

Workplace Innovation and Productivity Skills Incentive Program LaMPSS Instructions for Organizations

Department of Labour and Advanced Education

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1 Applying for WIPSI Program Funding

1.1 Register in LaMPSS

The Workplace Innovation and Productivity Skills Incentive (WIPSI) Program is administered by the Nova Scotia Department of Labour and Advanced Education. The Labour Market Programs Support System (LaMPSS) is a common method for administering Labour Market Programs in Nova Scotia focused on providing consistency in processes and improving services to labour market agreement holders.

LaMPSS provides organizations with self-serve capability, enabling you to apply for funding online for some labour market programs as well as submitting required financial and activity reports online.

Once you are a registered LaMPSS user, you can apply for funding online using the self-serve capability.

If you are not registered for LaMPSS, the first step before you apply for funding under the WIPSI program is to get external access. This is a one-time process, completed the first time you apply for funding using LaMPSS. Once the registration is entered into LaMPSS, your information will then be stored and shared by departments managing labour market funding agreements within LaMPSS.

1. Download the following two forms from the Department of Labour and Advanced Education website at <http://novascotia.ca/lae/lampss/lampss.asp>:
 - LaMPSS External Access form
 - Electronic Funds Transfer (EFT) form
2. Complete the LaMPSS External Access form. Make sure that:
 - Your organization's legal name matches that which is on the joint stock registry
 - Your organization's address is the actual address and not the address of an accountant or your home address; and
 - Your organization's name and address matches that which is on the void cheque attached to the EFT form.
3. Complete the Electronic Funds Transfer form. This form allows the provincial government to issue payments by direct deposit. This form must be submitted with a bank teller's stamp or a void cheque. This form must be submitted with your LaMPSS registration form.

Submit both forms together to LaMPSS Operations Support by email, fax or mail to:

LaMPSS Operations Support Labour and Advanced Education PO Box 383 Halifax, NS B3J 2P8	email: lampss@novascotia.ca Toll Free: 1-877-404-7074 Metro: (902) 424-1075 Fax: (902) 424-0804
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1.2 Receiving your LaMPSS Log-In Credentials

Once your business/organization has been granted access to LaMPSS, the person you identified as your primary contact on the LaMPSS external access form will receive an email from lampss@novascotia.ca containing:

- Your LaMPSS Organization ID (6 digits)
- User ID (for the primary user)
- Password
- Link to the LaMPSS website.

You are now able to use the LaMPSS network to apply for program funding. If you have questions about LaMPSS External Access, call LaMPSS Operations Support toll Free at 1-877-404-7074 (or 902-424-1075 in HRM).

1.3 Download the Application Form Using LaMPSS Self-Serve

Using the credentials received in the email, log in at <https://lampss.gov.ns.ca/login/login.aspx>

In the left navigation menu, select “Organization Homepage,” then “Programs and Services,” then “WIPSI – Workplace Innov & Prod Skills Incentive”. Download and save the fillable PDF application form to your computer using the “save as” function.

1.4 Completing an Application Form

This section provides supporting information to help you complete the application form for the WIPSI program. Each section of the application form is listed below along with information about what information should be entered or what documentation should be attached to the application.

A. Verify Organization Information

The name and mailing address of your organization is automatically entered in the application.

If your organization’s name or mailing address has changed, complete a new *LaMPSS External Access Form* and select “Update Access” (<https://novascotia.ca/lae/lampss/LaMPSS.asp>). Send the completed document to lampss@novascotia.ca and the LaMPSS Operations Support will update your information.

B. Provide Key Details About Your Organization

Organization Mandate	In a couple of sentences or bullets, describe what your organization does, including product lines and services and unique features.
Website	Give your organization's website address.
Training Program Delivery Type	Select the category under which you are applying from the drop-down menu: <ul style="list-style-type: none"> • TrainingSubsidy-WIPSI-Employer-Under50Employees • TrainingSubsidy-WIPSI-Employer-Over50Employees • TrainingSubsidy-WIPSI-Association
Country	Select the county of Nova Scotia in which your organization is located.
NAICS Code	Select your organization's classification under the North American Industry Classification System at https://www.statcan.gc.ca/eng/subjects/standard/naics/2017/index
HST Rebate % *if a not-for-profit	If you are a not-for-profit, you must provide your HST rebate percentage to be considered for reimbursement. If you make profit, enter 0.
Permanent Employees * field will not appear for associations	Enter the number of full-time and part-time employees in your organization. Note that only employees who are receiving full-time compensation throughout the training period are eligible for WIPSI funding. This may include employees who are full-time seasonal; include those employees (if relevant) in this number. You will be expected to detail this breakdown in the itemized budget breakdown in Section I below.
Wages and Salaries Paid * field will not appear for associations	Enter the total wages and salaries paid to full-time and part-time employees in your organization in the boxes provided.
Have you received funding from any other government sources for training in the past two years?	Indicate whether you have received funding from other government sources for the training programs. If you select yes, use the text box to provide additional details.
Is 30% of your revenue generated through commercial activity?	Indicate whether at least 30% of your business revenue is considered commercial activity. This means any business activity (occupied with commerce or trade) that has an expectation of profit. If you select no, use the text box to provide additional details (e.g. goods, services and rental income) and contact the WIPSI team.

C. Additional Organization Information

Date Established in Nova Scotia	Provide the date your organization was established in Nova Scotia. If not located in NS, enter N/A in this space.
Revenues from inside NS, other provinces/territories, and outside Canada *field will not appear for associations	Use the checkboxes to indicate which sources of revenue apply for your organization.
Approximate % of revenue from outside NS *field will not appear for associations	Select the option that best reflects approximate percentage of revenue from outside of Nova Scotia.
Total net sales for last fiscal year *field will not appear for associations	Provide your organization’s total net sales for the last fiscal year.
How many of your total employees are seasonal? *field will not appear for associations	Indicate how many of your organization’s total employees are seasonal.
How much of the wages and salaries paid was for seasonal employees? *field will not appear for associations	Provide the total amount of wages and salaries paid for seasonal employees in Canadian dollars for the last fiscal year.
Outstanding or pending claims or litigation?	Indicate yes or no. If your organization is involved in any outstanding or pending claims and/or litigation; or is in arrears with the NS Provincial Government use the text box to provide additional details.

D. Agreement Contact

Provide the appropriate contact person for your organization. Contact information for the use currently logged-in will be pre-populated in this section. You will have the option to select any contacts you have entered in LaMPSS under “Organization Contacts” from a drop-down menu. Alternately, you can choose to add a new contact and fill in their contact information.

E. Training Program Location(s)

This section is pre-populated with your organization address. If training is taking place at a different location, complete this section. Multiple locations can be added.

F. Training Program

The following table outlines the required information for each eligible training program. If you are requesting funding for more than one training program, complete a separate Training Program and Training Budget section for each program. Make sure you enter the information on the *costliest* training program in the first section. Use the “Add Program” button on the form to enter information on the additional training programs.

Name of Training Program	Provide the name for this training program. The title should describe your project, for example, what training or course(s) is being delivered. Do not use “WIPSI Project” for your project title.
Training Location	Select the appropriate address for this training program from the drop-down menu. If the desired address does not appear, return to the training program “Locations” section of the application form and add an additional address.
Training Program Description	Enter a short description of the training program. Include information about how the training is to be delivered. If the training is intended to lead to a certification, please specify.
Rationale for Training	This is where you make your business case for training. Describe how this training will assist your organization and your employees; ensure that it meets the eligibility criteria for WIPSI and use the expected results and merit criteria in Section 4, Building Your Business Case, to guide your rationale.
Name of Training Provider / Instructor	List the name of the training provider or instructor for this training program. You must also attach instructor qualifications and experience to this application.
Est. Start Date	Give an estimated start date of training. Note that all training in the application must be completed within 12 months.
Est. End Date	Give an estimated end date of training.
Expected # of Participants	Provide the expected number of participants for this training program. Note that only employees who are receiving full-time compensation throughout the training period are eligible for WIPSI funding; this may apply to employees who are full-time seasonal if approved by WIPSI. You must indicate how many employees are full-time seasonal in your itemized budget breakdown under participant wages (Section I).
Expected # of Employers *field will only appear for associations	Provide the expected number of employers for this training program.
Training Hours	Provide the total number of training hours.

G. Budget Items (\$)

Reminder: If you are requesting funding for more than one training program, complete a separate Training Program and Training Budget section for each program. Make sure you enter the information on the *costliest* training program in the first section. Use the “Add Program” button on the form to enter information on the additional training programs.

Training Costs	Provide the total amount of direct training costs (do not include tax) in Canadian dollars for this training program and a brief description of those costs. Full details must be provided in the itemized budget breakdown document attachment to this application.
Travel Costs (may be funded up to 50%)	Enter total employee travel costs. This will only be considered if the training occurs at least 100 km (one way) from their workplace. Mileage is determined based on NS Government rates. Refer to https://beta.novascotia.ca/documents/reimbursement-rates-and-transportation-allowances-employees-government-and-public-sector-bodies for Reimbursement rates and transportation allowances.
Admin Fee *field will only appear for associations	Provide the total amount of the anticipated administration fees for this training program and a brief description. Full details should be provided in the itemized budget breakdown document attachment. WIPSI may fund up to 15% of the direct training costs as administrative fees; this is determined on a case-by-case basis.
In-Kind Contributions	This will mostly pertain to employee wages while participating in training. Enter the full Canadian dollar value here. They are considered your in-kind contribution to training costs.

H. Legal Signing Officers

Provide a list of the legal signing officers required to sign a legal agreement for your organization, including their Title and Name.

I. Supporting Documents

The table below outlines the documents that must be included with this application. Attach each of the listed documents separately, using the upload function. Each of the mandatory documents must be attached before LaMPSS will accept your application form. Other documents may be attached to the form in LaMPSS, if desired.

Detailed Training Description	Attach a document (from the trainer) that describes the training activity in detail. Include how the training is to be delivered, the training’s content and outcomes, and the amount of training to be provided in hours or days. If the training is intended to lead to certification, please specify.
Detailed Training Quote	Attach a quote for the training program (from the trainer).
Trainer Bio/Credentials	Attach a copy of the trainer’s experience and qualifications.

Itemized Budget Breakdown	Attach an itemized budget breakdown as outlined in Section J below.
Participant List	Attach a list of eligible participants and their job titles, from your organization who will be participating in the training. (see Section 3.3 of the WIPSI Program Guidelines)

Troubleshooting: If LaMPSS will not accept one of your documents due to file size restrictions:

1. Email it directly to WIPSI@novascotia.ca with a subject line that includes your organization name; and
2. Attach a “mock” document with a document topic heading, such as Detailed Training Description, so that LaMPSS can consider your application as complete.

J. Itemized Budget Breakdown

Use the following table to identify the total costs (in Canadian dollars before HST) for this project as well as the amount of funding that you are requesting. A document containing an itemized budget breakdown must be attached to your WIPSI application in LaMPSS.

Include whether you want one or two payments for your reimbursement.

Direct Training Costs	Insert the total amount of anticipated training costs (do not include HST).
Participant Travel	Insert the total amount of anticipated participant travel costs. Mileage must be calculated at NS Government rates.
Participant Wages	Insert the total amount of anticipated training costs (do not include HST). Employee wages while participating in training. Enter the full Canadian dollar value here. (Employee wages are in-kind costs and are not eligible for funding.) Provide a separate breakdown of how many employees are full-time seasonal.
Participant Disability Supports	Insert any costs to accommodate disabilities. Eligible disability supports are funded at 100%.
Cash Contributions	This is the amount of the project costs that exceed the amount of funding requested.
Administrative Costs	For organizations, business associations, private sector unions, enter the amount of funding requested for administrative costs.

K. Submit your application

In the final section of the application, enter the Organization ID, Username and Password that would have been received when you registered with LaMPSS.

When you click the “submit” button, the form connects with the LaMPSS system.

If your application form is complete and all mandatory documents are attached, then the LaMPSS self-serve accepts your electronic application.

When this happens, you will receive an application agreement number (in a pop-up window). This confirms successful receipt of your Application Form.

Note: the WIPSI application is not considered complete until all of the required documentation is submitted through LaMPSS. Training cannot commence until the completed WIPSI application has been submitted.

2 Contact Information

Use the contact details below to connect with the WIPSI Program staff:

<http://novascotia.ca/programs/workplace-innovation-productivity-skills-incentive/>

Toll-free: 1-844-850-2030

WIPSI@novascotia.ca

WIPSI Program
Nova Scotia Department of Labour and Advanced Education
Workplace Initiatives Division
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