

# Nursing Graduate Guarantee (NGG) Online Portal Guide

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## What is the NGG Online Portal?

The NGG online portal, also known as the Nurses' Career Start Gateway, is a system that supports the management of the NGG.

The NGG portal enables:

- Nurses to search and apply for job opportunities
- Employers to review nurses' applications
- Employers to extend job offers
- Employer to request funding from the Ministry of Health (the ministry) and
- Employers to submit financial, program reports and the Annual Reconciliation Report Certificate reports to the ministry

## NGG Online Portal Accounts

Participating NGG employers will be required to register various users on the site to fulfill NGG-related activities (e.g., posting positions, submitting budget requests, etc.).

The user descriptions are specified in the table below.

Access Rights	Function	Suggested User
Organization/Employer (OE) Signatory	User has final signing authority for the NGG final reporting (Financial report, Program Report, ARRC Report)	Chief Executive Officer (CEO) or equivalent
Senior Nursing Leader (SNL) Signatory	User has signing authority for budget requests and final reporting	Chief Nursing Officer / Senior Nursing Leader or equivalent
Finance Signatory	User has signing authority for final reporting	Chief Financial Officer (CFO) or equivalent
Registered Nurse (RN) and Registered Practical Nurse (RPN) Union Signatory	User reviews and signs off on budget requests and has signing authority for final reporting (if applicable).	RN or RPN union representative.
Organization/ Employer (OE) Administrator	User can post jobs, create budget requests and financial and program reports and has authority to modify the organization profile (e.g., edit	Human Resources or Program Manager.

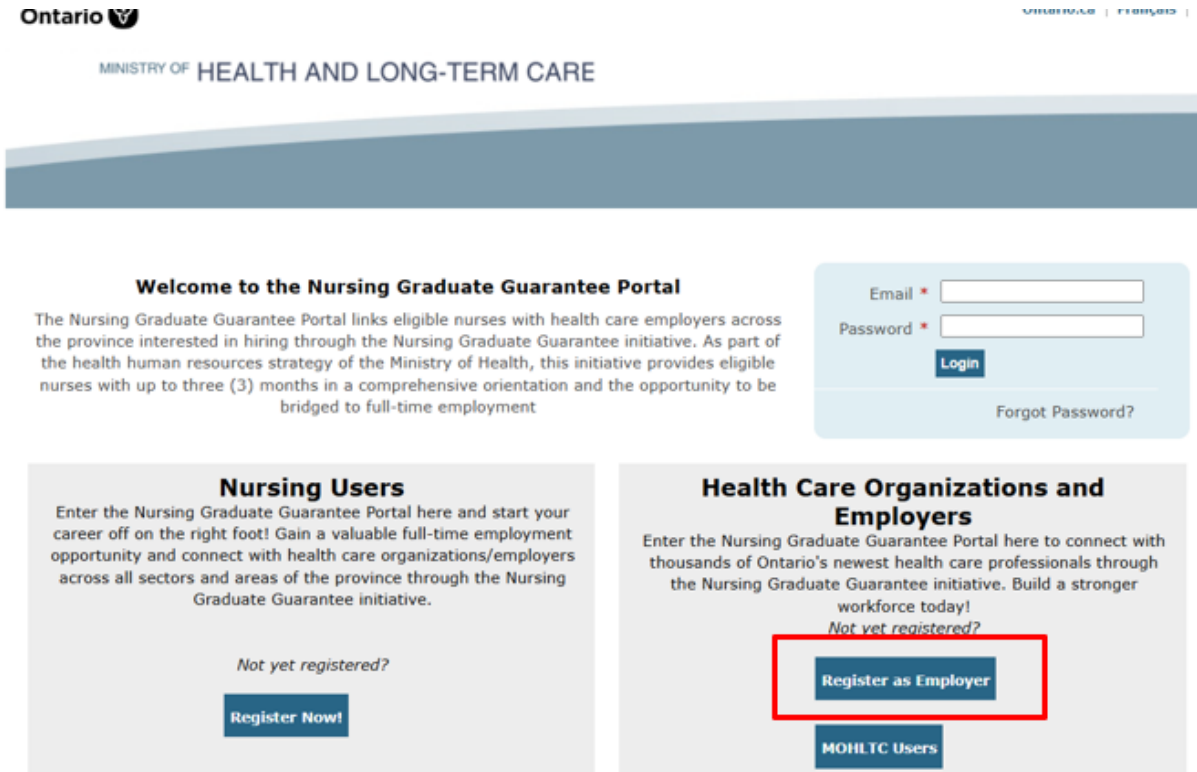
	legal name, manage registered users).	
OE User	User can only post jobs, create budget request and financial reports.	Signatories who do not need access to other NGG online portal functions.

## Overview of Program Components

Program Component	Description
Budget Request Application	<p>The Budget Request includes:</p> <ul style="list-style-type: none"> <li>• Section to demonstrate that the organization has the capacity and a plan to transition the new nurse to full-time employment or the equivalent of full-time hours for a minimum of 6 months (26 weeks).</li> <li>• Section for union review (if applicable)</li> <li>• Section for SNL approval</li> <li>• The Submitted Budget request form must have a <b>Pending Approval Status</b> to be considered submitted <b>prior to the application submission deadline</b>. <ul style="list-style-type: none"> <li>• Note: A Pending Approval status does not mean the Budget Rrequest is approved. All <b>approved Budget Request</b> will have a <b>Fully Reviewed status</b>.</li> </ul> </li> </ul>
NGG Reporting	<p>The NGG agreement will provide details of reporting requirements and deadlines. Required reports include:</p> <ul style="list-style-type: none"> <li>• Financial report</li> <li>• Program Report</li> <li>• Annual Reconciliation Report Certificate</li> </ul>

# How to Register OE Admins, OE Signatories, Union Signatories, Finance Signatories and SNL Signatories on the NGG portal.

1. Fill out form to register an as Employer on the [NGG online portal](#).
2. **OE Signatories, SNL Signatories and Finance Signatories** must choose either OE Admin or OE User rights in addition to their signatory rights.



**Non Signatory Role (Select one if union roles are not selected)**

Organization/Employer (OE) Administrator Rights

OE User

**Signatory Role (Max of one rights)**

Organization/Employer (OE) Signatory Rights

Senior Nursing Leader (SNL) Signatory Rights

Chief Finance Officer

One non-signatory access right

AND

One signatory access right

## Union Signatory

1. After filling out the register as an employer form, **DO NOT** select any access rights and click on the "Next button". Union signatory rights will be available to select on the next page.

**Non Signatory Role (Select one if union roles are not selected)**

Organization/Employer (OE) Administrator Rights

OE User

**Signatory Role (Max of one rights)**

Organization/Employer (OE) Signatory Rights

Senior Nursing Leader (SNL) Signatory Rights

Chief Finance Officer

1.) DO NOT select any these access rights.

2.) Click on the Next button. Union signatory rights are on the next page.

2. Select your organization.

### Company Details

Select an Existing Organization

Organization Name \*

Organization Legal Name \*

Organization Mailing Address \*

Organization Community \*

Organization Postal Code \*

Organization E-Mail Address

Facility/IFIS Number \*

Local Health Integration Network (LHIN) \*

Organization Sector \*

Organization/Employer Type \*

This Organization has an RPN Union \*  Yes  No

This Organization has an RN Union \*  Yes  No

Posting Administrator Name

Finance Administrator Name

Chair of the Board

Riding \*

Language Preference \*  English  Français

- After organization is selected, RPN and RN Union signatory access rights will appear, please select one.

**Non Signatory Role (Select one if union roles are not selected)**

Organization/Employer (OE) Administrator Rights

OE User

**Signatory Role (Max of one rights)**

Organization/Employer (OE) Signatory Rights

Senior Nursing Leader (SNL) Signatory Rights

Chief Finance Officer

**Union Role (Check one after selecting the organization with union roles - none of the above are to be selected)**

Registered Practical Nurse (RPN) Union Signatory Rights

Registered Nurse (RN) Union Signatory Rights

## Next Steps for OE Administrators, OE Signatories, SNL Signatories, Union Signatories and Finance Signatories.

- Once you are registered, will get an activation email to the email address that you entered when registering on the NGG portal.
- Follow the instructions in the activation email to activate your account. Please be sure to check your Junk and Spam folders. Please ensure you **active your account within 24 hours of registering**.
- Once your account is activated, please contact your organizations OE Administrator who will now need to approve your access rights (i.e., OE user, SNL signatory etc.)

## How can OE Administrators approve user access rights?

- OE Administrator login to NGG portal
- Find the user under “Manage Users” -> “OE Users” and enter in the users full name
- Click on “details” button next to the user.



### Manage OE User

User List						
Organization Name	Job Title	Full Name	User Status	Access Rights Granted	Pending Access Rights	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

User List						
Organization	Title	Name	Status	Access Rights	Pending Access Rights	
	Deputy Director		Inactive	RPN Union Signatory		<a href="#">Details</a>
	Collaborative Practice Leader		Active	OE Administrator Rights		<a href="#">Details</a>
	People & Culture Business Partner		Inactive			<a href="#">Details</a>
	Business Representative		Inactive			<a href="#">Details</a>
	Union Rep/Regional Coordinator		Active	RPN Union Signatory		<a href="#">Details</a>
	Human Resources Advisor		Locked			<a href="#">Details</a>
	People & Culture Assistant		Inactive			<a href="#">Details</a>
	People & Culture Assistant		Active	OE Administrator Rights OE Signatory		<a href="#">Details</a>
	Sr. Talent Acquisition Specialist		Active	OE User	OE Signatory	<a href="#">Details</a>

Page 2 of 2 (19 items) [2]

Click Details →

4. Scroll down to the "Modify User" section, near the bottom of the page, there is a Approve/Deny access rights table. OE Administrators can approve or deny the rights by clicking on respective buttons.

# Modify User

---

## User Profile

First Name  
Last Name  
Email Address  
Organization Name  
Title  
Mailing Address  
Postal Code  
Telephone (Work)  
Extension  
Mobile Phone  
Fax Number  
Status  
Current Access  
Pending Access: **OE Administrator Rights**

### Approve / Deny Access Rights

Pending Access Rights	
<a href="#">Access Rights Pending</a>	
OE Administrator Rights	<input type="button" value="Approve"/> <input type="button" value="Deny"/>

Click on Approve or Deny.

### Remove Access Rights

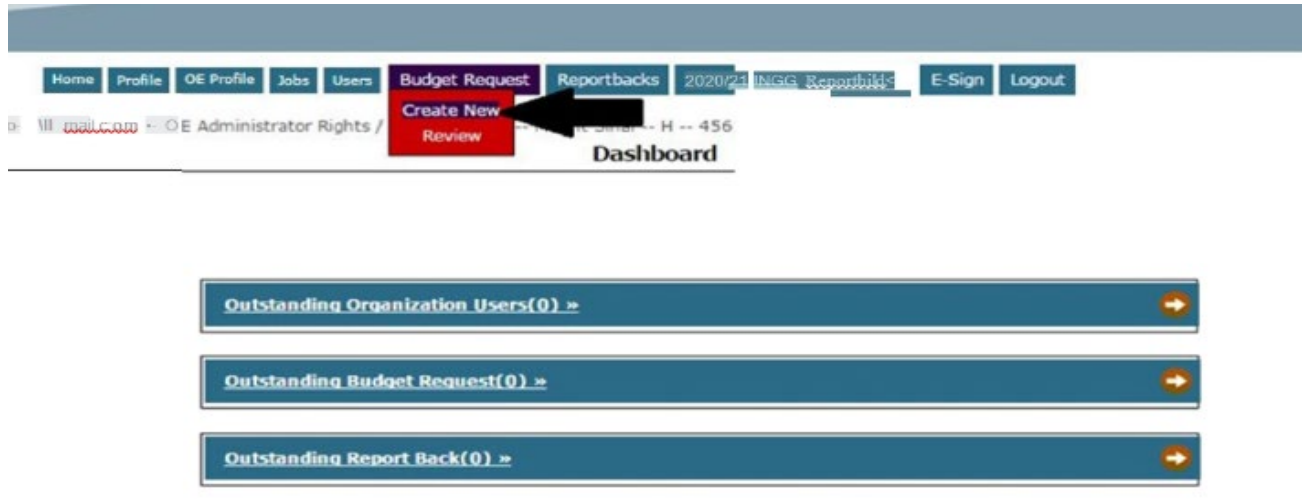
## Budget Request Submission Process

1	Match with the new nurses on the NGG online portal
2	Create new budget request on the NGG online portal
3	Select hired nurse(s) to include on the budget request(s)
4	Fill in budget request details for each new nurse (wage, start date, etc.)
5	Describe the organization's capacity and plan to transition the new nurse to full-time employment or the equivalent of full-time hours for a minimum of 6 months (26 weeks) within one year (12 months) of the new nurse's start date of the transition into practice period (12 weeks).
6	Submit budget request for union to review and for SNL approval
7	Union reviews budget request, providing comments as required
8	SNL approves budget request, providing comments as required
9	Budget request is <b>received</b> by the ministry if status is " <b>Pending Approval</b> "
10	Budget request <b>approved</b> by ministry if eligibility requirements are met, and the status will be updated to " <b>Fully Reviewed</b> ", indicating approval.

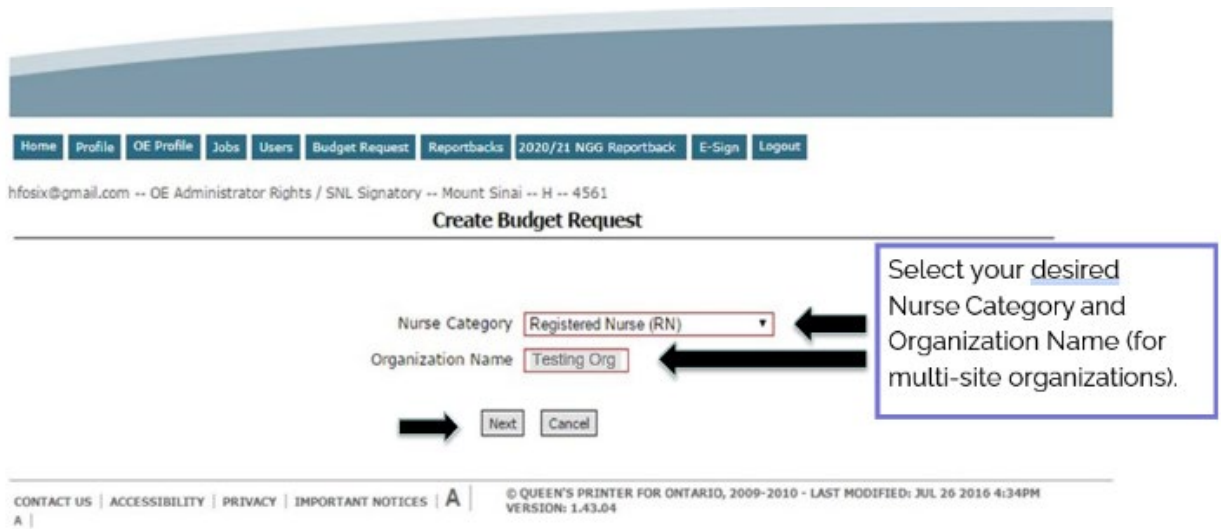
# Creating and Submitting the Budget Request

Please note that Organization can only add nurses to budget request form after 72 hours of the nurse accepting the job offer.

## Step 1



## Step 2



Click "Next" to see the [list](#) of available new nurses.

### Step 3

Home Profile OE Profile Jobs Users Budget Request 2020/21 NGG Reportback E-Sign Logout

hfosix@gmail.com -- OE Administrator Rights / SNL Signatory -- Testing Org -- H -- 123456

### Create Budget Request

Select the nurses you would like to include in the budget request from the list below.

Nurse Category

Organization Name

Participants have been included in any Budget Request. Click 'Next' to proceed to include all Participants in select Participants that should not be included in this Budget Request.

#### Nursing Graduate Guarantee (NGG) Participants

NGG Participants					
	Nursing Grad ID	Name	Job Offer Acceptance Date	Assignment Start Date	Job Posting Title
<input checked="" type="checkbox"/>	176	Carol Brown	2020/03/02	2021/03/03	Job at Long Term Care Inc.

#### Nursing Career Orientation (NCO) Participants

NCO Participants					
	<a href="#">Nursing Grad ID</a>	<a href="#">Name</a>	<a href="#">Job Offer Acceptance Date</a>	<a href="#">Assignment Start Date</a>	<a href="#">Job Posting Title</a>
No data to display					

Click "Next" to generate the budget request.

## Step 4

Home Profile OE Profile Jobs Users Budget Request 2020/21 NGG Reportback E-Sign Logout

hfosix@gmail.com -- OE Administrator Rights / SNL Signatory -- Testing Org -- H -- 123456

### Budget Request Details

Budget Request ID **102**      Nurse Category **Registered Nurse (RN)**  
Organization **Testing Org**      Nursing Initiative Type **Nursing Graduate Guarantee**  
Submission Date **Not Submitted**      Status **Draft**

[View History](#)   [Export to PDF](#)   [View Transactions](#)

### Participant List

Grad ID	Participant Name	Projected Start Date	Fiscal Year	Wages	Benefit %	Weekly Hours	Total Allocation \$	
176	Carol Brown							<a href="#">Details</a>

Total Number of Participants: **1**      Budget Request Total Allocation: **\$0.00**

[Add Participant](#)  
[Submit to MOHLTC](#)  
[Delete Budget Request](#)   [Save and Close](#)  
[Next](#)   [Cancel](#)

↑  
Click "Details" to enter the participant details page.

## Step 5

**Participant Details**

---

Budget Request ID **100**      Organization Name **Testing Org**  
 Submission Date **Not Submitted**

---

Participant Name **Nurse RPN1**

Fiscal Year

Projected Start Date

Projected End Date

Hourly Wage

Benefit Rate %

Weekly Full-Time Hours

Total Allocation

The Union was consulted

We have forecasted that within the next 12 months a permanent, full-time position will be available within our organization

Please briefly describe your organization's capacity and plan to transition the new nurse into permanent, full-time employment (Maximum 5,000 characters)

Enter a description of your organization's capacity and plan to transition the new nurse to full-time employment or the equivalent of full-time hours.

	Payment Amount	Confirmation ID	Payment Date
Initial	<input type="text" value="\$14,436.00"/>	<input type="text"/>	<input type="text"/>
Secondary	<input type="text" value="\$14,436.00"/>	<input type="text"/>	<input type="text"/>
Final Transaction	<input type="text" value="\$0.00"/>	<input type="text"/>	<input type="text"/>

Please ensure that you enter the highest Hourly Wage value (the highest rate of pay) that the participant is expected to attain during their 6 months of employment in the Nursing Participant Guarantee Initiative.

\* Mandatory fields required for submission of Budget Request. Not required for saving as draft.

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 VERSION: 1.43.04

## Step 6

Home Profile OE Profile Jobs Users Budget Request 2020/21 NGG Reportback E-Sign Logout

hfosix@gmail.com -- OE Administrator Rights / SNL Signatory -- Testing Org -- H -- 123456

### Budget Request Details

Budget Request ID **102**      Nurse Category **Registered Nurse (RN)**  
Organization **Testing Org**      Nursing Initiative Type **Nursing Graduate Guarantee**  
Submission Date **Not Submitted**      Status **Draft**

[View History](#)   [Export to PDF](#)   [View Transactions](#)

### Participant List

Participant List							
Grad ID	Participant Name	Projected Start Date	Fiscal Year	Wages	Benefit %	Weekly Hours	Total Allocation \$
176	Carol Brown						

Total Number of Participants: **1**      Budget Request Total Allocation: **\$0.00**

[Add Participant](#)   [Submit to MOHLTC](#)   [Delete Budget Request](#)   [Save and Close](#)

Click "Submit to MOHLTC" when you have fully completed the budget request. This will initiate the budget request pre-review process.

# Union Review

## Step 7

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Home Profile E-Sign Logout  
Sign Documents

To review budget requests click "Sign Documents".

rgreen28@rogers.com -- RN Union Signatory -- Testing Org -- H -- 123456

Dashboard

Outstanding Organization Users(0) »

Outstanding Budget Request(0) »

Outstanding Report Back(0) »

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VERSION: 1.43.04

## Step 8

Home Profile E-Sign Logout

Testing8@rogers.com -- RN Union Signatory -- Testing Org -- H -- 123456

List Signing Documents

Signing Documents							
Document Type	Status	ID	Fiscal Year	Submission Date	Participants	Total Allocation /Reinvestment	Sent Date
NGG Reportback	Pending for signing	42	2020-21	2021/01/20	1	\$13,978.90	2021/01/20
NGG Budget	Pending Review	54	2020-21	2021/01/20	1	\$13,978.90	2021/01/20

Click "Sign" to review and electronically sign the NGG budget request(s).

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VERSION: 1.43.04

## Step 9

Home Profile E-Sign Logout

Testings@rogers.com -- RN Union Signatory -- Testing Org -- H -- 123456

### E-Review

Budget Request ID **97** Nurse Category **Registered Practical Nurse (RPN)**  
 Organization **Testing Org** Nursing Initiative Type **Nursing Graduate Guarantee**  
 Submission Date **2016/06/09** Status **Pending Signing**

[View Status History](#)

[View Signing Document](#)

### Participant List

Participant List							
Grad ID	Participant Name	Projected Start Date	Fiscal Year	Wages	Benefit %	Weekly Hours	Total Allocation \$
177	Test User3	2020/10/28	2020-21	\$31.60	24.00	37.50	\$29,388.00

Total Number of Participants: 1

Budget Request Total Allocation: **\$29,388.00**

Signature Code \*

Please provide any comments you have regarding the organization's capacity and plan to transition the new nurse(s) into permanent, full-time employment. (Maximum 1,000 characters)

[Reviewed](#)

[Reject](#)

Click "Details" to view the organization's capacity and plan to transition each new nurse to full-time employment or the equivalent of full-time hours.

## Step 10

### Participant Details

Budget Request ID **100** Organization Name **Testing Org**  
 Submission Date **Not Submitted** Status **Draft**

Participant Name **Nurse RPN1** Participant ID **252**

Fiscal Year   
 Projected Start Date   
 Projected End Date   
 Hourly Wage   
 Benefit Rate %   
 Weekly Full-Time Hours  Total Allocation

The Union was consulted

We have forecasted that within the next 12 months a permanent, full-time position will be available within our organization

Please briefly describe your organization's capacity and plan to transition the new nurse into permanent, full-time employment (Maximum 3,000 characters)

Review the organization's capacity and plan to transition each new nurse to full-time employment or the equivalent of full-time hours.



	Payment Amount	Confirmation ID	Payment Date
at	\$14,436.00		
ty	\$14,436.00		
in	\$0.00		

You enter the highest Hourly Wage value (the highest rate of pay) that the participant is expected to attain during their 6 months of employment in the Nursing Participant Guarantee initiative.

[Previous](#)

[Exit & Save](#)

[Next](#)

[Remove Participant](#)

[Revert Changes](#)

[Back](#)

\* Mandatory fields required for submission of Budget Request. Not required for saving as draft.

# Step 11

Home Profile E-Sign Logout

rgreen28@rogers.com -- RN Union Signatory -- Testing Org -- H -- 123456

## E-Review

Budget Request ID **97**

Nurse Category **Registered Practical Nurse (RPN)**

Organization **Testing Org**

Nursing Initiative Type **Nursing Graduate Guarantee**

Submission Date **2020/06/09**

Status **Pending Signing**

[View Status History](#)

[View Signing Document](#)

### Participant List

Participant List							
Grad ID	Participant Name	Projected Start Date	Fiscal Year	Wages	Benefit %	Weekly Hours	Total Allocation \$
177	Test User3	2021/01/20	2020-21	\$31.60	24.00	37.50	\$29,388.00

Total Number of Participants: **1**

Budget Request Total Allocation: **\$29,388.00**

Click "Reviewed" once the budget request has been reviewed and you have provided comments. This will send the budget request to the SNL to approve.

Signature Code \*

Enter the signature code from the budget request review email.

Please provide any comments you have regarding the organization's capacity and plan to transition the new nurse(s) into permanent, full-time employment. (Maximum 1,000 characters)

[Reviewed](#)

[Reject](#)

Enter any comments on the budget request.

# Senior Nursing Leader (SNL) Review

## Step 12

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Home | Profile | OE Profile | Jobs | Users | Budget Request | 2020/21 NGG Reportback | E-Sign | Logout

o1@sunram.com -- OE Administrator Rights / OE Signatory -- Testing Org -- H -- 123456

**Dashboard**

Sign Documents

To review budget requests click "Sign Documents".

Outstanding Organization Users(0) ➔

Outstanding Budget Request(0) ➔

Outstanding Report Back(0) ➔

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## Step 13

Home | Profile | OE Profile | Jobs | Users | Budget Request | 2020/21 NGG Reportback | E-Sign | Logout

o1@sunram.com -- OE Administrator Rights / OE Signatory -- Testing Org -- H -- 123456

**List Signing Documents**

Signing Documents								
Document Type	Status	IQ	Fiscal Year	Submission Date	Participants	Total Allocation /Reinvestment	Sent Date	
NGG Reportback	Pending for signing	42	2020-21	2021/01/20	1	\$13,978.90	2020/02/02	Sign
NGG Budget	Pending Review	54	2020-21	2021/01/20	1	\$13,978.90	2020/02/02	Sign

Cancel

Click "Sign" to review and electronically sign the NGG budget request(s).

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VERSION: 1.43.04

## Step 14

Home Profile Jobs Budget Request Reportbacks 2020/21 NGG Reportback E-Sign Logout

nggmm100-10@yahoo.ca -- SNL Signatory / OE User -- Testing Org -- H -- 123456

**E-Sign**

Budget Request ID **97**      Nurse Category **Registered Practical Nurse (RPN)**

Organization **Testing Org**      Nursing Initiative Type **Nursing Graduate Guarantee**

Submission Date **2021/06/09**      Status **Pending Signing**

[View Status History](#)      [View Signing Document](#)

**Participant List**

Grad ID	Participant Name	Projected Start Date	Fiscal Year	Wages	Benefit %	Weekly Hours	Total Allocation \$
177	Test User3	2021/01/20	2020-21	\$31.60	24.00	37.50	\$29,388.00

Total Number of Participants: **1**      Budget Request Total Allocation: \$29,388.00

Signature Code =

Please provide any comments you have regarding the organization's capacity and plan to transition the new nurse(s) into permanent, full-time employment. (Maximum 1,000 characters)

Click "Approve" once the budget request has been reviewed and you have provided comments.

Enter the signature code from the budget request approve email.

Enter any comments on the budget request.

## Budget Request Status

Status	Description
Draft	Budget request has been created but not submitted to the ministry. Draft status can also occur when the budget request has been rejected during the submission process.  You can click on the "view history" button to view more details of your budget request
Pending Review	Budget request is pending signature by the Union and/or review by the SNL.
Pending Approval	Budget request submitted to the ministry and pending review by the ministry. Organizations are responsible to ensure all eligible budget request have a <b>Pending Review Status</b> by the budget request submission deadline to be considered submitted.
Fully Reviewed	The budget request has been fully approved by the Ministry, and funding will be flowed.

## NGG Reporting

- Employers who receive NGG funding are required to report on use of the funds as per the timelines outlined in the NGG agreement.
- Organizations must submit 3 Reports to the Ministry:
  1. **Financial Report:** to provide actual expenditures related to the 12-week transition into practice period and actual expenditures related to the reinvestment fund;
    - **Must be signed by the SNL Signatory, Union signatory (if applicable) and OE Signatory**
  2. **Program Report:** to provide information on program outcomes (e.g., nurse was bridged to full-time employment or the equivalent of full-time hours). Must be completed after the Financial Report is completed and submitted.
    - **Must be signed by the SNL Signatory, Union signatory (if applicable) and OE Signatory**
  3. **Annual Reconciliation Report Certificate (ARRC):** attestation that reported numbers agree with the audited financial statements of the organization.
    - **Must be signed by the OE Signatory and Finance Signatory**

## Financial Report

A financial report must be submitted for **each nurse** that a budget request has been submitted for.

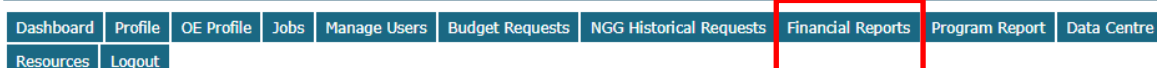
### Step 1

- Navigate to the Financial Report tab
- Click on "Create New" if you are starting a new report or click on "Review Report backs" if you are returning to complete a report that you have already started.



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## Step 2

- Select the desired nurse category.
- And click Next button

**Create NGG Reportback**

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Nurse Category RN

RN

RPN

Organization Name Brant Community Healthcare System

Next Cancel

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## Step 3

- Select nurses from the list and click on the next button.
- Only nurses from the same fiscal year can be part of the same report back. If nurses are from different fiscal years, a report back will need to be created for each fiscal year.

**Create NGG Reportback**

---

Nurse Category RN Organization Name [REDACTED]

The following list of nursing participants have not been included in any Financial Report. Click 'Next' to proceed to include all participants in this Financial Report. You may unselect participants that should not be included in this Financial Report.

1. Select the nurses you wish to include in the report back.

**NGG List**

**Available Participants**

Participants						
	Financial Report ID	Submission Date	Status	Participant ID	Participant Name	Start Date
<input checked="" type="checkbox"/>	9806	2023/12/08	Fully Signed	163137	alexia amorim	2023/06/01
<input checked="" type="checkbox"/>	9153	2023/01/03	Paid	155208	Leanne Jenkins	2022/08/08

Next Cancel

## Step 4

- Click on details and enter in all information about each nurse
- Click next to move onto the next nurse

Participant List							
Participant ID	Participant Name	Allocated Budget	Actual Start Date	Actual End Date	Hours Employed	Actual Salary/Benefits (Ministry Funded)	Reinvestment
		\$35,274.90	2023/06/01	2023/08/23	439.25	\$21,909.22	
		\$35,274.90	2023/10/13	2024/01/04	395.00	\$19,305.55	
		\$35,274.90	2023/07/10	2023/10/01	409.50	\$20,402.14	
		\$35,274.90	2023/05/25	2023/08/17	434.50	\$22,277.30	
		\$31,527.00	2021/10/15	2022/01/06	397.50	\$15,799.46	
		\$35,274.90	2023/05/25	2023/08/17	426.75	\$21,520.33	
		\$35,274.90	2023/08/04	2023/10/26	399.75	\$20,672.64	
		\$31,527.00	2021/12/10	2022/03/03	382.50	\$15,274.64	
		\$35,274.90	2023/08/14	2023/11/05	406.75	\$20,496.30	



\*-Required Fields/Obligatoire

Report ID **44984**

Organization

Submission Date **Not Submitted**

Status **Draft**

Participant Name

Participant ID

Actual Start Date \* 20230601

Actual End Date \* 20230823

Was the participant absent, for an extended period of time, between the start date and end date? E.g. Maternity Leave  Yes  No

Worked Weeks 12

Expected Actual Salary/Benefits (Ministry Funded) \$20,659.33

Hours Employed \* 439.25

Actual Salary/Benefits (Ministry Funded) \$ 21909.22

Allocated Budget \$35,274.90

Total Potential Reinvestment Amount \$14,109.96

Comments The hours reported above are based on actual time card data and variances could be due to a variety of absences, statutory holidays, picked up shifts, etc.

If the nurse took a break from the NGG program, click on YES and follow the prompts.

**Reinvestment Expenditure Breakup**

Reinvestment Initiative	Expenditure
Mentorship:	\$14,109.96
80/20 for Staff Nurses:	
Internship for Experienced Nurses in Specialty Areas:	
Initiative to Support Internationally Educated Nurses:	
Innovation Solutions:	
Comments	Funds utilized to increase mentorship hours for other nurses. (Safe management, emergency de-escalation, ACLS, PALS). Cross training experienced nurses in specialty areas (Critical Care, Emergency, Mental Health, etc.).

Previous

Save Changes

Next



Click on Next to move to the next nurse or click on save changes to save your edits for later.

## Step 5

- Once all information about each nurse is filled out, click on "process for signature" to start the signature process. The SNL Signatory, Union Signatory and OE Signatory, must sign the financial report.

Report ID [Redacted]      Nurse Category **Registered Nurse (RN)**  
 Organization [Redacted]      Nurse Participant Type **Nursing Graduate Guarantee**  
 Submission Date **Not Submitted**      Status **Draft**  
 Fiscal Year

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### Participant List

Participant List								
Participant ID	Participant Name	Allocated Budget	Actual Start Date	Actual End Date	Hours Employed	Actual Salary/Benefits (Ministry Funded)	Reinvestment	
[Redacted]	[Redacted]	\$35,274.90	2023/06/01	2023/08/23	439.25	\$21,909.22		<a href="#">Details</a>
[Redacted]	[Redacted]	\$35,274.90	2023/10/13	2024/01/04	395.00	\$19,305.55		<a href="#">Details</a>
[Redacted]	[Redacted]	\$35,274.90	2023/07/10	2023/10/01	409.50	\$20,402.14		<a href="#">Details</a>
[Redacted]	[Redacted]	\$35,274.90	2023/05/25	2023/08/17	434.50	\$22,277.30		<a href="#">Details</a>
[Redacted]	[Redacted]	\$31,527.00	2021/10/15	2022/01/06	397.50	\$15,799.46		<a href="#">Details</a>
[Redacted]	[Redacted]	\$35,274.90	2023/05/25	2023/08/17	426.75	\$21,520.33		<a href="#">Details</a>
[Redacted]	[Redacted]	\$35,274.90	2023/08/04	2023/10/26	399.75	\$20,672.64		<a href="#">Details</a>
[Redacted]	[Redacted]	\$31,527.00	2021/12/10	2022/03/03	382.50	\$15,274.64		<a href="#">Details</a>
[Redacted]	[Redacted]	\$35,274.90	2023/08/14	2023/11/05	406.75	\$20,496.30		<a href="#">Details</a>

Total Number of Participants: 9

[Add Participant](#)

[Process for Signature](#)

- The signature process for financial reports is the same as the budget request signature process (see above). The code will be emailed to each signatory.
- When the status changes from **draft** to **pending signature**, this means that the report is with either the SNL, Union or OE signatories for signing.
- A status indicating **fully signed** means that the report is now submitted to the ministry.

# Program Report

A Program report must be submitted for **each nurse** that a budget request has been submitted for.

## Step 1

- Navigate to the Program Report tab
- Click on “Create New” if you are starting a new report or click on “Review Report backs” if you are returning to complete a report that you have already started.



## Step 2

- Select the desired nurse category.
- And click Next button



### Step 3

- Select nurses from the list and click on the next button.
- Only nurses from the same fiscal year can be part of the same report back. If nurses are from different fiscal years, a report back will need to be created for each fiscal year.

## Create NGG Reportback

Nurse Category

Organization Name

The following list of nursing participants have not been included in any Financial Report. Click 'Next' to proceed to include all participants in this Financial Report. You may unselect participants that should not be included in this Financial Report.

1. Select the nurses you wish to include in the report back.

### NGG List

#### Available Participants

Participants						
	Financial Report ID	Submission Date	Status	Participant ID	Participant Name	Start Date
<input checked="" type="checkbox"/>	9806	2023/12/08	Fully Signed	163137	alexia amorim	2023/06/01
<input checked="" type="checkbox"/>	9153	2023/01/03	Paid	155208	Leanne Jenkins	2022/08/08



## Step 4

- Click on details and enter in all information about each nurse
- Click next to move onto the next nurse

**Program**

1) Was the new nurse transitioned into a full-time or full-time equivalent position in your organization within 12 months of her/his start date?

Yes  No

*If No, please provide an explanation.*

Comment

2) Was a minimum of 3 to 6 days of general orientation to the organization provided to the new nurse?

Yes  No

*If No, please provide an explanation.*

Comment

3) Was the new nurse above staffing complement for the duration of the transition into practice period?

Yes  No

*If No, please provide an explanation.*

Comment

4) Did the new nurse have access to an assigned mentor (with defined roles and responsibilities) at all times during the transition into practice period?

Yes  No

*If No, please provide an explanation.*

Comment

5) Was there a designated transition into practice leader who was accountable for implementing the NGG and tracking the progress with the new nurse and mentor(s) available for the new nurse and mentor(s)?

Yes  No

*If No, please provide an explanation.*

Comment

6) Was a learning plan developed by the new nurse and mentor, with input from the designated transition into practice leader, to track the new nurse's progress?

Yes  No

*If No, please provide an explanation.*

Comment

7) Was there a debrief/touch base with the new nurse, mentor and transition into practice leaders about the progress of the learning plan?

Yes  No

*If No, please provide an explanation.*

Comment

8) What were the 3 key domains indicated for improvement on the learning plan?

Care Management

Commitment

Critical Thinking

Effective Communication

Other

System Integration

*If Others, please provide an explanation.*


Comment

9) Was there improvement on these domains during the new nurse(s) transition into practice period?

Yes  No

*If No, please provide an explanation.*

Comment



### Step 5

- Once all information about each nurse is filled out, click on "process for signature" to start the signature process. The SNL Signatory, Union Signatory and OE Signatory, must sign the Program report.

#### Participant List

Participant List			
Participant ID	Participant Name	Participant Outcome	
		Not specified	<a href="#">Details</a>
		Not specified	<a href="#">Details</a>
		Not specified	<a href="#">Details</a>
		Not specified	<a href="#">Details</a>
		Not specified	<a href="#">Details</a>
		Not specified	<a href="#">Details</a>
		Not specified	<a href="#">Details</a>
		Not specified	<a href="#">Details</a>

Total Number of Participants **8**



### ARRC Report

The Annual Reconciliation Report Certificate (ARRC) must be signed by the OE signatory and the Finance Signatory. Only one ARRC is required for each fiscal year that the organization received funding for.

ARRC reports are initiated by the Ministry and will be available for signing once it is sent by the Ministry to your organization.

For OE Signatories and Finance Signatory:

#### Step 1

- Log into the NGG portal
- If the ARRC is initiated by the Ministry, it will appear for signing in your dashboard.
- Click on the "Sign" button

# Nurses' Career Start Gateway Dashboard

Documents pending for Signing							
Review / Signing Documents							
Document Type	Status	ID	Fiscal year	Participants	Total Allocation /Reinvestment	Sent Date	
ARRC	Pending for signing	[REDACTED]	2023-24			[REDACTED]	Sign

## Step 2

- Review to ensure the program report and financial report submitted by your organization reflect the final audited statement of your organization.
- Enter in the signature code that was emailed to you.
- Enter in any comment (this is optional)
- Click on Approve

### Review / E-Sign

#### AARC Details

ARRC ID [REDACTED]  
 Organization [REDACTED]  
 Fiscal Year [REDACTED]  
 Attached Document **ARRC - NEW**  
 Last Signed Doc **OE Signatory**  
 Status **Pending Signing**

[View Status History](#)

[View Signing Document](#)

Comment From Union Signatory:

Comment From SNL Signatory:

Signature Code \*

Enter in Signature code that was emailed.

Comment

Click approve.

[Approve](#)

[Reject](#)

### For OE Administrators:

OE Administrators can re-send signatures code to OE signatory and the Finance signatory.

**Step 1:**

- Login to the NGG Portal
- Navigate to Financial Report > "Manage ARRC"

**Step 2:**

- Click on the details button of the ARRC report
- Click on the "Re-send signature code" button or the "send to alternate user" button

## Manage Annual Reconciliation Report Certificate

ARRC List						
Organization	ARRC ID	Fiscal Year	Status	Attachment	Signing Status	
		2023-24	Pending Signing	ARRC - NEW	OE Signatory	<a href="#">Details</a>
		2016-17	Fully Signed	ARRC	Signed By Finance Signatory	<a href="#">Details</a>
		2015-16	Fully Signed	ARRC	Signed By Finance Signatory	<a href="#">Details</a>
		2014-15	Fully Signed	ARRC	Signed By Finance Signatory	<a href="#">Details</a>

## ARRC Details

ARRC ID [Redacted]

Organization [Redacted]

Fiscal Year [Redacted]

Attached Document **ARRC - NEW**

Last Signed Doc **OE Signatory**

Status **Pending Signing**

[Show Status History](#) [Download ARRC](#)

[Resend Signature Code](#) [Send to Alternate user for signature](#)