.86
RI Turnpike and Bridge Authority Safety Barriers Study	Revenue Replacement: Provision of Government Services	\$1,750,000	\$61,888.72
Broadband Mapping and Planning	Revenue Replacement: Provision of Government Services	\$500,000	\$499,999.99
Total		\$5,500,000	\$3,061,861.60

RI Public Transit Authority R-Line Free Service Pilot

Project Identification Number: 10028

Funding Amount: \$3,250,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: The Rhode Island Public Transit Authority (RIPTA) is implementing a free fare pilot on the R-Line – the route from Pawtucket through Providence with the heaviest ridership. The funds provided are for the installation of passenger counters on the buses, offsetting lost revenue, and paying a consultant to complete studies required by the Federal Transit Administration and the Rhode Island General Assembly. Funds are also supporting lost revenue for paratransit services that operate within three-quarters of a mile of the R-Line.

From September 2018 through August 2019, there were 2,489,179 rides provided on the R-Line. The pandemic significantly reduced ridership, with 1,227,744 rides on the R-Line from September 2020 through August 2021. The pilot program is an intervention to recapture ridership.

It also presents a unique opportunity to study the benefits and challenges of fare-free transit in Rhode Island. The reports will assess ridership impacts on the R-Line and other RIPTA routes, service reliability, financial impacts to RIPTA and riders, and environmental impacts. The consultant will consider policy alternatives, such as systemwide free-fare service, alternative fare payment mechanisms, enhanced fare subsidies, and cost-sharing strategies.

Timeline: The pilot is taking place from September 1, 2022, through August 31, 2023.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Ridership	Return to pre-pandemic ridership levels on the R-Line	2,489,179	2,108,610

Key Performance Indicator	Description	Baseline	Performance-to-date
Increase in ridership because of fare-free service	Studies show that fare-free transit can increase ridership by 48%	1,227,744	2,108,610

RI Turnpike and Bridge Authority Safety Barriers Study

Project Identification Number: 10019

Funding Amount: \$1,750,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: Between January 2018 and June 2022, there were 17 known suicides from the four bridges maintained by the Rhode Island Turnpike and Bridge Authority (RITBA) – the Jamestown Verrazzano Bridge, Mount Hope Bridge, Newport Pell Bridge, and Sakonnet River Bridge. Existing tools to help prevent suicides include cameras and signs with contact information for the Samaritans and the Bristol Health Equity Zone in times of crisis.

RITBA retained a consulting firm to develop a detailed report on what, if any, safety barrier measures are possible on the Jamestown Verrazzano and Mount Hope bridges. The study, which will include high-level cost estimates for each measure and the potential impact of ongoing maintenance and inspections, will provide RITBA a basis for informed decision-making. An additional appropriation in State Fiscal Year 2024 will fund an additional study on other bridges.

Timeline: In July 2021, RITBA issued a request for proposals for conceptual study services for safety barrier measures. Proposals were evaluated, and a task order was executed with Atkins North America, Inc. in November 2022 to study possible measures on the Jamestown Verrazzano and Mount Hope bridges. It is anticipated that the firm will issue its final study by March 2024. The additional study referenced in the section above will be completed later in 2024.

Performance:

Key Performance Indicator	Description	Baseline	Performance-to-date
Engineering study	Issuance of a study by an external engineering firm on possible suicide deterrents	0	Not yet applicable
Action plan	Development of an action plan to be implemented contingent upon available funding	0	Not yet applicable

Broadband Mapping and Planning

Project Identification Number: 10011

Funding Amount: \$500,000

Project Expenditure Category: 6.1 Revenue Replacement: Provision of Government Services

Project Overview: Rhode Island has one of the nation’s strongest middle-mile fiber broadband networks, with over 90% of its residents living within one mile of high-speed fiber-optic broadband.¹²³ The state, however, still has issues with the uptake of broadband, broadband access, and broadband reliability, especially in rural, lower-income, and island communities, often due to cost. About one in five Rhode Islanders lack in-home wireline broadband,¹²⁴ and the state has the highest-percentage reliance on cellular data for internet access in New England. Additionally, close to half of the state does not reliably access internet download and upload speeds above the new federal minimum of 100mbps/20mbps.¹²⁵

The project allowed for the hiring of a statewide broadband coordinator, building the broadband maps needed to complete the necessary strategic planning, and completing a statewide broadband strategic plan to guide work in upcoming fiscal years. These three foundational elements were necessary to unlock and utilize additional federal funding being designated for broadband. The State needed a clearly articulated strategic plan and a five-year implementation plan that is developed in partnership with and in consultation of other state and local stakeholders. These plans must be grounded in data and built from strong broadband access and planning maps. Rhode Island also needed an office and director who will oversee the effort, ensure compliance with various federal programs, and ensure the program meets the State’s targeted goals and engages all relevant stakeholder groups.

Timeline: The State submitted its strategic plan to the National Telecommunications and Information Administration (NTIA) in May 2022. Additional work on the broadband plan was completed from July through September 2022 to align with General Assembly requirements and based on feedback from NTIA. While mapping must be done at a high level prior to plan finalization, it will remain ongoing.

Performance:

Key Performance Indicator	Description	Baseline	Goal	Final Performance
Director of broadband	Hire a director of broadband	0	1	1*
Strategic plan	State strategic plan finalized and released	0	1	1*

¹²³ <https://broadbandnow.com/Rhode-Island>

¹²⁴ Source: 2019 American Community Survey Estimated Data (Table S2801-Types of Computers and Internet Subscriptions)

¹²⁵ [Rhode Island Broadband Analysis](#)

Key Performance Indicator	Description	Baseline	Goal	Final Performance
Broadband map phase 1	State broadband map created with, at minimum, the following layers: known fiberoptic cable in state, household and business locations, low-income housing locations, and median internet speeds experienced by census tract, as well as the following functionality: ArcGIS Survey 123 to be used for crowd-sourcing data; capacity to accept FCC data; and structured mapping framework, data standards, and data models to allow additional layers/expansion	0	1	1*
Broadband map phase 2		0	1	1*

**These are yes/no binary indicators: 0 meaning 'no', 1 meaning 'yes'.*