

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Performance Report for Grants and Cooperative Agreements

ACADEMIC YEAR 2015-2016



**Instruction Manual for Grantees of the
Area Health Education Centers**

Annual Performance Report

Welcome

Welcome to the Bureau of Health Workforce's Performance Measures Handbook (BPMH)! This instruction manual has been carefully designed to assist your organization in completing the required Performance Report for Grants and Cooperative Agreements (PRGCA). Please read through this manual carefully, as it contains examples and a series of step-by-step instructions that will aid you in completing all required forms.

Please note the following:

1. All required performance measures are linked to the following legislative purpose(s) of the **AHEC** grant program:
 - **Health careers recruitment of underrepresented minority populations or individuals from disadvantaged or rural backgrounds;**
 - **Community-based clinical training and education with emphasis on primary care;**
 - **Continuing education; and**
 - **Public health careers exposure to youth.**
2. Data submitted by grantees of the program must cover all activities that took place between **July 01, 2015 - June 30, 2016** (referred to as **Annual Performance Report**)
3. **The PRGCA is due no later than August 01, 2016.** Failure to submit a PRGCA by this date may place your grant in a noncompliant status.
4. Officials at the Health Resources and Services Administration (HRSA) will review and approve all PRGCA submitted by grantees. In the case that revisions are needed, you will be granted the ability to reenter the BPMH system, make corrections, and submit a revised PRGCA. All revisions must be resubmitted within five (5) business days of the initial request. Failure to resubmit a revised PRGCA within five (5) business days may place your grant in a noncompliant status.

We appreciate your feedback and assistance during this process. All requests for technical assistance will be coordinated through the Call Center and responded to promptly. If you have any questions or require further assistance in completing your PRGCA, please visit the grants homepage or contact the HRSA Contact Center via:

- Phone at **877-Go4-HRSA/877-464-4772** or
- Click this link to send us your inquiry: [click here](#).

National Center for Health Workforce Analysis

Performance Metrics and Evaluation Branch

Getting Started

The Office of Management and Budget (OMB) has issued a 3-year approval for the annual collection of performance measures across all grants and cooperative agreements funded through the Health Resources and Services Administration's Bureau of Health Workforce (BHW) (OMB # **0915-0061**). The BPMH system has been significantly enhanced to incorporate all approved subforms, as well as increase system performance and functionality. Throughout the manual, there are several icons that identify tips and other important information which will assist you in completing each subform accurately (see below).

 Marks a warning statement. Please read information in **bold** carefully in order to complete each subform accurately.

 Marks a tip or important note for completing a specific Block or subform in the BPMH system.

 Marks the end of a subform and provides instructions for initiating required validations checks.

Due to the nature of annual reporting, the BPMH system has been recently enhanced so as to prepopulate specific Blocks within certain subforms with data submitted in a previous reporting period. In addition, a "View Prior Period Data" link has been added at the top of each subform in order to provide you with easy access to data submitted by your organization in prior reporting periods.



The screenshot shows a web interface for a subform. At the top left, there is a link labeled "View Prior Period Data" which is highlighted with a red rectangular box. Below this link, the text "Fields with * are required" is displayed. A blue horizontal bar contains the text "Add Training Program" with a red asterisk. Below this bar, there is a label "Select Type of Training Program Offered" followed by a dropdown menu. A note in parentheses says "(Click the 'Load Program Details' button after selecting your training program)". To the right of the dropdown menu is a "Select One" dropdown menu.

Figure 1. Screenshot of View Prior Period Data Link

Getting Started - How Performance Measure Data Fields Are Identified in the Forms

No.	Type of Training Program	Trainees by Training Category		Attrition	
		Enter # of Enrollees	Enter # of Graduates	Enter # of Individuals who left the Program before Completion	Enter # of URM who left the Program before Completion
	(1)	(2) Block 1	(5) Block 4	(7) Block 6	(8) Block 6a
1	Degree/Diploma MD/MPH Health Policy & Management	20	5	1	0

Figure 2. Example of Performance Measures Data Table

There are two (2) types of data entry field identifiers. Each data entry field in a performance measure is identified with both types of numbers when the measure appears like the example in the above Figure.

Column Number: The first is a Column number. It is contained in parentheses above the Block number. Column numbers are unique to the field in a particular form and are used to identify error messages. If you receive an error message, it will refer to a Column Number. In that circumstance, find the Column number in the form to locate the error. Data fields that are prepopulated may only be identified with a Column number as shown in Column #1 in the above Figure.

Block Numbers: The second type of identifier is a Block number. Block numbers are also unique to a data entry field and correspond to the paper version of the performance measures. If you print the performance measures or received paper copies, the data fields are identified with a Block number. The Block numbers here in the EHB are the same as what appears in the paper copies of the performance measures. Nearly all fields where you enter data will be identified with a Block number.

Getting Started: Browser Settings



Warning: Check your browser settings before beginning your PRGCA. Incompatible browsers or incorrect settings will cause forms to display incorrectly.

- HRSA's Electronic Handbook system (EHB) is compatible only with certain Internet browsers that have specific settings. Please check your settings by logging into EHB and clicking the 'Recommended Settings' tab that appears in the yellow banner at the top left of your home screen. The system will check your browser and its settings for compatibility.
- There are multiple checks that are performed, and you must receive green check marks next to each setting in order to proceed. The following link will direct you to a page that displays the list of the checks performed: [Recommended Settings](#).
- Opening this link in your browser will automatically perform the recommended settings checks. Alternatively, you can access the recommended settings page in the EHBs system by clicking the 'Recommended Settings' tab on your EHBs home screen. It is highly recommended to check your settings prior to entering data in the BPMH system.
- Using different browsers or settings than what is described above may produce unpredictable results. If you find that you are unable to see dropdown menus, cannot enter data into a field, or a form is not appearing, you most likely have a browser compatibility problem.
- Please check these settings prior to calling the HRSA Call Center or your Government Project Officer. You may be asked to provide a screenshot showing the results of the 'Recommended Settings' tab.

Getting Started: Helpful Resources and Recommendations

The following is a list of resources and tips you may find helpful in the event you need assistance:

1. Begin PRGCA data entry early and submit your report prior to the deadline.
2. **Browser Settings:** Check your Internet browser and its settings by using ‘Recommended Settings’ tab on the EHB home screen within the yellow banner in the top left corner of the screen. Look for green check marks for all system requirements in order to meet system requirements and proceed.
3. **Reporting on Your Grant:** Several resources are available through HRSA’s “Reporting on Your Grant” link <http://bhw.hrsa.gov/grants/reporting/index.html> including general EHB guidance as well as links to the performance measures and program manual.
4. **Resource Links:** Several resources are available via the ‘Resource’ tab on the EHB home screen including the following links:
 - View Prior Period Data- Previously submitted PRGCA data are available in read-only mode
 - Glossary- Current definitions of key terms
 - Instruction Manual- Electronic copy of this program manual (can also be found on the HRSA.gov website)
5. **Video Recordings:**
 - View recorded videos of how to enter data in the BPMH system: <https://help.hrsa.gov/display/public/EHBSKBFG/BPMH+Videos>
 - View the recorded TA webinar provided for your grant program. Please access the recording by using the link provided by your Government Project Officer.
6. **Grant Personnel:** Review your grant personnel listed in EHB and update this list as necessary. Ensure that listed personnel have appropriate authorizations (i.e., PRGCA submission, etc.). Make sure you have a backup person in place to submit your report!
7. **Sequence of Forms:** Complete PRGCA forms in the order they appear (i.e., complete EXP-1 prior to EXP-2; EXP-2, prior to EXP-3)
8. **Saving and Validating:** You must click ‘Save and Validate’ in order to move to the next form. Save your work frequently (every 15-20 minutes) and print a hard copy of your report prior to submission.
9. **HRSA Call Center:** If you need additional assistance, contact the HRSA Call Center using the contact information below. If you have contacted the Call Center and are waiting for a reply, you should follow-up with them 48 hours after the initial contact. Have your ticket number ready (the same ticket number will be used at all tier levels now). Do not wait for the Call Center to return a phone call or email.
 - Phone at 877-Go4-HRSA/877-464-4772; or
 - Click this link to send us your inquiry: [click here](#).
10. **Government Project Officers:** Contact your Government Project Officer if you need further assistance.

Order of Required Forms

The following table shows the order that subforms will appear throughout the BPMH system for your specific grant program. Please note that clicking on the "Save and Validate" button at the end of each subform will cause the system to check all Blocks for errors and route you to the next required subform on the list. If you need to go back to any subform for any reason, simply click on the Form ID on the left sidebar of the Electronic Handbook (EHB). Please note that changing data that has already been saved will require you to click on the "Save and Validate" button and go through the validation process once more.

Order	Type of Form	Parent Form	Form ID	Applicable Grant Purpose(s)
1	Setup Form	Setup Forms	Grant Purpose	
2	Setup Form	Setup Forms	Training Program	AHEC-1,AHEC-2,AHEC-4
3	Performance Data Form	Program Characteristics-PC Subforms	PC-2	AHEC-1
4	Performance Data Form	Program Characteristics-PC Subforms	PC-3	AHEC-1,AHEC-4
5	Performance Data Form	Program Characteristics-PC Subforms	PC-7	AHEC-2
6	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	LR-1a	AHEC-1,AHEC-4
7	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	LR-2	AHEC-1,AHEC-4
8	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	DV-1	AHEC-1,AHEC-4
9	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	DV-2	AHEC-1,AHEC-4
10	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	DV-3	AHEC-1,AHEC-4

Order	Type of Form	Parent Form	Form ID	Applicable Grant Purpose(s)
11	Performance Data Form	Experiential Characteristics-EXP Subforms	EXP-1	AHEC-2
12	Performance Data Form	Experiential Characteristics-EXP Subforms	EXP-2	AHEC-2
13	Performance Data Form	Experiential Characteristics-EXP Subforms	EXP-3	AHEC-2
14	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-1	AHEC-5
15	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-1a	AHEC-5
16	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-2	AHEC-5
17	Performance Data Form	Continuing Education Activities-CE Subforms	CE-1	AHEC-3
18	Performance Data Form	Continuing Education Activities-CE Subforms	CE-2	AHEC-3

Grant Purpose – Setup

Selecting Grant Purpose(s)



Warning: Selections made in this form will affect the types of subforms and/or drop-down menu options that will appear throughout the BPMH system.

[View Prior Period Data](#)

Grant Purpose	Select
AHEC-1: Health careers recruitment of underrepresented minority populations or individuals from disadvantaged or rural backgrounds	<input checked="" type="checkbox"/>
AHEC-2: Community-based training and education with emphasis on primary care	<input checked="" type="checkbox"/>
AHEC-3: Continuing education	<input checked="" type="checkbox"/>
AHEC-4: Public health careers exposure to youth	<input checked="" type="checkbox"/>

Figure 3. Selecting Grant Purpose(s)

To configure the BPMH system, please complete the Grant Purpose Setup form by selecting the specific type(s) of activities that were supported with grant funds during the reporting period (**July 01, 2015 - June 30, 2016**). Some options in the Grant Purpose form will be automatically selected based on information provided in a previous reporting period.



Warning: Unselecting a grant purpose will cause related forms and data to be deleted. If you need to unselect a grant purpose, contact your project officer first to ensure you do not unnecessarily lose any data.

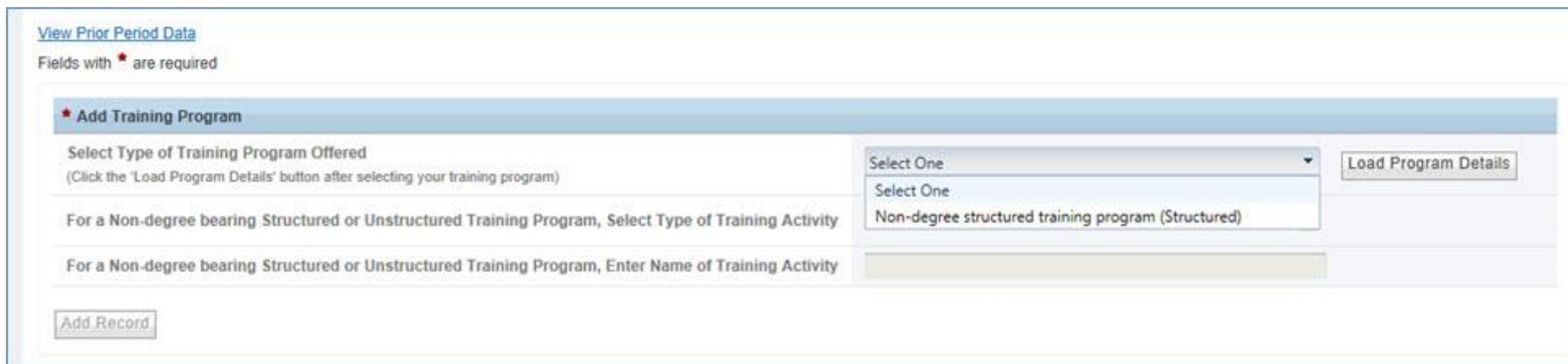


To Complete the Form: Click on "Save and Validate" on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Training Program - Setup

Training Program Setup - Selecting Type of Training Program

Purpose: The Training Program Setup form will configure all subsequent subforms specific to structured programs, unstructured programs, and practica/field placements (depending on your grant).



The screenshot shows a web form titled "Add Training Program". At the top left, there is a link "View Prior Period Data" and a note "Fields with * are required". The main section is titled "Add Training Program" and contains the following fields:

- "Select Type of Training Program Offered" (Click the 'Load Program Details' button after selecting your training program): A dropdown menu with "Select One" selected, and "Non-degree structured training program (Structured)" visible in the list. A "Load Program Details" button is to the right.
- "For a Non-degree bearing Structured or Unstructured Training Program, Select Type of Training Activity": An empty dropdown menu.
- "For a Non-degree bearing Structured or Unstructured Training Program, Enter Name of Training Activity": An empty text input field.

An "Add Record" button is located at the bottom left of the form.

Figure 4. Training Program Setup - Selecting Type of Training Program

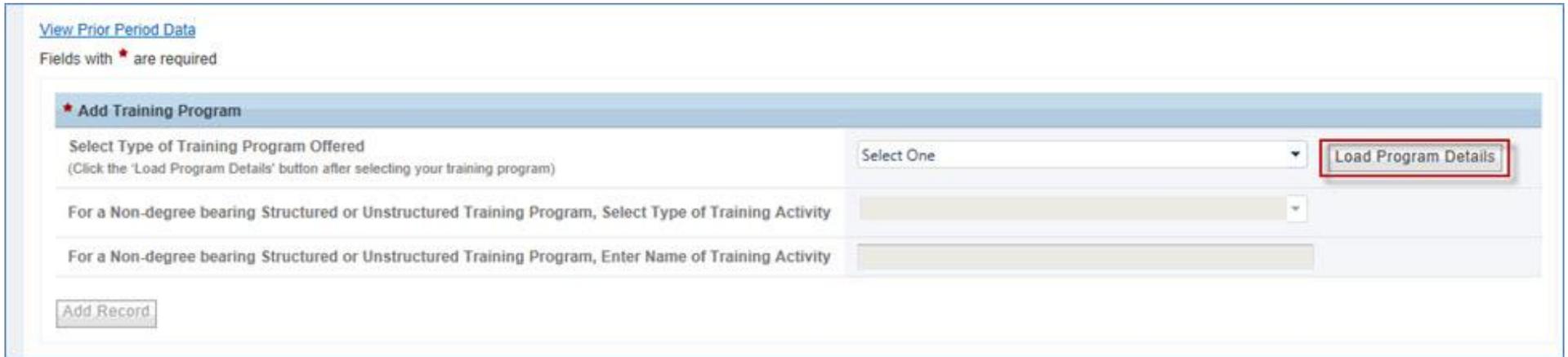
Select Type of Training Program Offered: Select the type(s) of training program(s) supported through the grant during the reporting period by clicking on the drop-down menu and choosing one of the options from the list below:

- Non-degree structured training program (Structured)
- Non-degree unstructured training program (Unstructured)
- Practicum/Field Placement program



Note: Previously reported training programs (i.e., prior records) will prepopulate in the "Saved Records" table. If you have no NEW training programs to add, proceed to the instructions in the final step of this form ("Selecting Training Activity Status").

Training Program Setup - Loading Program Details



The screenshot shows a web form titled "Add Training Program" with a red asterisk indicating required fields. At the top left, there is a link "View Prior Period Data" and a note "Fields with * are required". The form contains the following elements:

- A header bar with the text "Add Training Program" and a red asterisk.
- A dropdown menu labeled "Select Type of Training Program Offered" with the instruction "(Click the 'Load Program Details' button after selecting your training program)". The current selection is "Select One".
- A "Load Program Details" button, which is highlighted with a red rectangular border.
- A dropdown menu labeled "For a Non-degree bearing Structured or Unstructured Training Program, Select Type of Training Activity".
- A text input field labeled "For a Non-degree bearing Structured or Unstructured Training Program, Enter Name of Training Activity".
- An "Add Record" button at the bottom left.

Figure 5. Training Program Setup - Loading Program Details

Click on the "Load Program Details" button to activate the remaining drop-down menus in this setup form.

Training Program Setup - Adding Structured Training Program

Add Training Program

Select Type of Training Program Offered
(Click the 'Load Program Details' button after selecting your training program)

Non-degree structured training program (Structured) Load Program Details

For a Non-degree bearing Structured or Unstructured Training Program, Select Type of Training Activity

Select One

For a Non-degree bearing Structured or Unstructured Training Program, Enter Name of Training Activity

For a Fellowship, Residency, Practicum/Field Placement, Internship or 1-year Retraining Program, Select the Primary Discipline of Individuals Trained

Add Record

Figure 6. Training Program Setup - Adding Structured Training Program

For a Non-degree bearing Structured or Unstructured Training Program, Select Type of Training Activity: Select the type of training activity by clicking on the drop-down menu and choosing **one** of the following options:

- Health Careers Enrichment Activities
- Pre-Diploma/Certification Preparation
- Summer Program
- Training activity for current health profession students, residents and/or fellows

For a Non-degree bearing Structured or Unstructured Training Program, Enter Name of Training Activity:

1. Enter a name for the activity selected in the previous step.
2. Click on the "Add Record" button to save your entry.
3. Repeat as necessary.

Training Program Setup - Adding Unstructured Training Program

Add Training Program

Select Type of Training Program Offered
(Click the 'Load Program Details' button after selecting your training program)

Non-degree unstructured training program (Unstructured) Load Program Details

For a Non-degree bearing Structured or Unstructured Training Program, Select Type of Training Activity

Select One

For a Non-degree bearing Structured or Unstructured Training Program, Enter Name of Training Activity

For a Fellowship, Residency, Practicum/Field Placement, Internship or 1-year Retraining Program, Select the Primary Discipline of Individuals Trained

Add Record

Figure 7. Training Program Setup - Adding Unstructured Training Program

For a Non-degree bearing Structured or Unstructured Training Program, Select Type of Training Activity: Select the type of training activity by clicking on the drop-down menu and choosing **one** of the following options:

- Afterschool Enrichment Activity
- Community-based outreach & education
- Pre-Diploma/Certification Preparation
- College Academic Support
- Pre-college Preparation
- Training activity for current health profession students, residents and/or fellows

For a Non-degree bearing Structured or Unstructured Training Program, Enter Name of Training Activity:

1. Enter a name for the activity selected in the previous step.
2. Click on the "Add Record" button to save your entry.
3. Repeat as necessary.

Training Program Setup - Adding Field Placement/Practicum Program

Add Training Program

Select Type of Training Program Offered
(Click the 'Load Program Details' button after selecting your training program)

Practicum/Field Placement program Load Program Details

For a Non-degree bearing Structured or Unstructured Training Program, Select Type of Training Activity
Select One

For a Non-degree bearing Structured or Unstructured Training Program, Enter Name of Training Activity

For a Fellowship, Residency, Practicum/Field Placement, Internship or 1-year Retraining Program, Select the Primary Discipline of Individuals Trained
Select One

Add Record

Figure 8. Training Program Setup - Adding Field Placement/Practicum Program

For a Fellowship, Residency, Practicum/Field Placement, Internship or 1-year Retraining Program, Select the Primary Discipline of Individuals Trained:

1. Select the primary profession and discipline of individuals participating in field placements for the purpose of community-based clinical training in primary care by clicking on the drop-down menu and choosing **one** of the options below.
2. Next, click on the "Add Record" button to save your entry.
3. **Repeat the first step and this step to capture all field placement/practicum training programs offered during the annual reporting period.**

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology, Social Work, or Substance Abuse/Addictions Counseling
- Behavioral Health - Psychology
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Allergy and Immunology
- Medicine - Dermatology

Health Resources and Services Administration
Bureau of Health Workforce

- Home Health Aide
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Aerospace Medicine
- Medicine - Preventive Medicine/Occupational Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Community health nursing
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult gerontology
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - NP - Women's health
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Pediatrics
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Public health nurse
- Other - Allied Health
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Nutritionist
- Other - Optometry
- Other - Physical Therapy

Annual Performance Report
Academic Year 2015-2016

- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - Alternative/Complementary Nursing
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - CNS - Women's health and pediatrics
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Psychiatric/Mental health
- Nursing - Nurse anesthetist
- Nursing - Nurse midwife
- Nursing - Registered Nurse
- Other - Chiropractor
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Midwife

Health Resources and Services Administration
Bureau of Health Workforce

- Nursing - Nurse educator
- Nursing - Other (e.g., CNA, PCA)
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife (non - nurse)
- Other - Office/Support Staff
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Management
- Public Health - Social & Behavioral Sciences
- Student - Chiropractic School
- Student - CNS - Family
- Student - CNS - Pediatrics
- Student - CNS - Women's health and pediatrics
- Student - Dental Hygiene
- Student - Diploma/Certificate
- Student - Graduate - Clinical Laboratory Services
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Graduate - Social
- Other - Respiratory Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Infectious Disease Control
- Student - Alternative/Complementary Nursing
- Student - CNL - Generalist
- Student - CNS - Geropsychiatric
- Student - CNS - Psychiatric/Mental health
- Student - Community health nursing
- Student - Dental School
- Student - Graduate - Allied Health
- Student - Graduate - Nursing
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Home Health Aide
- Student - Midwife (non - nurse)
- Student - NP - Adult
- Student - NP - Child/Adolescent Psychiatric/Mental Health
- Student - NP - Family Psychiatric/Mental Health
- Student - NP - Other advanced nurse specialists
- Student - NP - Women's health
- Student - Nurse Educator
- Student - Nursing - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - Nursing BS/BSN Completion
- Student - Optometry
- Student - Physician Assistant
- Student - Public Health Nurse
- Student - Speech Therapy
- Student - Undergraduate - Dental Therapy
- Student - Undergraduate - Public Health

Annual Performance Report
Academic Year 2015-2016

- Other - Occupational Therapy
- Other - Other
- Other - Podiatry
- Other - Speech Therapy
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention
- Student - Certified Nursing Assistant
- Student - CNS - Adult gerontology
- Student - CNS - Neonatal
- Student - CNS - Women's health
- Student - Dental Assistant
- Student - Dietician
- Student - Graduate - Behavioral Health
- Student - Graduate - Nursing Doctorate
- Student - Graduate - Other Behavioral Health
- Student - Graduate - Radiological Assistant
- Student - Medical Assistant
- Student - NP - Acute care adult gerontology
- Student - NP - Adult gerontology
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Pediatrics
- Student - Nurse Administrator
- Student - Nurse midwife
- Student - Nursing - Nurse midwife
- Student - Nursing Informatics
- Student - Pharmacy
- Student - Podiatry School
- Student - Registered nurse (RN)

Health Resources and Services Administration
Bureau of Health Workforce

Work

- Student - Medical School
 - Student - NP - Acute care pediatric
 - Student - NP - Adult Psychiatric/Mental health
 - Student - NP - Family
 - Student - NP - Neonatal
 - Student - NP - Psychiatric/Mental health
 - Student - Nurse Anesthetist
 - Student - Nurse Researchers/Scientists
 - Student - Nursing - Registered nurse (RN)
 - Student - Nursing Pre—licensure
 - Student - Pharmacy School
 - Student - Post - high school / Pre - college
 - Student - Rehabilitation Therapy
 - Student - Undergraduate - Clinical Laboratory Services
 - Student - Undergraduate - Other
 - Student - Undergraduate - Radiological Technician
 - Student – Physical Therapy
- Student – Allied Health
 - Student – Speech Therapy

Annual Performance Report
Academic Year 2015-2016

- Student - Undergraduate - Allied Health
- Student - Undergraduate - Health Sciences Program
- Student - Undergraduate - Radiological Assistant
- Student – Occupational Therapy



Note: Student disciplines are noted with the student identifier (e.g., Student- Medical School)



Note: Advanced trainee disciplines (residents and fellows) are noted with professional identifiers (e.g., Medicine- Dermatology)

Training Program Setup - Selecting Training Activity Status

No.	Record Status	Training Program (1)	Select Training Activity Status in the Current Reporting Period (2)
1	Prior Record	Unstructured Pre-college Preparation ActivityName1	Ongoing
2	New Record	Structured High School Academy Enrichment ActivityName2	Complete

Figure 9. Training Program Setup - Selecting Training Activity Status

Select Training Activity Status in the Current Reporting Period: Select the status of each training program at the end of the reporting period (i.e., **June 30, 2016**) by choosing one of the options listed below.

- Active
- Complete
- Inactive
- Ongoing



*Note: For **Structured and Unstructured** Training Programs, choose either Ongoing or Complete:*

- **Ongoing:** A structured or unstructured training program that did not conclude by **June 30, 2016**.
- **Complete:** A structured or unstructured training program that concluded at some point during the reporting period (i.e. **July 01, 2015 - June 30, 2016**).



*Note: For **Practica/Field Placement Programs**, chose either Active or Inactive:*

- **Active:** A training program that was offered during the reporting period. If you are reporting any activity for a program, select Active.

- **Inactive:** *A training program that was NOT offered during the reporting period. Selecting 'Inactive' indicates that the training program is completed and was not offered in the reporting period. You will not report on any aspect of an inactive program, and all records associated with the program (i.e., EXP or CE records) will be made inactive.*



To Complete the Form: Click on "Save and Validate" on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

PC-2: Program Characteristics – Non-degree bearing Unstructured Training Programs

PC-2 - Selecting Education Level(s) of Participants

No. Record	Status	Type of Training Program (1) Block 1	Type of Training Activity (2) Block 1a	Name of Training Activity (3) Block 1a.1	Select Education Level(s) of Participants (4) Block 1b
1	New Record	Unstructured Pre-college Preparation Program 2	Pre-college Preparation	Program 2	<input type="checkbox"/> Student - 9 - 12 (secondary)

Figure 10. PC-2 - Selecting Education Level(s) of Participants

Select Education Level(s) of Participants: Select the education level(s) of participants who participated in each unstructured training program during the current reporting period.

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Allergy and Immunology
- Medicine - Dermatology
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Plastic Surgery
- Medicine - Preventive
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work; Substance Abuse/Addictions Counseling
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Internal Medicine

Health Resources and Services Administration
Bureau of Health Workforce

Annual Performance Report
Academic Year 2015-2016

- Medicine - Other
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Aerospace Medicine
- Medicine - Preventive Medicine/Occupational Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Community health nursing
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult gerontology
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Public health nurse
- Other - Allied Health
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Medicine/Family Medicine
- Medicine - Preventive Medicine/Pediatrics
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse anesthetist
- Nursing - Nurse midwife
- Nursing - Registered Nurse
- Other - Chiropractor
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Midwife (non-nurse)
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Respiratory Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Infectious Disease Control
- Student - 9 - 12 (secondary)
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - Alternative/Complementary Nursing
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - CNS - Women's health and pediatrics
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Other (e.g.; CNA; PCA)
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Nutritionist
- Other - Optometry
- Other - Podiatry
- Other - Speech Therapy
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention
- Student - Alternative/Complementary Nursing
- Student - CNL - Generalist
- Student - CNS - Geropsychiatric
- Student - CNS - Psychiatric/Mental health
- Student - Community Health Nursing
- Student - Dental School
- Student - Graduate - Clinical Laboratory Services

Health Resources and Services Administration
Bureau of Health Workforce

Annual Performance Report
Academic Year 2015-2016

- Management
 - Public Health - Social & Behavioral Sciences
 - Student - Certified Nursing Assistant
 - Student - CNS - Adult gerontology
 - Student - CNS - Neonatal
 - Student - CNS - Women's health
 - Student - Dental Assistant
 - Student - Diploma/Certificate
 - Student - Graduate - Nursing Doctorate
 - Student - Graduate - Other Behavioral Health
 - Student - Graduate - Radiological Assistant
 - Student - K - 8 (primary)
 - Student - Medical School
 - Student - NP - Acute care pediatric
 - Student - NP - Adult Psychiatric/Mental health
 - Student - NP - Family
 - Student - NP - Neonatal
 - Student - NP - Women's health
 - Student - Nurse Educator
 - Student - Nursing Informatics
 - Student - Pharmacy School
 - Student - Podiatry School
 - Student - Registered nurse (RN)
 - Student - Undergraduate - Allied Health
 - Student - Undergraduate - Public Health
- Student - Chiropractic School
- Student - CNS - Family
- Student - CNS - Pediatrics
- Student - CNS - Women's health and pediatrics
- Student - Dental Hygiene
- Student - Graduate - Allied Health
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Graduate - Social Work
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - Midwife (non-nurse)
- Student - NP - Adult
- Student - NP - Child/Adolescent Psychiatric/Mental Health
- Student - NP - Family Psychiatric/Mental Health
- Student - NP - Other advanced nurse specialists
- Student - Nurse Administrator
- Student - Nurse midwife
- Student - Occupational Therapy
- Student - Physical Therapy
- Student - Post-high school / Pre-college
- Student - Rehabilitation Therapy
- Student - Undergraduate - Clinical Laboratory Services
- Student - Undergraduate - Radiological Assistant
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Home Health Aide
- Student - Medical Assistant
- Student - NP - Acute care adult gerontology
- Student - NP - Adult gerontology
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Pediatrics
- Student - Nurse Anesthetist
- Student - Nurse Researchers/Scientists
- Student - Optometry
- Student - Physician Assistant
- Student - Public Health Nurse
- Student - Speech Therapy
- Student - Undergraduate - Other
- Student - Undergraduate - Radiological Technician



Note: Student disciplines are noted with the student identifier (e.g., Student- Medical School)



Note: Advanced trainee disciplines (residents and fellows) are noted with professional identifiers (e.g., Medicine- Dermatology)

PC-2 - Entering Length of Training Activity

No. Record	Type of Training Program (1) Block 1	Type of Training Activity (2) Block 1a	Name of Training Activity (3) Block 1a.1	Select Education Level(s) of Participants (4) Block 1b	Enter Length of Training Activity in Clock Hours (5) Block 1c
1	New Record	Unstructured Pre-college Preparation Program 2	Pre-college Preparation	Program 2	<input type="text"/>

Figure 11. PC-2 - Entering Length of Training Activity

Enter Length of Training Activity in Clock Hours:

Enter the duration, in clock hours, of each unstructured training program during the current reporting period by clicking on the drop-down menu in Column 5 (Block 1c).



Note: For training programs less than one (1) hour, provide a decimal value by dividing the total number of minutes the course lasted by 60 (e.g., a 15-minute course would entered as $15/60 = .25$).

PC-2 - Selecting Type(s) of Partners/Consortia

Type of Training Program (1)	Type of Training Activity (2)	Name of Training Activity (3)	Select Education Level(s) of Participants (4)	Enter Length of Training Activity in Clock Hours (5)	Select Type(s) of Partners/Consortia Used to Offer this Training (6)
Block 1	Block 1a	Block 1a.1	Block 1b	Block 1c	Block 2
Unstructured Pre-college Preparation Program 2	Pre-college Preparation	Program 2	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Federal Government - NIH <input type="checkbox"/> Federal Government - AHRQ

Figure 12. PC-2 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia Used to Offer this Training:

Select the type(s) of partnerships or consortia established for the purposes of offering each unstructured training program during the current reporting period by clicking on the drop-down menu in Column 6 (Block 2) and choosing all that apply from the following options:

- Academic department - outside the institution
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Health Center (CHC)
- Educational institution (Grades K - 12)
- Federal Government - AHRQ
- Federal Government - FDA
- Federal Government - Other HHS Agency/Office
- Federal Government -Other
- Geriatric Behavioral or Mental Health Units
- Health department - Local
- Health disparities research center
- Hospice
- Academic department - within the institution
- Alzheimer's Association/Chapters
- Area Agencies on Aging
- Community Mental Health Center
- Federal Government - Veterans Affairs
- Federal Government - CDC
- Federal Government - IHS
- Federal Government - Other HRSA Program
- FQHC or look-alike
- Geriatric consultation services
- Health department - State
- Health insurance/Healthcare Provider Group (e.g.; PPO/HMO)
- Hospital
- No partners/consortia used
- Nurse managed health clinic
- Physical therapy/Rehabilitation center
- Quality improvement organization
- Academic institution
- Alzheimer's Disease Resource Centers
- Community - based health center (e.g.; free clinic)
- Day and home care programs (i.e. Home Health)
- Federal Government - ACL
- Federal Government - Department of Defense/Military
- Federal Government - NIH
- Federal Government - SAMHSA
- Geriatric ambulatory care and comprehensive units
- Health center (e.g.; free clinic)
- Health department - Tribal
- Health policy center
- Local Government
- Nonprofit organization (faith - based)

Health Resources and Services Administration
Bureau of Health Workforce

- Long-term care facility
- Nonprofit organization (non - faith based)
- Other
- Professional Associations
- State Government
- Tribal Organization
- State Governmental Programs

Annual Performance Report
Academic Year 2015-2016

- Nursing home
- Private/For - profit organization
- Senior Center
- Tribal Government



Warning: You may not select "No partners/consortia used" in combination with any other option.



To Complete the Form: Click on "Save and Validate" on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

PC-2 — Selecting Type(s) of Community-based Collaborator(s)

Select Education Level(s) of Participants (4) Block 1b	Enter Length of Training Activity in Clock Hours (5) Block 1c	Select Type(s) of Partners/Consortia Used to Offer this Training (6) Block 2	Select Type of Community-based Collaborator(s) (6a)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Figure 13. PC-2 — Selecting Type(s) of Community-based Collaborator(s)

Select Type of Community-based Collaborator(s): Select the type(s) of community-based collaborators used or established for the purpose of offering each program by clicking on the drop-down menu and choosing all that apply from the following options:

- Area Health Education Center
- Community Mental Health Center
- Federally - qualified health center or look - alike
- Rural Health Clinic
- Community Health Center
- Critical Access Hospital
- Other Community-Based Organization
- N/A

PC-3: Program Characteristics – Non-degree bearing Structured Training Programs

PC-3 - Selecting Education Level(s) of Participants

No. Record	Type of Training Program (1)	Type of Training Activity (2)	Name of Training Activity (3)	Select Education Level(s) of Participants (4)
1	Structured Summer Program Program 1	Summer Program	Program 1d.1	<input type="checkbox"/> Student - 9 - 12 (secondary)

Figure 14. PC-3 - Selecting Education Level(s) of Participants

Select Education Level(s) of Participants: Select the education level(s) of participants who participated in each structured training program during the current reporting period.

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Allergy and Immunology
- Medicine - Dermatology
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Internal
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work; Substance Abuse/Addictions Counseling
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical

Health Resources and Services Administration
Bureau of Health Workforce

Annual Performance Report
Academic Year 2015-2016

- Medicine/Pediatrics
 - Medicine - Neurology
 - Medicine - Occupational Medicine
 - Medicine - Other
 - Medicine - Physical Medicine and Rehabilitation
 - Medicine - Preventive Medicine/Aerospace Medicine
 - Medicine - Preventive Medicine/Occupational Medicine
 - Medicine - Psychiatry
 - Medicine - Surgery - General
 - Medicine - Urology
 - Nursing - CNL - Generalist
 - Nursing - CNS - Geropsychiatric
 - Nursing - CNS - Psychiatric/Mental health
 - Nursing - Community health nursing
 - Nursing - NP - Acute care adult gerontology
 - Nursing - NP - Adult gerontology
 - Nursing - NP - Family
 - Nursing - NP - Neonatal
 - Nursing - Nurse administrator
 - Nursing - Nurse informaticist
 - Nursing - Public health nurse
 - Other - Allied Health
 - Other - Direct Service Worker
 - Other - Health Education Specialist
 - Other - Medical Assistant
 - Other - Occupational Therapy
 - Other - Pharmacy
 - Other - Profession Not Listed
 - Other - Veterinary Medicine
- Medicine - Otolaryngology
- Medicine - Plastic Surgery
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Pediatrics
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse anesthetist
- Nursing - Nurse midwife
- Nursing - Registered Nurse
- Other - Chiropractor
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Midwife (non-nurse)
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Respiratory Therapy
- Physician Assistant
- Public Health - Environmental Health
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - Alternative/Complementary Nursing
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - CNS - Women's health and pediatrics
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Other (e.g.; CNA; PCA)
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Nutritionist
- Other - Optometry
- Other - Podiatry
- Other - Speech Therapy
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention
- Student - Alternative/Complementary Nursing
- Student - CNL - Generalist
- Student - CNS - Geropsychiatric
- Student - CNS - Psychiatric/Mental health
- Student - Community Health Nursing

Health Resources and Services Administration
Bureau of Health Workforce

Annual Performance Report
Academic Year 2015-2016

- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Management
- Public Health - Social & Behavioral Sciences
- Student - Certified Nursing Assistant
- Student - CNS - Adult gerontology
- Student - CNS - Neonatal
- Student - CNS - Women's health
- Student - Dental Assistant
- Student - Diploma/Certificate
- Student - Graduate - Nursing Doctorate
- Student - Graduate - Other Behavioral Health
- Student - Graduate - Radiological Assistant
- Student - K - 8 (primary)
- Student - Medical School
- Student - NP - Acute care pediatric
- Student - NP - Adult Psychiatric/Mental health
- Student - NP - Family
- Student - NP - Neonatal
- Student - NP - Women's health
- Student - Nurse Educator
- Student - Nursing Informatics
- Student - Pharmacy School
- Student - Podiatry School
- Student - Registered nurse (RN)
- Student - Undergraduate - Allied Health
- Public Health - Infectious Disease Control
- Student - 9 - 12 (secondary)
- Student - Chiropractic School
- Student - CNS - Family
- Student - CNS - Pediatrics
- Student - CNS - Women's health and pediatrics
- Student - Dental Hygiene
- Student - Graduate - Allied Health
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Graduate - Social Work
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - Midwife (non-nurse)
- Student - NP - Adult
- Student - NP - Child/Adolescent Psychiatric/Mental Health
- Student - NP - Family Psychiatric/Mental Health
- Student - NP - Other advanced nurse specialists
- Student - Nurse Administrator
- Student - Nurse midwife
- Student - Occupational Therapy
- Student - Physical Therapy
- Student - Post-high school / Pre-college
- Student - Rehabilitation Therapy
- Student - Undergraduate - Clinical Laboratory Services
- Student - Dental School
- Student - Graduate - Clinical Laboratory Services
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Home Health Aide
- Student - Medical Assistant
- Student - NP - Acute care adult gerontology
- Student - NP - Adult gerontology
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Pediatrics
- Student - Nurse Anesthetist
- Student - Nurse Researchers/Scientists
- Student - Optometry
- Student - Physician Assistant
- Student - Public Health Nurse
- Student - Speech Therapy
- Student - Undergraduate - Other
- Student - Undergraduate - Radiological Technician

- Student - Undergraduate - Public Health
- Student - Undergraduate - Radiological Assistant



Note: Student disciplines are noted with the student identifier (e.g., Student- Medical School)



Note: Advanced trainee disciplines (residents and fellows) are noted with professional identifiers (e.g., Medicine- Dermatology)

PC-3 - Entering Length of Training Program

No. Record	Type of Training Program (1)	Type of Training Activity (2)	Name of Training Activity (3)	Select Education Level(s) of Participants (4)	Enter Length of Training Program in Clock Hours (5)
	Block 1	Block 1d	Block 1d.1	Block 1e	Block 1f
1	New Record	Structured Summer Program Program 1	Summer Program 1	Program 1	<input type="text"/>

Figure 15. PC-3 - Entering Length of Training Program

Enter Length of Training Program in Clock Hours: Enter the duration, in clock hours, of each structured training program during the current reporting period by clicking on the drop-down menu in Column 5 (Block 1f).



Note: For training programs less than one (1) hour, provide a decimal value by dividing the total number of minutes the course lasted by 60 (e.g., a 15-minute course would entered as $15/60 = .25$).

PC-3 - Selecting Whether Public Health Careers Content Was Offered

No. Record	Type of Training Program (1)	Type of Training Activity (2)	Name of Training Activity (3)	Select Education Level(s) of Participants (4)	Enter Length of Training Program in Clock Hours (5)	Select Whether Public Health Careers Content Was Offered (6)	Select Whether Clinical or Practicum Training Was Offered (7)	Select Whether Cultural Competency Training Was Offered (8)
	Block 1	Block 1d	Block 1d.1	Block 1e	Block 1f	Block 1g	Block 1h	Block 1i
1	New Record	Structured Summer Program Program 1	Summer Program	Program 1	<input type="text"/>	<input type="text" value="Select one"/>	<input type="text"/>	<input type="text"/>

Figure 16. PC-3 - Selecting Whether Public Health Careers Content Was Offered

Select Whether Public Health Careers Content Was Offered:

Select whether each structured training program exposed participants to public health careers by choosing **one** of the following options from the drop-down menu under Column 6 (Block 1g):

- Yes
- No

PC-3 - Selecting Whether Clinical or Practicum Training Was Offered

No. Record	Type of Training Program (1)	Type of Training Activity (2)	Name of Training Activity (3)	Select Education Level(s) of Participants (4)	Enter Length of Training Program in Clock Hours (5)	Select Whether Public Health Careers Content Was Offered (6)	Select Whether Clinical or Practicum Training Was Offered (7)	Select Whether Cultural Competency Training Was Offered (8)
1	New Record	Structured Summer Program Program 1	Summer Program	Program 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select one"/>

Figure 17. PC-3 - Selecting Whether Clinical or Practicum Training Was Offered

Select Whether Clinical or Practicum Training Was Offered:

Select whether each structured training program included a clinical training or practicum component by choosing **one** of the following options from the drop-down menu under Column 7 (Block 1h):

- Yes
- No

PC-3 - Selecting Whether Cultural Competency Training Was Offered

No. Record	Type of Training Program (1)	Type of Training Activity (2)	Name of Training Activity (3)	Select Education Level(s) of Participants (4)	Enter Length of Training Program in Clock Hours (5)	Select Whether Public Health Careers Content Was Offered (6)	Select Whether Clinical or Practicum Training Was Offered (7)	Select Whether Cultural Competency Training Was Offered (8)	
	Block 1	Block 1d	Block 1d.1		Block 1f	Block 1g	Block 1h	Block 1i	
1	New Record	Structured Summer Program Program 1	Summer Program	Program 1	<input type="text"/>	<input type="text"/>	<input type="text" value="Select one"/>	<input type="text" value="Select one"/>	<input type="text" value="Select one"/>

Figure 18. PC-3 - Selecting Whether Cultural Competency Training Was Offered

Select Whether Cultural Competency Training Was Offered:

Select whether each structured training program provided participants with cultural competency-related training by choosing **one** of the following options from the drop-down menu under Column 8 (Block 1i):

- Yes
- No

PC-3 - Selecting Type(s) of Partners/Consortia

No. Record Status	Type of Training Program (1)	Type of Training Activity (2)	Name of Training Activity (3)	Select Education Level(s) of Participants (4)	Enter Length of Training Program in Clock Hours (5)	Select Whether Public Health Careers Content Was Offered (6)	Select Whether Clinical or Practicum Training Was Offered (7)	Select Whether Cultural Competency Training Was Offered (8)	Select Type(s) of Partners/Consortia Used to Offer this Training (9)	Select Training Activity Status in the Current Reporting Period (10)
1	New Record	Structured Summer Program Summer Program Summer Program 1	Program 1	Block 1e	Block 1f	Block 1g	Block 1h	Block 1i	Block 2	Ongoing

Academic institution
 Educational institution (Grades K - 12)
 Federal Government - Veterans Affairs

Figure 19. PC-3 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia Used to Offer this Training: Select the type(s) of partnerships or consortia used or established for the purpose of offering each structured training program during the current reporting period by clicking on the drop-down menu under Block 2 and choosing **all that apply** from the following options:

- Academic department - outside the institution
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Health Center (CHC)
- Educational institution (Grades K - 12)
- Federal Government - AHRQ
- Federal Government - FDA
- Federal Government - Other HHS Agency/Office
- Federal Government -Other
- Geriatric Behavioral or Mental Health Units
- Academic department - within the institution
- Alzheimer’s Association/Chapters
- Area Agencies on Aging
- Community Mental Health Center
- Federal Government - Veterans Affairs
- Federal Government - CDC
- Federal Government - IHS
- Federal Government - Other HRSA Program
- FQHC or look-alike
- Geriatric consultation services
- Health department - State
- Health insurance/Healthcare Provider Group (e.g.; PPO/HMO)
- Hospital
- No partners/consortia used
- Academic institution
- Alzheimer’s Disease Resource Centers
- Community - based health center (e.g.; free clinic)
- Day and home care programs (i.e. Home Health)
- Federal Government - ACL
- Federal Government - Department of Defense/Military
- Federal Government - NIH
- Federal Government - SAMHSA
- Geriatric ambulatory care and comprehensive units
- Health center (e.g.; free clinic)
- Health department - Tribal

Health Resources and Services Administration
Bureau of Health Workforce

- Health department - Local
- Health disparities research center
- Hospice
- Long-term care facility
- Nonprofit organization (non - faith based)
- Other
- Professional Associations
- State Government
- Tribal Organization
- Nurse managed health clinic
- Physical therapy/Rehabilitation center
- Quality improvement organization
- State Governmental Programs

Annual Performance Report
Academic Year 2015-2016

- Health policy center
- Local Government
- Nonprofit organization (faith - based)
- Nursing home
- Private/For - profit organization
- Senior Center
- Tribal Government



Warning: You may not select "No partners/consortia used" in combination with any other option.



To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

PC-3 — Selecting Type(s) of Community-based Collaborator(s)

Select Whether Public Health Careers Content Was Offered (6) Block 1g	Select Whether Clinical or Practicum Training Was Offered (7) Block 1h	Select Whether Cultural Competency Training Was Offered (8) Block 1i	Select Type(s) of Partners/Consortia Used to Offer this Training (9) Block 2	Select Type of Community-based Collaborator(s) (9a)
<input type="text" value="Select one"/>	<input type="text" value="Select one"/>	<input type="text" value="Select one"/>	<input type="text" value=""/>	<input type="text" value=""/>

Figure 20. PC-3 — Selecting Type(s) of Community-based Collaborator(s)

Select Type of Community-based Collaborator(s): Select the type(s) of community-based collaborators used or established for the purpose of offering each program by clicking on the drop-down menu and choosing all that apply from the following options:

- Area Health Education Center
- Community Mental Health Center
- Federally - qualified health center or look - alike
- Rural Health Clinic
- Community Health Center
- Critical Access Hospital
- Other Community-Based Organization
- N/A

PC-7: Program Characteristics – Practica and Field Placements

PC-7 - Selecting Type(s) of Partners/Consortia

No.	Record Status	Type of Training Program (1) Block 1	Primary Discipline of Individuals Trained (2) Block 1	Select Type(s) of Partners/Consortia Used to Offer this Training (3) Block 2
1	Prior Record	Practicum/Field Placement Student/BSN	Student/BSN	
2	Prior Record	Practicum/Field Placement Student - NP - Family	Student - NP - Family	
3	Prior Record	Practicum/Field Placement Student - Graduate - Other	Student - Graduate - Other	
4	Prior Record	Practicum/Field Placement Student - Registered Nurse - BSN	Student - Registered Nurse - BSN	
5	Prior Record	Practicum/Field Placement Student/Medicine – other	Student/Medicine – other	
6	Prior Record	Practicum/Field Placement Student - Undergraduate - Public Health	Student - Undergraduate - Public Health	
7	New Record	Practicum/Field Placement Student - NP - Adult Psychiatric/Mental health	Student - NP - Adult Psychiatric/Mental health	

Figure 21. PC-7 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia Used to Offer this Training: Complete Column 3 (Block 2) by selecting all of the type(s) of partnerships or consortia used or established for the purpose of offering each practicum/field placement program for community-based clinical training in primary care during the current reporting period.

- Academic department - outside the institution
- Alzheimer’s Association/Chapters
- Area Agencies on Aging
- Day and home care programs (i.e. Home Health)
- Federal Government - ACL
- Federal Government - Department of Defense/Military
- Federal Government - NIH
- Federal Government - SAMHSA
- Geriatric ambulatory care and comprehensive units
- Health department - Local
- Health insurance/Healthcare Provider Group
- Academic department - within the institution
- Alzheimer’s Disease Resource Centers
- Community - based health center (e.g.; free clinic)
- Educational institution (Grades K - 12)
- Federal Government - AHRQ
- Federal Government - FDA
- Federal Government - Other HHS Agency/Office
- Federal Government -Other
- Geriatric Behavioral or Mental Health Units
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Health Center (CHC)
- Federal Government - Veterans Affairs
- Federal Government - CDC
- Federal Government - IHS
- Federal Government - Other HRSA Program
- FQHC or look-alike
- Geriatric consultation services
- Health department - Tribal
- Hospital

Health Resources and Services Administration
Bureau of Health Workforce

(e.g.; PPO/HMO)

- Local Government
- Nonprofit organization (faith - based)
- Nursing home
- Private/For - profit organization
- Senior Center
- Tribal Organization

- Health department - State
- Hospice
- Long-term care facility
- Nonprofit organization (non - faith based)
- Other
- Professional Associations
- State Government

Annual Performance Report
Academic Year 2015-2016

- No partners/consortia used
- Nurse managed health clinic
- Physical therapy/Rehabilitation center
- Quality improvement organization
- Tribal Government



Warning: You may not select "No partners/consortia used" in combination with any other option.

PC-7 - Selecting Type(s) of Community-based Collaborator(s)

Record Status	Type of Training Program (1) Block 1	Primary Discipline of Individuals Trained (2) Block 1I	Select Type(s) of Partners/Consortia Used to Offer this Training (3) Block 2	Select Type of Community-based Collaborator(s) (3a)
Prior Record	Practicum/Field Placement Student - Medical School	Student - Medical School	Academic department - wii	<input type="text"/>

Figure 22. PC-7 - Selecting Type(s) of Community-based Collaborator(s)

Select Type of Community-based Collaborator(s): Select the type(s) of community-based collaborators used or established for the purpose of offering each program by clicking on the drop-down menu and choosing all that apply from the following options:

- Area Health Education Center
- Community Mental Health Center
- Federally - qualified health center or look - alike
- Rural Health Clinic
- Community Health Center
- Critical Access Hospital
- Other Community-Based Organization
- N/A

PC-7 - Entering Enrollment Information



Warning: For the PC-7 Form, Program Completers are included in the overall Enrollee count (i.e., Block 8 completers are a subset of Block 3 enrollees).

Enter Total # Enrolled (whether funded by BHW or not)		
Total (4) Block 3	URM (5) Block 3a	Disadvantaged Background and not URM (6) Block 3b
<input type="text"/>	<input type="text"/>	<input type="text"/>

Figure 23. PC-7 - Entering Enrollment Information

Enter Total # Enrolled (whether funded by BHW or not): Total: In Column 4 (Block 3), enter the total number of students who participated in each practicum/field placement during the current reporting period.

Enter Total # Enrolled (whether funded by BHW or not): URM: In Column 5 (Block 3a), enter the number of students who participated in the practicum/field placement during the current reporting period and were underrepresented minorities.

Enter Total # Enrolled (whether funded by BHW or not): Disadvantaged Background and not URM: In Column 6 (Block 3b), enter the number of students from disadvantaged backgrounds who participated in the practicum/field placement during the current reporting period but were not underrepresented minorities.

 **Warning: Trainees who completed their practica/field placements ARE included in the Block 3 count of enrollees.**

 **Warning: Trainees who permanently left their practicum/field placement before completion (i.e., attrition) are counted separately in Column 9 (Block 9).**

 *Note: Blocks 3a and 3b are subsets of Block 3.*

 *Reference: Refer to the glossary for definitions of disadvantaged background and underrepresented minority.*

Example: The John Doe Medical School had 20 medical students participate in practicum/field placement programs for community-based clinical training in primary care during the reporting period. Each student participated in 2 practica/field placement rotations. Among the 20 medical students who participated, 9 students were underrepresented minorities. In addition, 3 students were from disadvantaged backgrounds, but were not under-represented minorities.

- *In Column 4 (Block 3), the reporting official would enter 40 enrollees.*
- *In Column 5 (Block 3a), the reporting official would enter 18 URM enrollees.*
- *In Column 6 (Block 3b), the reporting official would enter 6 URM enrollees not from disadvantaged backgrounds.*

PC-7 - Entering Graduate Information



Warning: For the PC-7 Form, Program Completers are included in the overall Enrollee count (i.e., Block 8 completers are a subset of Block 3 enrollees).

Enter Total # Graduated/Completed (whether funded by BHW or not)	
Total (7) Block 8	URM (8) Block 8a
<input type="text"/>	<input type="text"/>

Figure 24. PC-7 - Entering Graduate Information

Enter Total # Graduated/Completed (whether funded by BHW or not): Total: In Column 7 (Block 8), enter the aggregate number of trainee rotations that were completed for each practicum/field placement program. Count all completed trainee rotations for the practicum/field placement program, regardless of whether or not the trainee directly received a BHW-funded financial award.

Enter Total # Graduated/Completed (whether funded by BHW or not): URM: In Column 8 (Block 8a), enter the aggregate number of trainee rotations that were completed for each practicum/field placement program in which the trainees were under-represented minorities.



Warning: Trainees who permanently left their practicum/field for community-based clinical training in primary care before completion (i.e., attrition) are counted separately in Column 9 (Block 9).



Note: Block 8a (URM) is a subset of Block 8 (program completion count).



Reference: Refer to the glossary for definitions of disadvantaged background and underrepresented minority.

Example: The John Doe Medical School had 20 medical students participate in practicum/field placement programs for community-based clinical training in primary care during the reporting period. Each student participated in two practica/field placement rotations (i.e., 40 placements total). Among the 40 rotations, 12 were completed during the current reporting period, 4 of which were completed by underrepresented minority students.

- In Column 7 (Block 8), the reporting official would enter 12 program completers.*
- In Column 8 (Block 8a), the reporting official would enter 4 URM program completers.*

PC-7 - Entering Attrition Information



Warning: For the PC-7 Form, Discontinued trainees are NOT included in the overall Enrollee count (i.e., Block 9 trainees are NOT a subset of Block 3 enrollees).

Enter Total # Who left the Program Before Completion (whether funded by BHW or not)	
Total (9) Block 9	URM (10) Block 9a
<input type="text"/>	<input type="text"/>

Figure 25. PC-7 - Entering Attrition Information

Enter Total # Who left the Program Before Completion (whether funded by BHW or not): Total: In Column 9 (Block 9), enter the total number of students who permanently left their practicum/field placement programs before completion during the current reporting period.

Enter Total # Who left the Program Before Completion (whether funded by BHW or not): URM: In Column 10 (Block 9a), enter the number of students who permanently left their practicum/field placement programs before completion during the current reporting period and were underrepresented minorities.



Note: Block 9a is a subset of Block 9.



Reference: Refer to the glossary for definitions of disadvantaged background and underrepresented minority.

Example: The John Doe Medical School had 20 medical students participate in practicum/field placement programs for community-based clinical training in primary care during the reporting period. Each student participated in two practica/field placements (i.e., 40 placements total). For 8 of these rotations, the student participant permanently discontinued prior to program completion. None of the discontinued participants were underrepresented minority students.

- *In Column 9 (Block 9), the reporting official would enter 8 discontinued trainees.*
- *In Column 10 (Block 9a), the reporting official would enter 0 URM discontinued trainees.*



To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Legislative Requirements & Demographic Variables—LR and DV Subforms

LR and DV - Introduction

You must complete the LR and DV tables for each Training Program offered during the reporting period:

- **Structured and Unstructured Training Programs:** Enrollees and Program Completers can NOT be simultaneously reported
 - **Ongoing Programs:** Enter counts only for Enrollees (completer counts must be zeroes)
 - **Completed Programs:** Enter counts only for Program Completers (enrollee counts must be zeroes)
- **Practica/Field Placement Programs:** Enrollees and Program Completers can be simultaneously reported

LR-1a: Trainees by Training Category

LR-1 - Entering Enrollees Count



Warning: For the LR and DV forms, Enrollees and Program Completers must be counted separately (i.e., completers are NOT a subset of enrollees).

View Prior Period Data

LR-1a

No. Record Status	Type of Training Program (1)	Trainees by Training Category			Attrition		Select Training Activity Status in the Current Reporting Period (16)
		Enter # of Enrollees (2) Block 1	Enter # of Program Completers (6) Block 5	Enter # of Individuals who left the Program before Completion (7) Block 6	Enter # of URM who left the Program before Completion (8) Block 6a		
1 Prior Record	Residency Student - Registered Nurse - BSN	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	N/A
2 New Record	Internship Student - NP - Family	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	N/A

Figure 26. LR-1 - Entering Enrollees Count

Trainees by Training Category: Enter # of Enrollees:

- **For Ongoing Programs** (Structured and Unstructured): Enter the number of students who participated in each structured or unstructured training program in the textbox in Column 2 (Block 1).
- **For Completed Programs** (Structured and Unstructured): Enter a zero ("0") in Column 2 (Block 1).
- **For Active Practica/Field Placements:** Enter the number of students who participated in each practicum/field placement program in the textbox in Column 2 (Block 1).



Warning: For Completed Structured and Unstructured programs, enter zeroes ("0") for the aggregate number of enrollees who participated in each structured or unstructured training program in the textbox in Column 2 (Block 1).



Note: Do not count individuals who permanently left a training program before completion during the annual reporting period Column 6 (Block 5). These individuals will be captured separately in Column 7 (Block 6).



Note: Active Practica/Field Placement programs may simultaneously report enrollees and completers.

LR-1 - Entering Program Completers Count



Warning: For the LR and DV forms, Enrollees and Program Completers must be counted separately (i.e., completers are NOT a subset of enrollees).

No. Record Status	Type of Training Program (1)	Trainees by Training Category		Attrition		Select Training Activity Status in the Current Reporting Period (16)
		Enter # of Enrollees (2) Block 1	Enter # of Program Completers (6) Block 5	Enter # of Individuals who left the Program before Completion (7) Block 6	Enter # of URM who left the Program before Completion (8) Block 6a	
1 New Record	Structured Summer Program Program 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Ongoing
2 New Record	Unstructured Pre-college Preparation Program 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Complete
3 New Record	Practicum/Field Placement Student – Allied Health	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	N/A

Figure 27. LR-1 - Entering Program Completers Count

Trainees by Training Category: Enter # of Program Completers:

- **For Ongoing Programs** (Structured and Unstructured): Enter a zero (“0”) in Column 6 (Block 5).
- **For Completed Programs** (Structured and Unstructured): Enter the number of students who completed each structured or unstructured training program in the textbox in Column 6 (Block 5).
- **For Active Practica/Field Placements:** Enter the number of students who completed each practicum/field placement program in the textbox in Column 6 (Block 5).



Warning: For Ongoing Structured and Unstructured programs, the numbers of program completers should be zeroes.



Note: Do not count individuals who permanently left a training program before completion during the annual reporting period Column 6 (Block 5). These individuals will be captured separately in Column 7 (Block 6).



Note: Active Practica/Field Placement programs may simultaneously report enrollees and completers.

LR-1 - Entering Attrition Information



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

No. Record Status	Type of Training Program (1)	Trainees by Training Category		Attrition		Select Training Activity Status in the Current Reporting Period (16)
		Enter # of Enrollees (2) Block 1	Enter # of Program Completers (6) Block 5	Enter # of Individuals who left the Program before Completion (7) Block 6	Enter # of URM who left the Program before Completion (8) Block 6a	
1 New Record	Structured Summer Program Program 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Ongoing
2 New Record	Unstructured Pre-college Preparation Program 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Complete
3 New Record	Practicum/Field Placement Student – Allied Health	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	N/A

Figure 28. LR-1 - Entering Attrition Information

Attrition: Enter # of Individuals who left the Program before Completion: Enter the number of students who permanently left each training program before completion during the current reporting period in the textbox in Column 7 (Block 6).

Attrition: Enter # of URM who left the Program before Completion: Of the individuals reported in Column 7 (Block 6), **enter the number of underrepresented minority students** who permanently left each training program before completion during the current reporting period in the textbox in Column 8 (Block 6a).



Note: Counts reported in Column 8 (Block 6a) are a subset of those reported in Column 7 (Block 6).



To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

LR-2: Trainees by Age & Sex

LR-2 - Entering Enrollees Count by Age and Gender



Warning: For the LR and DV forms, Enrollees and Program Completers must be counted separately (i.e., completers are NOT a subset of enrollees).

Type of Training Program	Age Group of Trainees	Sex: Male		Sex: Female		Select Training Activity Status in the Current Reporting Period
		Enter # of Enrollees	Enter # of Program Completers	Enter # of Enrollees	Enter # of Program Completers	
(1)	(2)	(3) Blocks 1-6	(7) Blocks 49-54	(8) Blocks 7-12	(12) Blocks 55-60	(18)
Structured Summer Program ActivityName1	19 and Under					Ongoing
Structured Summer Program ActivityName1	20 – 29 years					Ongoing
Structured Summer Program ActivityName1	30 – 39 years					Ongoing
Structured Summer Program ActivityName1	40 – 49 years					Ongoing
Structured Summer Program ActivityName1	50 – 59 years					Ongoing
Structured Summer Program ActivityName1	60 and Over					Ongoing
Structured Summer Program ActivityName1	Age Not Reported					Ongoing

Figure 29. LR-2 - Entering Enrollees Count by Age and Gender

Sex: Male: Enter # of Enrollees:

- For each age group, enter the number of male enrollees in Column 3 (Blocks 1-6) who participated in each training program.
- If there were no male enrollees in a specific age group who participated in the training program during the current annual reporting period, enter a zero (“0”) in the appropriate age block.

Sex: Female: Enter # of Enrollees:

- For each age group, enter the number of female enrollees in Column 8 (Blocks 7-12) who participated in each training program.

- If there were no female enrollees in a specific age group who participated in the training program during the current annual reporting period, enter a zero (“0”) in the appropriate age block.



Warning: For completed structured or unstructured training programs, all entries for enrollees in Columns 3 and 8 must be zeroes (“0”).



Warning: For each training program, the sum total of enrollees across Columns 3 and 8 must be equal to the sum total of enrollees entered in LR-1, Column 2.



Note: Active Practica/Field Placement programs may simultaneously report enrollees and completers.

LR-2 - Entering Program Completers Count by Age and Gender



Warning: For the LR and DV forms, Enrollees and Program Completers must be counted separately (i.e., completers are NOT a subset of enrollees).

Type of Training Program (1)	Age Group of Trainees (2)	Sex: Male		Sex: Female		Select Training Activity Status in the Current Reporting Period (18)
		Enter # of Enrollees (3) Blocks 1-6	Enter # of Program Completers (7) Blocks 49-54	Enter # of Enrollees (8) Blocks 7-12	Enter # of Program Completers (12) Blocks 55-60	
Structured Summer Program ActivityName2	19 and Under					Complete
Structured Summer Program ActivityName2	20 – 29 years					Complete
Structured Summer Program ActivityName2	30 – 39 years					Complete
Structured Summer Program ActivityName2	40 – 49 years					Complete
Structured Summer Program ActivityName2	50 – 59 years					Complete
Structured Summer Program ActivityName2	60 and Over					Complete
Structured Summer Program ActivityName2	Age Not Reported					Complete

Figure 30. LR-2 - Entering Program Completers Count by Age and Gender

Sex: Male: Enter # of Program Completers:

- For each age group, enter the **number of male students in Column 7 (Blocks 49-54) who completed each training program.**
- If there were no male students in a specific age group who completed the training program during the current annual reporting period, enter a zero (“0”) in the appropriate age block.

Sex: Female: Enter # of Program Completers:

- For each age group, enter the **number of female students in** Column 12 (Blocks 55-60) **who completed each training program.**
- If there were no female students in a specific age group who completed the training program during the current annual reporting period, enter a zero (“0”) in the appropriate age block.



Warning: For ongoing structured or unstructured training programs, all entries for program completers in Columns 7 and 12 must be zeroes (“0”).



Warning: For each training program, the sum total of program completers across Columns 7 and 12 must be equal to the sum total of enrollees entered in LR-1, Column 6.



Note: Active Practica/Field Placement programs may simultaneously report enrollees and completers.



To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

DV-1: Trainees by Racial & Ethnic Background

DV-1 - Entering Enrollees Count by Race and Ethnicity



Warning: For the LR and DV forms, Enrollees and Program Completers must be counted separately (i.e., completers are NOT a subset of enrollees).

No.	Record Status	Type of Training Program	Race Category	Ethnicity: Hispanic/Latino		Ethnicity: Non-Hispanic/Non-Latino		Select Training Activity Status in the Current Reporting Period
				Enter # of Enrollees	Enter # of Program Completers	Enter # of Enrollees	Enter # of Program Completers	
		(1)	(2)	(3) Blocks 1-7	(7) Blocks 29-35	(8) Blocks 36-42	(12) Blocks 64-70	(18)
1	Prior Record	Structured Summer Program ActivityName1	American Indian or Alaska Native					Ongoing
2	Prior Record	Structured Summer Program ActivityName1	Black or African American					Ongoing
3	Prior Record	Structured Summer Program ActivityName1	Asian					Ongoing
4	Prior Record	Structured Summer Program ActivityName1	Native Hawaiian or Pacific Islander					Ongoing
5	Prior Record	Structured Summer Program ActivityName1	White					Ongoing
6	Prior Record	Structured Summer Program ActivityName1	More than one Race					Ongoing
7	Prior Record	Structured Summer Program ActivityName1	Race Not Reported					Ongoing

Figure 31. DV-1 - Entering Enrollees Count by Race and Ethnicity

Ethnicity: Hispanic/Latino: Enter # of Enrollees: For each training program, enter the aggregate number of Hispanic/Latino enrollees from each race category in Column 3. If there were no Hispanic/Latino enrollees in a specific race category, enter a zero (“0”) in the appropriate textbox.

Ethnicity: Non-Hispanic/Non-Latino: Enter # of Enrollees: For each training program, enter the aggregate number of non-Hispanic/non-Latino enrollees from each race category in Column 8. If there were no non-Hispanic/non-Latino enrollees in a specific race category, enter a zero (“0”) in the appropriate textbox.



Warning: For completed structured and unstructured training programs, all entries for enrollees in Columns 3 and 8 must be zeroes (“0”).



Warning: The total number of enrollees across Columns 3 and 8 must be equal to the total number of enrollees entered in LR-1, Column 2.



Note: Active Practica/Field Placement programs may simultaneously report enrollees and completers.

DV-1 - Entering Program Completers Count by Race and Ethnicity



Warning: For the LR and DV forms, Enrollees and Program Completers must be counted separately (i.e., completers are NOT a subset of enrollees).

No.	Record Status	Type of Training Program	Race Category	Ethnicity: Hispanic/Latino		Ethnicity: Non-Hispanic/Non-Latino		Select Training Activity Status in the Current Reporting Period
				Enter # of Enrollees	Enter # of Program Completers	Enter # of Enrollees	Enter # of Program Completers	
		(1)	(2)	(3) Blocks 1-7	(7) Blocks 29-35	(8) Blocks 36-42	(12) Blocks 64-70	(18)
1	Prior Record	Structured Summer Program ActivityName2	American Indian or Alaska Native					Complete
2	Prior Record	Structured Summer Program ActivityName2	Black or African American					Complete
3	Prior Record	Structured Summer Program ActivityName2	Asian					Complete
4	Prior Record	Structured Summer Program ActivityName2	Native Hawaiian or Pacific Islander					Complete
5	Prior Record	Structured Summer Program ActivityName2	White					Complete
6	Prior Record	Structured Summer Program ActivityName2	More than one Race					Complete
7	Prior Record	Structured Summer Program ActivityName2	Race Not Reported					Complete

Figure 32. DV-1 - Entering Program Completers Count by Race and Ethnicity

Ethnicity: Hispanic/Latino: Enter # of Program Completers: For each training program, enter the aggregate number of Hispanic/Latino program completers from each race category in Column 7. If there were no Hispanic/Latino program completers in a specific race category, enter a zero (“0”) in the appropriate textbox.

Ethnicity: Non-Hispanic/Non-Latino: Enter # of Program Completers: For each training program, enter the aggregate number of Non-Hispanic/Non-Latino program completers from each race category in Column 12. If there were no Non-Hispanic/Non-Latino program completers in a specific race category, enter a zero (“0”) in the appropriate textbox.



Warning: For ongoing structured or unstructured training programs, all entries for program completers in Columns 7 and 12 must be zeroes (“0”).



Warning: For each training program, the sum total of program completers across Columns 7 and 12 must be equal to the sum total of enrollees entered in LR-1, Column 6.



Note: Active Practica/Field Placement programs may simultaneously report enrollees and completers.



To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

DV-2: Trainees from a Disadvantaged Background

DV-2 - Entering Enrollees Count from Disadvantaged Background



Warning: For the LR and DV forms, Enrollees and Program Completers must be counted separately (i.e., completers are NOT a subset of enrollees).

No.	Record Status	Type of Training Program	Enrollees		Program Completers		Select Training Activity Status in the Current Reporting Period
			Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM	Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM	
		(1)	(2) Block 1	(3) Block 2	(10) Block 9	(11) Block 10	(12)
1	Prior Record	Structured Summer Program ActivityName1					Ongoing

Figure 33. DV-2 - Entering Enrollees Count from Disadvantaged Background

Enrollees: Enter Total # from Disadvantaged Background: For each training program, enter the aggregate number of enrollees from disadvantaged backgrounds in the textbox in Column 2 (Block 1).

Enrollees: Enter # from Disadvantaged Background who are not URM: For each training program, enter the aggregate number of enrollees from disadvantaged backgrounds who were NOT URM students in the textbox in Column 3 (Block 2).



Warning: For completed structured and unstructured programs, enter zeroes for enrollee counts in Columns 2 and 3 (Blocks 1 and 2).



Note: Counts reported in Column 3 (Block 2) ARE a subset of counts reported in Column 2 (Block 1).

 *Note: Active Practica/Field Placement programs may simultaneously report enrollees and completers.*

 *Reference: Refer to the glossary for a definition of disadvantaged background and underrepresented minority.*

DV-2 - Entering Program Completers Count from Disadvantaged Background



Warning: For the LR and DV forms, Enrollees and Program Completers must be counted separately (i.e., completers are NOT a subset of enrollees).

No.	Record Status	Type of Training Program	Enrollees		Program Completers		Select Training Activity Status in the Current Reporting Period
			Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM	Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM	
		(1)	(2) Block 1	(3) Block 2	(10) Block 9	(11) Block 10	(12)
1	Prior Record	Structured Summer Program ActivityName2					Complete

Figure 34. DV-2 - Entering Program Completers Count from Disadvantaged Background

Program Completers: Enter Total # from Disadvantaged Background: For each training program, enter the aggregate number of program completers from disadvantaged backgrounds in the textbox in Column 10 (Block 9).

Program Completers: Enter # from Disadvantaged Background who are not URM: For each training program, enter the aggregate number of program completers from disadvantaged backgrounds who were NOT URM students in the textbox in Column 11 (Block 10).



Warning: For ongoing structured and unstructured programs, enter zeroes for program completer counts in Columns 10 and 11 (Blocks 9 and 10).



Note: Counts reported in Column 11 (Block 10) ARE a subset of counts reported in Column 10 (Block 9).



Note: Active Practica/Field Placement programs may simultaneously report enrollees and completers.



Reference: Refer to the glossary for a definition of disadvantaged background and underrepresented minority.



To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

DV-3: Trainees from a Rural Background

DV-3 - Entering Enrollees Count from Rural Residential Background



Warning: For the LR and DV forms, Enrollees and Program Completers must be counted separately (i.e., completers are NOT a subset of enrollees).

No.	Record Status	Type of Training Program	Trainees from Rural Residential Background		Select Training Activity Status in the Current Reporting Period
			Enter # of Enrollees from a Rural Background	Enter # of Program Completers from a Rural Background	
		(1)	(2) Block 1	(6) Block 5	(7)
1	Prior Record	Structured Summer Program ActivityName1			Ongoing

Figure 35. DV-3 - Entering Enrollees Count from Rural Residential Background

Trainees from Rural Residential Background: Enter # of Enrollees from a Rural Background: For each training program, enter the aggregate number of enrollees from rural residential backgrounds in the textbox in Column 2 (Block 1).



Warning: For completed structured or unstructured programs, enter a zero for enrollees in Column 2 (Block 1).



Note: Active Practica/Field Placement programs may simultaneously report enrollees and completers.



Reference: Refer to the glossary for a definition of rural residential background.

DV-3 - Entering Program Completers Count from Rural Residential Background



Warning: For the LR and DV forms, Enrollees and Program Completers must be counted separately (i.e., completers are NOT a subset of enrollees).

No.	Record Status	Type of Training Program	Trainees from Rural Residential Background		Select Training Activity Status in the Current Reporting Period
			Enter # of Enrollees from a Rural Background	Enter # of Program Completers from a Rural Background	
		(1)	(2) Block 1	(6) Block 5	(7)
1	Prior Record	Structured Summer Program ActivityName2			Complete

Figure 36. DV-3 - Entering Program Completers Count from Rural Residential Background

Trainees from Rural Residential Background: Enter # of Program Completers from a Rural Background: For each program, enter the aggregate number of program completers from rural residential backgrounds in the textbox in Column 6 (Block 5).



Warning: For ongoing structured or unstructured programs, enter a zero for program completers in Column 6 (Block 5).



Note: Active Practica/Field Placement programs may simultaneously report enrollees and completers.



Reference: Refer to the glossary for a definition of rural residential background.



To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Experiential Characteristics—EXP Subforms

EXP - Introduction

1. Purpose: The EXP subforms are used to characterize experiential or clinical training characteristics, including training sites and the number and profession/discipline of trainees.

- The EXP-1 Setup form captures information about the sites used by grantees to provide trainees with clinical or experiential training
- The EXP-2 subform collects additional information about each site that was entered in the EXP-1 Setup form.
- The EXP-3 subform collects information about the profession and discipline of individuals trained at each site that was entered in the EXP-1 Setup form.

2. Order of Subforms:

- EXP subforms **MUST** be completed in order, otherwise drop-down menus will not prepopulate correctly.
- You must complete and ‘Save and Validate’ EXP-1 first before proceeding to EXP-2.
- Likewise, you must complete and then ‘Save and Validate’ EXP-2 before proceeding to EXP-3.

3. Pre-population of Prior Records (training sites) reported previously:

- The BPMH system will prepopulate the names each site previously reported in the Saved Records Table within the EXP-1 subform.
- You must indicate whether each previously-reported site was used during the current annual reporting period.
 - **If "Yes" was selected**, the BPMH system will prepopulate certain blocks in the EXP-2 subform and display it as an option in the EXP-3 subform
 - **If "No" was selected**, the BPMH system will not include the site as an option in the EXP-2 and EXP-3 subforms.



Warning: Complete the EXP subforms only for sites associated with field placements for community-based clinical training used for student rotations reported on the PC-7 form.

EXP-1: Training Site Setup

EXP-1 - Entering Site Name

Fields with * are required

* Add Site

Enter the Site's Name

Add Record

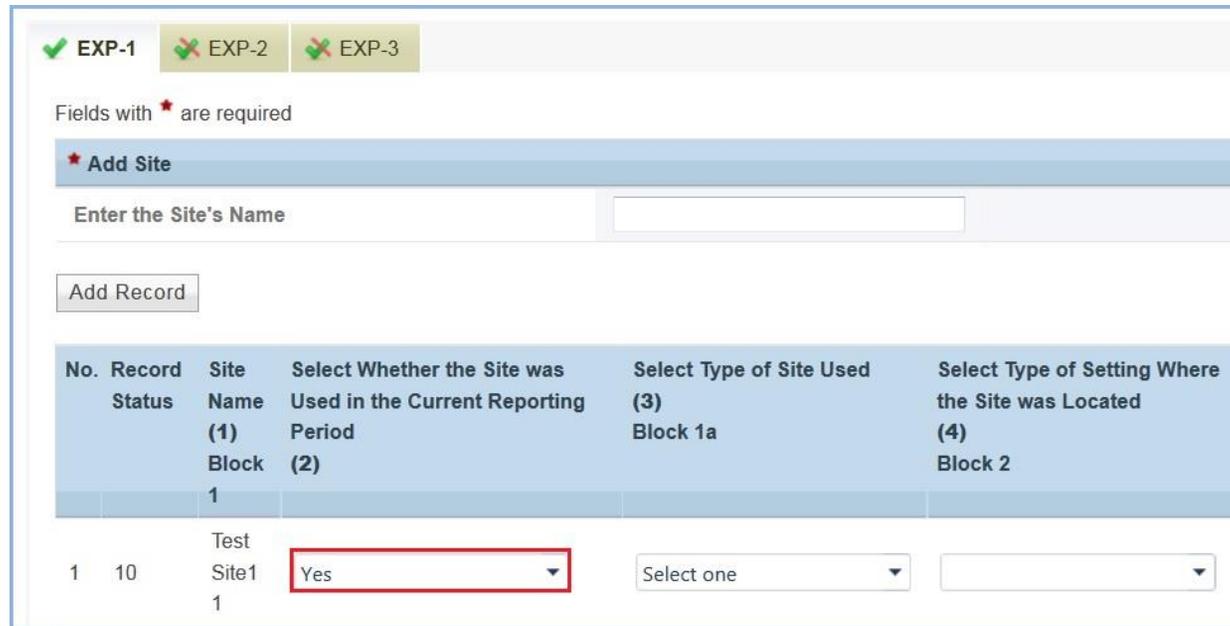
No. Record Status	Site Name (1) Block (2)	Select Whether the Site was Used in the Current Reporting Period (3)	Select Type of Site Used (3) Block 1a	Select Type of Setting Where the Site was Located (4) Block 2
1 10	Test Site1 1	Yes	Select one	

Figure 37. EXP-1 - Entering Site Name

Site Name:

1. Enter the name of the site used to train individuals during the current reporting period.
2. Next, Click the “Add Record” button.
3. Repeat this process as necessary.

EXP-1 - Selecting Whether the Site was Used in the Current Period



Fields with * are required

* Add Site

Enter the Site's Name

Add Record

No. Record	Site Name	Select Whether the Site was Used in the Current Reporting Period	Select Type of Site Used (3) Block 1a	Select Type of Setting Where the Site was Located (4) Block 2
1	Test Site1	Yes	Select one	

Figure 38. EXP-1 - Selecting Whether the Site was Used in the Current Period

Select Whether the Site was Used in the Current Reporting Period: Select whether each site was used during the annual reporting period by clicking on the drop-down menu and choosing **one** of the following options:

- Yes
- No



Warning: For NEW sites, you must select "Yes" in Column 2.



Note: If "No" is selected in Column 2, then the training site will not populate in the dropdown menus on the EXP-2 and EXP-3 subforms.

EXP-1 - Selecting Type of Site Used

The screenshot shows a web form for 'EXP-1'. At the top, there are three tabs: 'EXP-1' (active, green checkmark), 'EXP-2' (inactive, red X), and 'EXP-3' (inactive, red X). Below the tabs, a message states 'Fields with * are required'. A blue header bar contains a red star icon and the text 'Add Site'. Below this is a text input field labeled 'Enter the Site's Name'. A button labeled 'Add Record' is positioned below the input field. The main part of the form is a table with the following columns: 'No. Record Status', 'Site Name (1) Block (2)', 'Select Whether the Site was Used in the Current Reporting Period (3)', 'Select Type of Site Used (3) Block 1a', and 'Select Type of Setting Where the Site was Located (4) Block 2'. The first row of data shows '1' in the 'No. Record Status' column, '10' in the 'Site Name' column, 'Test Site1' in the 'Block (2)' column, 'Yes' in the 'Select Whether' column, 'Select one' in the 'Select Type of Site Used' column (highlighted with a red border), and an empty dropdown in the 'Select Type of Setting' column.

Figure 39. EXP-1 - Selecting Type of Site Used

Select Type of Site Used: Select the type of sites used to train individuals during the current reporting period by clicking on the drop-down menu under Block 1a and choosing from one of the following options.

- Academic institution
- Aerospace operations setting
- Community - based care programs for elderly mentally challenged individuals
- Community care programs for elderly mentally challenged individuals
- Critical Access Hospital
- Emergency Room
- FQHC or look - alike
- Geriatric consultation services
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community - based organization
- Community Health Center (CHC)
- Day and home care programs (e.g., Home Health)
- Federal and State Bureau of
- Acute care services
- Assisted Living Community
- Community Behavioral Health Center
- Community Mental Health Center
- Dentist Office
- Federal Government Office or Agency
- Geriatric Behavioral or Mental Health Units
- Hospital
- International nonprofit/nongovernmental organization

Health Resources and Services Administration
Bureau of Health Workforce

- Independent Living Facility
- Local Government Office or Agency
- Mobile Clinic/Site
- Nurse Managed Health Clinics
- Other community health center (e.g.; free clinic)
- Program of All Inclusive Care for the Elderly
- School - based clinic
- State Government Office or Agency
- Tribal Government
- Veterans Affairs Healthcare (e.g., VA Hospital or clinic)

- Prisons
- Geriatric ambulatory care and comprehensive units
 - Hospice
 - Indian Health Service (IHS) site
 - Local health department
 - National health association
 - Nursing Home
 - Other Oral Health Facility
 - Residential Living Facility
 - Senior Centers
 - State Health Department
 - Tribal Health Department
 - Veterans Affairs Hospital or clinic

Annual Performance Report
Academic Year 2015-2016

- Long - term Care Facility
- National health association or affiliate
- Other
- Physician Office
- Rural Health Clinic
- Specialty clinics (e.g., mental health practice, rehabilitation, substance abuse clinic)
- Surgery Clinic
- Tribal Organization

EXP-1 - Selecting Type of Setting Where the Site was Located

Fields with * are required

* Add Site

Enter the Site's Name

Add Record

No.	Record Status	Site Name (1) Block (2) 1	Select Whether the Site was Used in the Current Reporting Period (3)	Select Type of Site Used (3) Block 1a	Select Type of Setting Where the Site was Located (4) Block 2
1	10	Test Site1 1	Yes	Select one	<input type="text"/>

Figure 40. EXP-1 - Selecting Type of Setting Where the Site was Located

Select Type of Setting Where the Site was Located: Select whether each site used to train individuals during the current reporting period was located in designated settings by clicking on the drop-down menu under Column 4 (Block 2) and choosing all that apply from the following options.

- Medically underserved community
- Primary Care Setting
- Rural area
- None of the above



Warning: None of the above cannot be selected in combination with any other option.

EXP-1 - Entering Site's geographical Data

City (8)	State (9)	Zip Code (10)	Four Digit Zip Code Extension (11)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Figure 41. EXP-1 - Entering Site's geographical Data

City: Enter the name of the city where each training site is located by clicking on the textbox under Column 8.

State: Enter the two-letter abbreviation for the state where each training site is located by clicking on the textbox below Column 9.

Zip Code: Enter the zip code (5 digits) where each training site is located by clicking on the textbox under Column 10.

Four Digit Zip Code Extension: Enter the four-digit zip code extension where each training site is located by clicking on the textbox under Column 11.



To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

EXP-2: Training Site Characteristics

EXP-2 - Selecting Training Program and Site Name



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Type of Training Program	Site Name	Select Type of Site Used
(1)	(2) Block 1	(3) Block 1a
<input type="text"/>	<input type="text"/>	<input type="text"/>

Figure 42. EXP-2 - Selecting Training Program and Site Name

Type of Training Program: Select a training program by clicking on the drop-down menu in Column 1 and choosing one of the practicum/field placement program options (marked on the Training Program Setup Form as “active” in the current reporting period).

Site Name: Pair the selected training program with a site name by clicking on the drop-down menu in Column 2 (Block 1) and choosing one of the available options (sites that were marked in EXP-1 as “used” in the current reporting period).



Note: If the same site was used with multiple training programs, then multiple rows are required in the EXP-2 subform.



Note: If the same program used multiple training sites, then multiple rows are required in the EXP-2 subform.

EXP-2 - Selecting Type of Site Used

Type of Training Program	Site Name	Select Type of Site Used	Select Type of Setting Where the Site was Located
(1)	(2) Block 1	(3) Block 1a	(4) Block 2
Major Participating Site/Rotation Site Medical Specialties (Primary Care) - Pediatrics (General Pediatrics)	University Pediatric Hospital	Academic institution	None of the above

Figure 43. EXP-2 - Selecting Type of Site Used

Select Type of Site Used: Following the selection of a training site in EXP-1, the associated type of site will be automatically populated when the save and validate button is selected.



Warning: Site types are linked to the name of training sites in EXP-1. To change the associated site type with a particular site name, return to EXP-1.

EXP-2 - Selecting Type of Setting Where the Site was Located

Site Name	Select Type of Site Used	Select Type of Setting Where the Site was Located	Select Type(s) of Partners/Consortia used to Offer Training at this Site
(2) Block 1	(3) Block 1a	(4) Block 2	(5) Block 5
University Pediatric Hospital	Academic institution	None of the above	Academic department - outside the institution, Academic department - within the institution, Ambulatory practice sites, Health department - Local, Hospital, Professional Associations, Quality improvement organization

Figure 44. EXP-2 - Selecting Type of Setting Where the Site was Located

Select Type of Setting Where the Site was Located: Following the selection of a training site in EXP-1, the associated settings will be automatically populated when the save and validate button is selected.



Warning: Site settings are linked to the name of training sites in EXP-1. To change the associated site settings with a particular site name, return to EXP-1.



Note: This Block will prepopulate for prior records with data submitted in previous reporting periods.



Reference: To determine whether a site is located in a medically underserved community, please visit HRSA’s Office of Shortage Designation at <http://datawarehouse.hrsa.gov/GeoAdvisor/ShortageDesignationAdvisor.aspx>



Reference: To determine whether a site is located in a rural area, please visit HRSA’s Office of Rural Health Policy at <http://datawarehouse.hrsa.gov/RuralAdvisor/ruralhealthadvisor.aspx>

EXP-2 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia used to Offer Training at this Site	Select Type(s) of Vulnerable Population Served at this Site
(5) Block 5	(7) Block 4
<input type="text"/>	<input type="text"/>

Figure 45. EXP-2 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia used to Offer Training at this Site: Select the type(s) of partnerships or consortia used or established for the purpose of training individuals at each site during the current reporting period by clicking on the drop-down menu in Column 5 (Block 5) and choosing all that apply from the following options:

- Academic department - outside the institution
- Alzheimer’s Association/Chapters
- Area Agencies on Aging
- Community Mental Health Center
- Federal Government - Veterans Affairs
- Federal Government - ACL
- Federal Government - FDA
- Federal Government - Other
- Federally - qualified health center or look -alikes
- Geriatric consultation services
- Health department - State
- Health insurance/Healthcare Provider Group (e.g.; PPO/HMO)
- Hospital
- No partners/consortia used
- Nursing home
- Private/For - profit organization
- Senior Center
- Academic department - within the institution
- Alzheimer’s Disease Resource Centers
- Community - based health center (e.g.; free clinic)
- Day and home care programs (i.e. Home Health)
- Federal Government - Department of Defense/Military
- Federal Government - AHRQ
- Federal Government - IHS
- Federal Government - Other HHS Agency/Office
- Geriatric ambulatory care and comprehensive units
- Health center (e.g.; free clinic)
- Health department - Tribal
- Health policy center
- Local Government
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Health Center (CHC)
- Educational institution (Grades K - 12)
- Federal Government - Other HRSA Program
- Federal Government - CDC
- Federal Government - NIH
- Federal Government - SAMHSA
- Geriatric Behavioral or Mental Health Units
- Health department - Local
- Health disparities research center
- Hospice
- Long-term care facility
- Nurse managed health clinic
- Physical therapy/Rehabilitation

Health Resources and Services Administration
Bureau of Health Workforce

- Tribal Organization

- Nonprofit organization
- Other
- Professional Associations
- State Governmental Programs

Annual Performance Report
Academic Year 2015-2016

- center
- Quality improvement organization
- Tribal Government



Warning: You may not select "No partners/consortia used" in combination with any other option.

EXP-2 - Selecting Type(s) of Vulnerable Population

Select Type(s) of Vulnerable Population Served at this Site	City	State	Zip Code	Four Digit Zip Code Extension
(7) Block 4	(8)	(9)	(10)	(11)
<input type="checkbox"/> College students <input type="checkbox"/> Health Insurance Marketplace				

Figure 46. EXP-2 - Selecting Type(s) of Vulnerable Population

Select Type(s) of Vulnerable Population Served at this Site: Select the type(s) of vulnerable populations served at each site used to train individuals during the current reporting period by clicking on the drop-down menu in Column 7 (Block 4) and choosing all that apply from the following options:

- Adolescents
- College students
- Individuals with HIV/AIDS
- Low income persons/families
- Older adults
- Refugee Adults
- Undocumented Immigrants
- Veterans
- Children
- Health Insurance Marketplace eligible Individuals
- Individuals with mental illness or substance use disorders
- Migrant workers
- People with disabilities
- Returning war veterans (Iraq or Afghanistan)
- Unemployed
- Victims of abuse or trauma
- Chronically ill
- Homeless individuals
- Lesbian/Gay/Bisexual/Transgender
- Military and/or military families
- Pregnant women and infants
- Tribal Population
- Uninsured/Underinsured persons/families
- None of the above



Warning: You may not select "None of the above" in combination with any other option.



To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

EXP-3: Experiential Characteristics - Trainees by Profession/Discipline

EXP-3 - Selecting Training Program and Site Name

Type of Training Program	Site Name
(1)	(2) Block 1

Figure 47. EXP-3 - Selecting Training Program and Site Name

Type of Training Program: Select a training program by clicking on the drop-down menu in Column 1 and choosing one of the available practicum/field placement program options (marked on the Training Program Setup Form as “active” in the current reporting period).

Site Name: Pair the selected training program with a site name by clicking on the drop-down menu in Column 2 (Block 1) and choosing one of the available options (sites that were marked in EXP-1 as “used” in the current reporting period).

EXP-3 - Selecting Profession and Discipline of Individuals Trained

Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained
(1)	(2) Block 1	(3) Block 3

Figure 48. EXP-3 - Selecting Profession and Discipline of Individuals Trained

Select Profession and Discipline of Individuals Trained: Select the profession(s) and discipline(s) of students trained for each training program/site during the current reporting period (both “Principal” trainees and “Other Interprofessional” trainees who participated in team-based care with the principal trainees) by clicking on the drop-down menu in Column 3 (Block 3). Repeat as necessary.

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Home Health Aide
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology, Social Work, or Substance Abuse/Addictions Counseling
- Behavioral Health - Psychology
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Allergy and Immunology
- Medicine - Dermatology
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Internal

Health Resources and Services Administration
Bureau of Health Workforce

- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - Alternative/Complementary Nursing
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - CNS - Women's health and pediatrics
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult
- Nursing - NP - Child/Adolescent Psychiatric/Mental Health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse anesthetist
- Nursing - Nurse midwife
- Nursing - Registered Nurse
- Other - Audiology
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant

- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery
- Medicine - Preventive Medicine/Aerospace Medicine
- Medicine - Preventive Medicine/Occupational Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Community health nursing
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Other (e.g., CNA, PCA)
- Nursing - Researcher/Scientist
- Other - Chiropractor
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Nutritionist
- Other - Optometry
- Other - Physical Therapy
- Other - Radiologic technology

Annual Performance Report
Academic Year 2015-2016

- Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Pediatrics
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Public health nurse
- Other - Allied Health
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife
- Other - Occupational Therapy
- Other - Other
- Other - Podiatry

Health Resources and Services Administration
Bureau of Health Workforce

- Other - Midwife (non-nurse)
- Other - Office/Support Staff
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Registered Dietician
- Other - Speech Pathology
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Administration
- Public Health - Injury Control & Prevention
- Student - Nursing - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - Alternative/Complementary Nursing
- Student - CNL - Generalist
- Student - CNS - Geropsychiatric
- Student - CNS - Psychiatric/Mental health
- Student - Community Health Nursing
- Student - Dental School
- Student - EMT
- Student - Graduate - Clinical Laboratory Services
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Graduate - Social Work
- Student - Law School
- Student - Medical School
- Student - NP - Acute care pediatric
- Student - NP - Adult Psychiatric/Mental health
- Other - Research
- Other - Speech Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Health Policy & Management
- Public Health - Nutrition
- Student - Nursing - Nurse midwife
- Student - Certified Nursing Assistant
- Student - CNS - Adult gerontology
- Student - CNS - Neonatal
- Student - CNS - Women's health
- Student - Dental Assistant
- Student - Dietician
- Student - Graduate - Allied Health
- Student - Graduate - Nursing
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Health Informatics
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - Midwife (non - nurse)
- Student - NP - Adult
- Student - NP - Child/Adolescent Psychiatric/Mental Health
- Student - NP - Family Psychiatric/Mental Health
- Student - NP - Other advanced nurse specialists
- Student - Nurse Administrator
- Student - Nurse Midwife
- Student - Nursing Informatics
- Student - Optometry
- Student - Physical Therapy

Annual Performance Report
Academic Year 2015-2016

- Other - Recreational Therapy
- Other - Respiratory Therapy
- Other - Unknown
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Infectious Disease Control
- Public Health - Social & Behavioral Sciences
- Student - Nursing - Registered nurse (RN)
- Student - Chiropractic School
- Student - CNS - Family
- Student - CNS - Pediatrics
- Student - CNS - Women's health and pediatrics
- Student - Dental Hygiene
- Student - Diploma/Certificate
- Student - Graduate - Behavioral Health
- Student - Graduate - Nursing Doctorate
- Student - Graduate - Other Behavioral Health
- Student - Graduate - Radiological Assistant
- Student - Home Health Aide
- Student - Medical Assistant
- Student - NP - Acute care adult gerontology
- Student - NP - Adult gerontology
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Pediatrics

Health Resources and Services Administration
Bureau of Health Workforce

- Student - NP - Family
- Student - NP - Neonatal
- Student - NP - Women's health
- Student - Nurse Educator
- Student - Nursing Assistant
- Student - Occupational Therapy
- Student - Pharmacy School
- Student - Podiatry School
- Student - Registered nurse (RN)
- Student - Speech Therapy
- Student - Undergraduate - Other
- Student - Undergraduate - Radiological Technician

- Student - Post - high school / Pre - college
- Student - Registered Nurse - BSN
- Student - Undergraduate - Allied Health
- Student - Undergraduate - Public Health

Annual Performance Report
Academic Year 2015-2016

- Student - Nurse Anesthetist
- Student - Nurse Researchers/Scientists
- Student - Nursing Pre-licensure
- Student - Pharmacy
- Student - Physician Assistant
- Student - Public Health Nurse
- Student - Rehabilitation Therapy
- Student - Undergraduate - Clinical Laboratory Services
- Student - Undergraduate - Radiological Assistant

EXP-3 - Entering # Trained in the Profession and Discipline

Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline	Enter # of Other Trainees in this Profession and Discipline Who Participated in Interprofessional Team-based care
(1)	(2) Block 1	(3) Block 3	(4) Block 3	(5) Block 8

Figure 49. EXP-3 - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline: In Column 4 (Block 3), enter the number of Principal Students in the profession and discipline selected in the previous step that were trained at each site during the current reporting period. Counts provided should be based on individuals reported on PC-7 from AHEC-funded programs.



Note: Counts provided for "Principal" trainees in Column 4 (Block 3) should be based on individuals reported on PC-7.



Note: Do not count faculty or non-trainees.

EXP-3 - Entering # of Other Interprofessional trainees who participated in team-based care

Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline	Enter # of Other Trainees in this Profession and Discipline Who Participated in Interprofessional Team-based care
(1)	(2) Block 1	(3) Block 3	(4) Block 3	(5) Block 8

Figure 50. EXP-3 - Entering # of Other Interprofessional trainees who participated in team-based care

Enter # of Other Trainees in this Profession and Discipline Who Participated in Interprofessional Team-based care: In Column 5 (Block 8), enter the number of all OTHER Interprofessional trainees who participated in team-based care alongside the Principal trainee. Counts provided should be based on individuals NOT reported on PC-7 from non-AHEC programs.



Note: Counts provided should be based on individuals NOT reported on PC-7.



Note: Do not count faculty or non-trainees.

EXP-3 - Adding Individuals Trained Example 1

No.	Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline
	(1)	(2) Block 1	(3) Block 3	(4) Block 3
1	Practicum/Field Placement Student-Medical School	Site 1	Student-Medical School	24
2	Practicum/Field Placement Student-Medical School	Site 2	Student-Medical School	10
3	Practicum/Field Placement Student-Medical School	Site 3	Student-Medical School	4

Figure 51. EXP-3 - Adding Individuals Trained Example 1

Example 1. Principal Students ONLY (no interprofessional training)

- In the example on this page, the practicum/field placement program trained 24 of its medical students at Site 1.
- In addition, they trained 10 medical students at Site 2, and 4 medical students at Site 3.
- No interprofessional trainees are reported in this example (Block 8 values are zeroes).

EXP-3 - Adding Individuals Trained Example 2

No.	Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline	Enter # of Other Trainees in this Profession and Discipline Who Participated in <u>Interprofessional Team-based care</u>
	(1)	(2) Block 1	(3) Block 3	(4) Block 3	(5) Block 8
1	Practicum/Field Placement Student-Medical School	Site 1	Student-Medical School	24	0
2	Practicum/Field Placement Student-Medical School	Site 1	Student-Pharmacy School	0	2
3	Practicum/Field Placement Student-Medical School	Site 1	Medicine - Psychiatry	0	3
3	Practicum/Field Placement Student-Medical School	Site 2	Student-Medical School	15	0
4	Practicum/Field Placement Student-NP-Adult Gerontology	Site 2	Student-Pharmacy School	0	4

Figure 52. EXP-3 - Adding Individuals Trained Example 2

Example 2. Principal AND Interprofessional Trainees

- In the example on this page, the practicum/field placement program trained 24 of its medical students at Site 1. As part of interprofessional team-based care at this site, this program also trained 2 pharmacy students and 3 psychiatry residents from non-HRSA programs at Site 1.
- In addition, the practicum/field placement program ALSO trained 15 of its medical students at Site 2. As part of interprofessional team-based care at this site, this program also trained 4 pharmacy students at Site 2.

EXP-3 - Adding Individuals Trained Example 3

Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline	Enter # of Other Trainees in this Profession and Discipline Who Participated in Interprofessional Team-based care
(1)	(2) Block 1	(3) Block 3	(4) Block 3	(5) Block 8
Practicum/Field Placement Student- Medical School	Site 1	Student- Medical School	24	10
Practicum/Field Placement Student- Medical School	Site 1	Medicine - Psychiatry	0	2
Practicum/Field Placement Student- Medical School	Site 2	Student- Medical School	10	22
Practicum/Field Placement Student- Medical School	Site 2	Student – Dental School	0	5

Figure 53. EXP-3 - Adding Individuals Trained Example 3

Example 3. Principal AND Interprofessional Trainees

- In the example on this page, the practicum/field placement program trained 24 of its medical students at Site 1. As part of interprofessional team-based care at this site, the program ALSO trained 10 OTHER medical students as well as 2 psychiatry residents from non-HRSA funded programs.
- In addition, the practicum/field placement program trained 10 of its medical students at Site 2. As part of interprofessional team-based care at this site, the program ALSO trained 22 OTHER medical students as well as 5 dental students from non-HRSA funded programs.



To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Course Development and Enhancement—CDE Subforms

CDE - Introduction



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

- **For courses or other training activities that were reported previously and marked as "Under Development" or "Developed, but Not Yet Implemented":** The BPMH system will prepopulate certain Blocks in the CDE-1 subform. **Please note that all other Blocks must be updated on an annual basis until the course or training activity is marked as "Implemented."**
- **For courses or other training activities that were reported previously and marked as "Implemented":** The BPMH system will transfer these records to the CDE-1a subform. The only action required in this subform is to select whether the course or training activity previously implemented was also offered during the annual reporting period.



Warning: Both CDE-1 and CDE-1a must be completed and validated prior to beginning CDE-2. If you reach the CDE-2 form, and no drop-down selections appear, you have not validated both CDE-1 and CDE-1a subforms.

CDE-1: Course Development and Enhancement - Course Information

CDE-1 - Setup



Warning: The CDE subforms apply ONLY to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

To begin providing data about courses and other training activities that have been developed or enhanced through the grant or to provide updates on previously reported activities, click "Yes" to the initial setup question. Clicking "Yes" will activate the embedded Excel® form that will allow you to begin data entry.

View Prior Period Data

CDE-1 CDE-1a CDE-2

Fields with * are required

* Have you used BHW resources or received in-kind support to develop or enhance a course or other training activity associated with the grant? Yes

Yes (complete CDE-1 and CDE-2) No (Click Save and Validate to proceed to the next form)

Figure 54. CDE-1 - Setup



Warning: If you have used the CDE form before, this answer is pre-selected 'Yes' for you. You do not need to answer this question again. Please move ahead to the CDE form by using the form list located on the left side of your screen.

CDE-1 - Entering the Name of Course/Training Activity



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

* Add Course

Enter the Name of the Course of Training Activity that was Developed or Enhanced

Add Record

Figure 55. CDE-1 - Entering the Name of Course/Training Activity

Name of Course or Training Activity:

- Enter the name of each course or training activity that was developed or enhanced through the grant.
- Click the "Add Record" button to save your entry.
- Repeat this process to enter the title of each course or training activity that was developed or enhanced through the grant.



Warning: Complete the CDE-1 Setup form only if grant funds were used to develop or enhance courses or training activities other than those previously reported. To update information on previously reported courses, proceed to CDE-1a.



Note: To view data submitted in the previous reporting period, click on the "View Prior Period Data" link on top of the form.

CDE-1 - Selecting Type of Course or Training Activity



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

Name of Course or Training Activity (1) Block 1	Select Type of Course or Training Activity (2) Block 2	Select whether Course or Training Activity was Newly Developed or Enhanced (3) Block 3	Select Status of Development or Enhancements (4) Block 4
Course 1	<input type="text" value="Select one"/>	<input type="text" value="Select one"/>	<input type="text" value="Select one"/>

Figure 56. CDE-1 - Selecting Type of Course or Training Activity

Select Type of Course or Training Activity: Select the type of course or training activity that was developed or enhanced through the grant by clicking on the drop-down menu under Column 2 (Block 2) and choosing one of the following options:

- Academic course
- Continuing Education courses
- Field placement/practicum
- Training/Workshop for health professions students, fellows or residents
- Clinical rotation
- Faculty development programs or activities
- Grand rounds



Note: This Block will prepopulate for prior records with data submitted in the previous reporting period. Prior records cannot be deleted.

CDE-1 - Selecting whether Course was Newly Developed or Enhanced



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

Name of Course or Training Activity (1) Block 1	Select Type of Course or Training Activity (2) Block 2	Select whether Course or Training Activity was Newly Developed or Enhanced (3) Block 3	Select Status of Development or Enhancements (4) Block 4
Course 1	Select one	Select one Select one Newly developed	Select one

Figure 57. CDE-1 - Selecting whether Course was Newly Developed or Enhanced

Select whether Course or Training Activity was Newly Developed or Enhanced: Select whether each course or training activity was newly developed or was enhanced by clicking on the drop-down menu in Column 3 (Block 3) and choosing one of the following options:

- Enhanced
- Newly developed



Note: Select 'Newly Developed' for courses or training activities that were not in existence and were developed in their entirety through the grant.



Note: Select 'Enhanced' for courses or training activities that were in existence prior to the grant and were modified or restructured through the grant.

 *Note: This Block will prepopulate for prior records with data submitted in the previous reporting period.*

CDE-1 - Entering Development/Enhancement Status



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

Name of Course or Training Activity (1) Block 1	Select Type of Course or Training Activity (2) Block 2	Select whether Course or Training Activity was Newly Developed or Enhanced (3) Block 3	Select Status of Development or Enhancements (4) Block 4	For Courses or Training Activities Implemented, Enter Academic Year of First Implementation	
				From Year (5) Block 4a	To Year (6) Block 4a
Course 1	Select one	Select one	Select one Under development	<input type="text"/>	<input type="text"/>

Figure 58. CDE-1 - Entering Development/Enhancement Status

Select Status of Development or Enhancements: Select each course or training activity's current status by clicking on the drop-down menu in Column 4 (Block 4) and choosing one of the following options:

- Developed, not yet implemented
- Implemented
- Under development

For Courses or Training Activities Implemented, Enter Academic Year of First Implementation: From Year: Enter the first portion of the academic year in which each course or training activity was first implemented in the textbox under Column 5 (Block 4a) using the YYYY format.

For Courses or Training Activities Implemented, Enter Academic Year of First Implementation: To Year: Enter the second portion of the academic year in which each course or training activity was first implemented in the textbox under Column 6 (Block 4a) using the YYYY format.



Warning: For courses and training activities under development or developed but not yet implemented, leave the textboxes in Columns 5 and 6 blank.



Note: For prior records, this field will be prepopulated with data from the previous reporting period.

Example: If a course or training activity was first implemented in Academic Year 2014-2015, enter "2014" in Column 5 (Block 4a) and then enter "2015" in Column 6 (Block 4a).

CDE-1 - Entering Curriculum



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

Enter the Curriculum the Course or Training Activity is Associated With (7) Block 5	Select Delivery Mode Used to Offer this Course or Training Activity (8) Block 6	Enter Site Name from EXP-1 Where Implemented (9)
<input type="text"/>	Select one	<input type="text"/>

Figure 59. CDE-1 - Entering Curriculum

Enter the Curriculum the Course or Training Activity is Associated With: Enter the name of the curriculum associated with each course or training activity that was developed or enhanced through the grant in the textbox in Column 7 (Block 5).



Note: If the course or training activity that was developed or enhanced is not associated with a specific curriculum, enter "N/A".



Note: This Block will prepopulate for prior records with data submitted in the previous reporting period.

CDE-1 - Selecting Delivery Mode



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

Enter the Curriculum the Course or Training Activity is Associated With (7) Block 5	Select Delivery Mode Used to Offer this Course or Training Activity (8) Block 6	Enter Site Name from EXP-1 Where Implemented (9)
<input type="text"/>	Select one Classroom-based	<input type="text"/>

Figure 60. CDE-1 - Selecting Delivery Mode

Select Delivery Mode Used to Offer this Course or Training Activity: Select the primary mode used to deliver each course or training activity that was developed or enhanced through the grant by clicking on the drop-down menu in Column 8 (Block 6) and choosing one of the following options:

- Classroom-based
- Distance learning (Online, Webinar)
- Grand rounds
- Clinical Rotation
- Experiential/Field-based
- Hybrid



Note: This Block will prepopulate for prior records with data submitted in the previous reporting period.

CDE-1 - Selecting EXP-1 Site Name Where Implemented



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

Enter the Curriculum the Course or Training Activity is Associated With (7) Block 5	Select Delivery Mode Used to Offer this Course or Training Activity (8) Block 6	Enter Site Name from EXP-1 Where Implemented (9)
<input type="text"/>	<input type="text" value="Select one"/>	<input type="text"/>

Figure 61. CDE-1 - Selecting EXP-1 Site Name Where Implemented

Enter Site Name from EXP-1 Where Implemented: Use the drop-down menu of EXP-1 sites in Column 9 to select all of the names of sites where the course or activity took place for courses/activities marked in Column 2 (Block 2) as:



Note: The options available in the dropdown menu in Column 9 will be from the list of clinical sites marked as "used" in the current reporting period from the EXP-1 subform.



To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

CDE-1a: Course Development and Enhancement - Log of Courses/Training Activities Implemented

CDE-1a - Selecting Whether the Course was Offered in the Current Period



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

Select Whether the Course or Training Activity was Offered in the Current Reporting Period (9)	Enter Site Name from EXP-1 Where Implemented (10)
Select one Select one Yes	

Figure 62. CDE-1a - Selecting Whether the Course was Offered in the Current Period

Select Whether the Course or Training Activity was Offered in the Current Reporting Period: Select whether a particular course or training activity previously implemented was offered again during the reporting period by clicking on the drop-down menu in Column 9 and choosing one of the following options:

- Yes
- No

CDE-1a - Selecting EXP-1 Site Name Where Implemented



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

Select Whether the Course or Training Activity was Offered in the Current Reporting Period (9)	Enter Site Name from EXP-1 Where Implemented (10)
<input type="text" value="Select one"/>	<input type="text"/>

Figure 63. CDE-1a - Selecting EXP-1 Site Name Where Implemented

Enter Site Name from EXP-1 Where Implemented:

- If the previously-implemented course or training activity was a clinical rotation, field placement/practicum or grand round AND the activity was offered during the reporting period, select the name(s) of the site(s) where the activity took place in the textbox under Column 9.
- For all other records, enter "N/A" in the textbox under Column 9.



Note: The options available in the dropdown menu in Column 9 will be from the list of clinical sites marked as "used" in the current reporting period from the EXP-1 subform.



To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

CDE-2 - Adding Courses and Profession/Disciplines



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

The screenshot shows a web form titled "Add Profession/Discipline". The form has a blue header bar with a red asterisk. Below the header, there are two main input areas. The first is "Name of Course or Training Activity" with a dropdown menu currently showing "Course 1". The second is "Profession and Discipline of Individuals Trained" with a list of options, including "Student - Post - high school / Pre - college" and "Student - Diploma/Certificate". A red box highlights the "Add Record" button at the bottom left of the form.

Figure 64. CDE-2 - Adding Courses and Profession/Disciplines

Name of Course or Training Activity:

Select the name of one course or training activity by clicking on the drop-down menu next to "Name of Course or Training Activity" and choosing one of the available options.

Profession and Discipline of Individuals Trained: Select all of the profession(s) and discipline(s) of individuals trained through each course or workshop offered during the reporting period by choosing all that apply from the options below. Click on the "Add Record" button.



Note: CDE-2 is used to report trainee counts for academic courses, training workshops, grand rounds, clinical rotations, and field placement/practica that were offered during the reporting period. Trainee counts for faculty development participants are captured separately using the FD-subforms and continuing education participants are reported on the CE subforms.

CDE-2 - Entering # Trained in the Profession and Discipline



Warning: The CDE subforms apply **ONLY** to the AHEC Purpose #5 (Special Project - Integrating Behavioral Health into Primary Care). If you have not selected the AHEC-5 purpose, skip the instructions for the CDE subform and proceed to the next section describing the CE subforms.

Name of Course or Training Activity	Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline
(1)	(2)	(3)
Block 1	Block 7	Block 7
Course 1	Student - Post - high school / Pre - college	<input type="text"/>

Figure 65. CDE-2 - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline:

- Enter the number of individuals trained from the profession and discipline in the textbox under Column 3 (Block 7).
- Repeat this step as many times as necessary to capture the total number of individuals by profession and discipline who were trained in each course.



To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Continuing Education Activities—CE Subforms

CE - Introduction

1. Purpose: The CE subforms are used to characterize continuing education course characteristics and trainees.

- The CE-1 form captures information about the continuing education courses and training activities offered in the current reporting period.
- The CE-2 subform collects information about the professions and disciplines of individuals trained in the offered CE courses or training activities.

2. Order of Subforms:

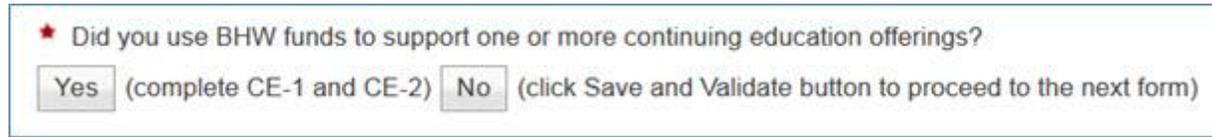
- You must complete and 'Save and Validate' CE-1 first before proceeding to CE-2.

3. Pre-population of Prior Records (CE Courses) reported previously:

- **THE BPMH SYSTEM WILL NO LONGER PREPOPULATE DATA INTO THE CE-1 SUBFORM.**
- Each reporting period, the CE-1 form will initially appear blank.
- The **ONLY** courses or activities to be entered are those that were offered during the current reporting period.
- To view data submitted in the previous reporting period, click on the "View Prior Data" link.

CE-1: Continuing Education - Course Characteristics and Content

CE-1 - Setup



★ Did you use BHW funds to support one or more continuing education offerings?

Yes (complete CE-1 and CE-2) No (click Save and Validate button to proceed to the next form)

Figure 66. CE-1 - Setup

- To provide data about continuing education courses offered during the reporting period, click "Yes" to the initial setup question.
- Clicking "Yes" will activate the embedded Excel® form and will allow you to begin data entry.

CE-1 - Entering Course Title

Record Status	Course Title	Select Whether the Course was Offered in the Current Reporting Period	Select Whether Course is Approved for Continuing Education Credit
	(1) Block 1	(1a)	(2) Block 2
	<input type="text"/>		

Figure 67. CE-1 - Entering Course Title

Course Title: Enter the name of each **NEW** course offered during the current reporting period by typing the name in the textbox in Column 1 (Block 1).



Note: Course titles are limited to 200 characters.



Note: To view data submitted in the previous reporting period, click on the "View Prior Period Data" link on top of the form.

CE-1 - Selecting Whether Course is Approved for Continuing Education Credit

Record Status	Course Title	Select Whether the Course was Offered in the Current Reporting Period	Select Whether Course is Approved for Continuing Education Credit
	(1) Block 1	(1a)	(2) Block 2
			<input type="text"/> Select one Yes No

Figure 68. CE-1 - Selecting Whether Course is Approved for Continuing Education Credit

Select Whether Course is Approved for Continuing Education Credit: Select whether each course was approved for continuing education credit by clicking on the drop-down menu in Column 2 (Block 2) and choosing one of the following options:

- Yes
- No



Note: To view data submitted in the previous reporting period, click on the "View Prior Period Data" link on top of the form.



Reference: Refer to the glossary for a definition of continuing education course accreditation.

CE-1 - Entering Course Duration

Course Title	Select Whether the Course was Offered in the Current Reporting Period	Select Whether Course is Approved for Continuing Education Credit	Enter the Duration of the Course in Clock Hours
(1) Block 1	(1a)	(2) Block 2	(3) Block 3

Figure 69. CE-1 - Entering Course Duration

Enter the Duration of the Course in Clock Hours: Enter the duration, in clock hours, of each course offered during the current reporting period in the textbox under Column 3 (Block 3).



Note: For courses that lasted for less than one (1) hour, provide a decimal value by dividing the total number of minutes the course lasted by 60 (e.g., a 15-minute course would entered as $15/60 = .25$).



*Note: For instructional activities offered via distance learning, enter the **intended duration** of each activity in Column 3 (Block 3).*



Note: To view data submitted in the previous reporting period, click on the "View Prior Period Data" link on top of the form.

CE-1 - Entering # of Times Course was Offered

Course Title	Select Whether the Course was Offered in the Current Reporting Period	Select Whether Course is Approved for Continuing Education Credit	Enter the Duration of the Course in Clock Hours	Enter # of Times Course was Offered
(1) Block 1	(1a)	(2) Block 2	(3) Block 3	(4) Block 4

Figure 70. CE-1 - Entering # of Times Course was Offered

Enter # of Times Course was Offered: Enter the total number of times the course was offered during the current reporting period in the textbox in Column 4 (Block 4).



Note: For instructional activities offered via distance learning on an ongoing basis, enter 999.



Note: To view data submitted in the previous reporting period, click on the "View Prior Period Data" link on top of the form.

CE-1 - Selecting Delivery Mode

Course Title	Select Delivery Mode Used to Offer Course	Select Type(s) of Partnership(s) Established for the Purposes of Delivering this Course
(1) Block 1	(5) Block 5	(6) Block 6
	Distance learning (Online, V Select one Classroom-based	

Figure 71. CE-1 - Selecting Delivery Mode

Select Delivery Mode Used to Offer Course: Select the primary delivery mode used to offer each course during the current reporting period by clicking on the drop-down menu in Column 5 (Block 5) and choosing one of the following options:

- Archived/Self-paced Distance Learning
- Distance learning (Online, Webinar)
- Other
- Classroom-based
- Hybrid
- Real-time/Live distance learning



Note: If "Other" is selected, please specify the primary delivery mode for the course in the comments field. Please include the course name in the comment.



Note: To view data submitted in the previous reporting period, click on the "View Prior Period Data" link on top of the form.

CE-1 - Selecting Type(s) of Partnership(s)

Course Title	Select Delivery Mode Used to Offer Course	Select Type(s) of Partnership(s) Established for the Purposes of Delivering this Course
(1) Block 1	(5) Block 5	(6) Block 6
	Select one	<input type="checkbox"/> Academic institution <input type="checkbox"/> Educational institution (G

Figure 72. CE-1 - Selecting Type(s) of Partnership(s)

Select Type(s) of Partnership(s) Established for the Purposes of Delivering this Course: Select the type(s) of partnerships or consortia established for the purposes of offering each course during the current reporting period by clicking on the drop-down menu in Column 6 (Block 6) and choosing all that apply from the following options:

- Academic department - outside the institution
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Health Center (CHC)
- Educational institution (Grades K - 12)
- Federal Government - CDC
- Federal Government - IHS
- Federal Government - Other HHS Agency/Office
- Federal Government - Veterans Affairs
- Geriatric Behavioral or Mental
- Academic department - within the institution
- Alzheimer’s Association/Chapters
- Area Agencies on Aging
- Community Mental Health Center
- Federal Government - ACL
- Federal Government - Department of Defense/Military
- Federal Government - NIH
- Federal Government - Other HRSA Program
- FQHC or look-alike
- Geriatric consultation services
- Health department - State
- Health insurance/Healthcare Provider Group (e.g.; PPO/HMO)
- Hospital
- Academic institution
- Alzheimer’s Disease Resource Centers
- Community - based health center (e.g.; free clinic)
- Day and home care programs (i.e. Home Health)
- Federal Government - AHRQ
- Federal Government - FDA
- Federal Government - Other
- Federal Government - SAMHSA
- Geriatric ambulatory care and comprehensive units
- Health center (e.g.; free clinic)
- Health department - Tribal

Health Resources and Services Administration
Bureau of Health Workforce

Health Units

- Health department - Local
 - Health disparities research center
 - Hospice
 - Long - Term Care Facility
 - Nonprofit organization (non - faith based)
 - Other
 - Professional Associations
 - State Government
 - Tribal Organization
- No partners/consortia used
 - Nurse Managed Health Clinics
 - Physical therapy/Rehabilitation center
 - Quality improvement organization
 - State Governmental Programs
 - N/A

Annual Performance Report
Academic Year 2015-2016

- Health policy center
- Local Government
- Nonprofit organization (faith - based)
- Nursing Home
- Private/For - profit organization
- Senior Center
- Tribal Government



Warning: You may not select "No partners/consortia used" in combination with any other option.



Note: To view data submitted in the previous reporting period, click on the "View Prior Period Data" link on top of the form.

CE-1 - Entering Employment Location Data for Individuals Trained

Select Whether Employment Location Data are Available for Individuals Trained	Enter # of Individuals Trained by Employment Location (not mutually exclusive)		
	Primary Care Setting	Medically Underserved Community	Rural Area
(8) Block 9	(9) Block 9a	(10) Block 9b	(11) Block 9c
<input type="text"/> Select one Yes No	<input type="text"/>	<input type="text"/>	<input type="text"/>

Figure 73. CE-1 - Entering Employment Location Data for Individuals Trained

Select Whether Employment Location Data are Available for Individuals Trained: Select whether employment location data are available for trainees who participated in each course during the current reporting period by clicking on the drop-down menu under Block 9 and choosing one of the following options:

- Yes
- No

Enter # of Individuals Trained by Employment Location (not mutually exclusive): Primary Care Setting:

- If "Yes" was selected in the drop-down under Block 9, enter the total number of participants who are employed in a primary care setting in Block 9a. If none of the participants are employed in this setting, enter "0" in Block 9a.
- If "No" was selected in the drop-down menu under Block 9, enter "N/A" in Blocks 9a.

Enter # of Individuals Trained by Employment Location (not mutually exclusive): Medically Underserved Community:

- If "Yes" was selected in the drop-down under Block 9, enter the total number of participants who are employed in a medically underserved community in Block 9b. If none of the participants are employed in this setting, enter "0" in Block 9b.
- If "No" was selected in the drop-down menu under Block 9, enter "N/A" in Blocks 9b.

Enter # of Individuals Trained by Employment Location (not mutually exclusive): Rural Area:

- If "Yes" was selected in the drop-down under Block 9, enter the total number of participants who are employed in a rural area in Block 9c. If none of the participants are employed in this setting, enter "0" in Block 9c.
- If "No" was selected in the drop-down menu under Block 9, enter "N/A" in Blocks 9c.



Note: Individuals can be counted multiple times if their place of employment is located in more than one type of designated setting. As a result, counts provided under Blocks 9a, 9b and 9c are not meant to be mutually exclusive.



Note: To view data submitted in the previous reporting period, click on the "View Prior Period Data" link on top of the form.

CE-1 - Selecting Primary Topic Area

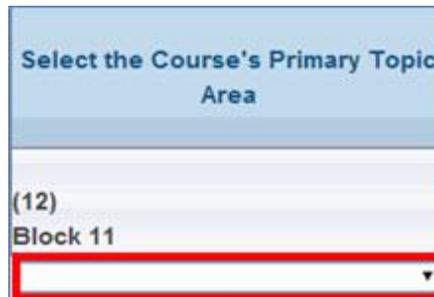


Figure 74. CE-1 - Selecting Primary Topic Area

Select the Course's Primary Topic Area: Select the primary topic area addressed in each course offered during the current reporting period by clicking on the drop-down menu in Column 12 (Block 11) and choosing one of the following options:

- Acute care
- African - Americans
- Alzheimer's disease/dementia
- Asian Americans
- Behavioral assessment and consultation in primary care
- Bioterrorism/preparedness
- Chronic Disease
- Clinical preventive services
- Community - based continuity of care
- Community needs assessment
- Crisis intervention
- Delirium
- Diabetes
- E - Learning technology
- Emergency training
- Ethics and confidentiality
- Extended care
- Adolescent Health
- Alcohol and substance misuse/prevention
- Ambulatory Care
- Asthma
- Behavioral health
- Border Health
- Chronic disease management
- Communications
- Community collaboration
- Computer - based instructions
- Cultural competencies
- Dementia
- Domestic Violence/Interpersonal violence
- Elder abuse
- Environmental health
- Ethics/bioethics
- Advocacy/health policy
- Alternative/complementary medicine
- American Indian/Alaska Natives
- Basic restorative skills
- Behavioral interventions for primary care
- Cancer
- Clinical Practice Information
- Community - based care
- Community health nursing
- Consumers' rights
- Data collection and analysis
- Depression
- Drug - resistant diseases
- Emergency preparedness
- Epidemiology
- Evidence Based Medicine/Practice
- Focus groups

Health Resources and Services Administration
Bureau of Health Workforce

- Food borne Disease
- Geriatrics
- Health care and older adults
- Health literacy
- Healthy aging
- Hispanics/Latinos
- Homeless
- Infant health
- Influenza
- Injury prevention
- Interpersonal skills
- Interprofessional team training
- Lesbian/Gay/Bisexual/Transgender individuals
- Mannequin - based and patient simulators
- Medication basics
- Migrant health
- Negotiations
- Obesity
- Other simulated or virtual methods
- Pastoral/Spiritual Care
- Personal care skills
- Prescription drug abuse
- Program design
- Program planning
- Public health policy development
- Rehabilitation
- Secondary care Technology
- Skills - based training
- Substance Abuse
- Sustainability
- Tertiary care
- Trauma
- Urgent care

- Financial planning and management (including budgeting)
- Genetics
- Gerontological nursing
- Health Disparities
- Health promotion and disease prevention
- Heart disease
- HIV/AIDS
- Homelessness
- Infection control
- Informatics
- Interactive simulated case studies
- Interprofessional education
- Leadership training
- Long - Term Care
- Maternal and child health
- Meeting facilitation
- Minority Health
- Nursing
- Oral health
- Pain management
- Patient safety (medical errors)
- Pharmacology
- Primary care
- Program evaluation
- Public health infrastructure
- Quality Improvement
- Research
- Sexual health
- Social marketing
- Suicide
- Teledentistry
- Tobacco cessation

Annual Performance Report
Academic Year 2015-2016

- Genomics
- Grant writing
- Health information technology
- Health Reform/Health Insurance Marketplaces
- Hepatitis
- Home health
- Hypertension
- Infectious diseases
- Information Technology
- Interdisciplinary training
- Interprofessional education, training and practice
- Leadership/Management
- Managed care
- Medical economics
- Mental health
- Native Hawaiian/Pacific Islander
- Nutrition
- Other
- Palliative care
- Perioperative care
- Physical activity/active lifestyles
- Professional development
- Program management
- Public health law
- Quality improvement and patient safety
- Rural health
- Sexually transmitted infections
- Stroke
- Survey design
- Telemedicine/telehealth
- Transitional care

Health Resources and Services Administration
Bureau of Health Workforce

- Virtual simulation
- Wound care

- Tuberculosis
- Veterans Health
- Women's health
- Youth development

Annual Performance Report
Academic Year 2015-2016

- Urban health
- Violence
- Workforce development



Note: If "Other" is selected, please specify the primary topic area for the course in the comments field. Please include the course name in the comment.



Note: To view data submitted in the previous reporting period, click on the "View Prior Period Data" link on top of the form.



To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

CE-2: Continuing Education - Individuals Trained by Profession/Discipline

CE-2 - Selecting Profession and Discipline of Individuals Trained

Course Title	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline
(1) Block 1	(2) Block 8	(3) Block 8

Figure 75. CE-2 - Selecting Profession and Discipline of Individuals Trained

Course Title: To complete the CE-2 subform, select the title of the course by clicking on the drop-down menu under Block 1 and choosing one of the available options.

Select Profession and Discipline of Individuals Trained: For each course title, select the profession and discipline of students or fellows trained at each site during the annual reporting period by clicking on the drop-down menu in Column 2 (Block 8) and choosing one of the following options:



Note: If "Other-Other" is selected, please specify the profession/discipline in the comments field. Please include the course name in the comment.

CE-2 - Entering # Trained in the Profession and Discipline

Course Title	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline
(1) Block 1	(2) Block 8	(3) Block 8

Figure 76. CE-2 - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline: Enter the number of trainees in each profession and discipline in the textbox in Column 3 (Block 8).



To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Printing Your Performance Report

The screenshot displays the Performance Report interface. On the left sidebar, the 'Review' link is highlighted with a red box. The main content area shows a 'Resources' section with a 'Print All Forms' button also highlighted with a red box. Below this, there is a table with columns for Section, Type, and Options. The table lists various report sections such as Training Program, PC, IND-GEN, INDGEN-GPC, INDGEN-PY, EXP, and Comments and Certification, all with a Type of HTML and a View option.

Section	Type	Options
View: Semi-Annual Performance Report		
Training Program	HTML	View
PC	HTML	View
IND-GEN	HTML	View
INDGEN-GPC	HTML	View
INDGEN-PY	HTML	View
EXP	HTML	View
Comments and Certification	HTML	View

Figure 77. Screenshot of Printing Your Performance Report

1. To print the entire performance report, expand the left side menu of your report and click the 'Review' link under the 'Review and submit' section. You will be directed to the Review page.
2. Next, click the 'Print All Forms' button below the Resources section of the Review Page.

Submitting Your Performance Report

1. To submit your performance report, expand the left side menu of your report and click the 'Submit' link under the 'Review and submit' section. You will be directed to the Submit Report. On the Submit Report page, ensure that the status of all forms is 'Complete' with a green check mark. Click the 'Submit' button on the bottom right corner of this page.

The screenshot displays the 'Submit Report' interface. On the left is a navigation menu with categories like 'Performance Report', 'Setup Data', 'Performance Data', and 'Review and Submit'. The 'Submit' link is highlighted in red. The main content area shows a table titled 'Submission Report Status' with columns for 'Section', 'Status', and 'Option'. A red arrow points to the 'Complete' status of the 'PC-1' row. A 'Submit' button is also highlighted in red at the bottom right.

Section	Status	Option
Setup Data		
Training Program	✓ Complete	Update
Performance Data		
PC-1	✓ Complete	Update
IND-GEN	✓ Complete	Update
INDGEN-GPC	✓ Complete	Update
INDGEN-PY	✓ Complete	Update
EXP-1	✓ Complete	Update
EXP-2	✓ Complete	Update
EXP-3	✓ Complete	Update

Figure 78. Screenshot of the Submit Report Page

2. After step 1, you will be directed to the Submit Report-Confirm page. On this page, check the box under the 'Certification' section and click the 'Confirm' button on the bottom right corner of your screen to submit your report to HRSA. You will receive a confirmation message on your next screen.

Submit Report - Confirm

You have chosen to submit this report to HRSA. Please check the box to electronically sign the Report. Click the 'Confirm' button below to submit the report. If you do (+ View More)

Confirmation:
This is a confirmation page! You MUST Click on the appropriate button to complete your action.

Fields with * are required

*** Certification** [View Report](#)

I Sherer, Sara certify that I am authorized to submit this report to HRSA for grant D40HP28075.

Please check the box to electronically sign the Report.

[Cancel](#) [Confirm](#)

Figure 79. Screenshot of the Submit Report - Confirm Page

Submit Report - Result

Your report is successfully submitted to HRSA. The details for this report is listed below. Please note them down for future reference. For any other questions please (+ View More)

Report Details	
Report Type	2015 Final Report
Grant Number	UBMHP20202
Submission Tracking Number	BPMFRUB600029227

[Return to List](#)

Figure 80. Screenshot of the Submit Report - Confirm Page

Appendix A: Glossary

This glossary contains general definitions for terms that are used throughout the BPMH system. Some terms may be defined in multiple ways by different programs due to their authorizing statutes and/or the nature of training activities offered. If you are unsure about how to define a term that is central to your program, please refer to the authorizing statute, the Funding Opportunity Announcement and/or your Government Project Officer for clarification.

Attrition is the act of permanently leaving a training program or training activity before completion. An individual is counted as having attrited if s/he leaves a training program or training activity for any reason before completing all training requirements.

BHW-funded financial awards are monies from a grant funded by BHW that are provided to an individual by a grantee institution or organization for the purposes of defraying costs associated with participation in a training program or training activity. The types and definitions of BHW-funded financial awards are listed below:

1. **Career Award:** A financial award provided to current faculty for the purposes of facilitating professional growth and advancement in the academic setting.
2. **Fellowship:** A financial award provided to a Fellow for the purposes of defraying costs associated with advanced training in a specific content area.
3. **Scholarship:** A financial award provided to a student enrolled in a degree program at an educational institution for the sole purpose of covering expenses associated with tuition.
4. **Stipend:** A financial award provided to an individual for the purposes of defraying costs associated with a training program or training activity.
5. **Traineeship:** A financial award provided to a student enrolled in an advanced training program at an educational institution for the purposes of defraying costs associated with advanced training in a specific content area.
6. **Loan:** A financial award provided to a student enrolled in a degree program at an educational institution for the purposes of defraying costs associated with that degree program. Loans must be repaid in accordance with terms specified in a promissory note.
7. **Loan Repayment:** A financial award provided to an individual that is conditional on their agreement to provide specific types of services for a specified amount of time. Under this agreement, an individual may have part or all of their student loans paid off so long as they meet all specified requirements.

Campus-based degree program is a degree program that requires students to complete all academic coursework at the college or university campus.

Contact hours are the number of hours that an individual receives training in a specific setting.

Continuing education is a training activity or series of training activities offered to members of the **current** workforce who have already completed a training program in their profession. Generally, continuing education sessions are offered to existing professionals and do not include or target students as primary participants.

Curriculum is the aggregate content of multiple learning activities offered by an organization a specific topic area. Commonly, the term curriculum is used to describe the number and type of academic courses within a degree program. The term can also be used to describe the number and type of learning activities for faculty and other non-degree related training programs.

Didactic training is the process of instruction between a designated faculty and an individual or group of individuals.

Direct financial support program is a type of grant that provides individuals, via grantee organizations, with a BHW-funded financial award to help defray costs associated with participation in a training program or training activity.

Disadvantaged background is a citizen, national, or a lawful permanent resident of the United States or the District of Columbia, the Commonwealths of Puerto Rico or the Marianas Islands, the Virgin Islands, Guam, the American Samoa, the Trust Territory of the Pacific Islands, the Republic of Palau, the Republic of the Marshall Islands and the Federated State of Micronesia who either:

- Comes from an environment that has inhibited the individual from obtaining the knowledge, skill, and abilities required to enroll in and graduate from a health professions school, or from a program providing education or training in an allied health profession; OR
- Comes from a family with an annual income below a level based on low income thresholds according to family size published by the U.S. Bureau of Census, adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary, HHS, for use in health professions and nursing programs.

Enhanced course or other training activity is a specific type of training activity that was in existence at the grantee institution or organization and has been modified or restructured as part of the grant project.

Enrollee is an individual who is actively matriculated or registered in a training program or training activity. For the purposes of performance reporting, the training category of "enrollees" does not include graduates, program completers, fellows or residents.

Ethnicity is the ethnic ancestry or origin of an individual or group of individuals. For the purposes of performance reporting, the Office of Management and Budget requires that ethnicity be classified as "Hispanic or Latino Origin" and "Non-Hispanic or Latino Origin". Individuals identifying as "Hispanic or Latino" are of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

Experiential training is the process of instruction between a designated faculty and an individual or group of individuals that includes a component of direct work experience.

Faculty is an individual or group of individuals who have been deemed qualified by an organization to provide instruction to others on a specific topic area.

Faculty development program is a series of curriculum-based training activities that are provided to faculty over a specific amount of time for the purposes of additional training and/or faculty development. Structured faculty development programs can be degree-bearing, certificate-bearing and do not necessarily have to be offered at or by the grantee institution or organization.

Faculty development activity is generally a stand-alone single training activity provided to faculty for the purposes of additional training and/or faculty development. Faculty development activities can include conferences, workshops or grand rounds and do not necessarily have to be offered at or by the grantee institution or organization. It is the same as an “Unstructured faculty development activity”.

Faculty instruction are those courses, workshops, seminars, grand rounds or other training activities that are led by faculty for the purposes of providing training to other individuals (e.g., students, fellows, residents). Faculty instruction does not refer to training activities undertaken by faculty for the purposes of additional training or faculty development (see Structured Faculty Development Program and/or Unstructured Faculty Development Activity).

Federally Qualified Health Centers (FQHC) are public and private non-profit health care organizations that meet certain criteria under the Medicare and Medicaid Programs (respectively, Sections 1861(aa)(4) and 1905(1)(2)(B) of the Social Security Act and receive funds under the Health Center Program (Section 330 of the Public Health Service Act).

Fellowship is a training program that provides an individual or group of individuals (known as "fellows") with advanced training in a general content area. Fellows generally receive a financial award to help defray costs associated with advanced training (also referred to as a "fellowship").

Full-time refers to the number of days per week and/or months per year representing full-time effort at the applicant/recipient organization, as specified in organizational policy. For a student, it means a student who is enrolled full-time as defined by the organization. The organization's policy must be applied consistently, regardless of the source of support.

Graduate is an individual who has completed all requirements for a degree-bearing training program at an educational institution.

Hybrid degree program is a degree program that requires students to complete academic coursework at the campus, as well as through distance learning.

Instructional hours are the duration of a training activity or training program in clock hours.

Infrastructure program is a type of grant designed to enhance the scope, quality, and opportunities for health professions training programs or training activities. Infrastructure programs do not provide individuals with any type of BHW-funded financial awards.

Internship is a type of training activity that can either be a(n): a) component of a degree-bearing program or b) entry-level employment that provides an individual with relevant workforce experience.

Interprofessional education is the process of learning among a group of individuals from two (2) or more professions.

Interprofessional practice is the provision of care or services to an individual or group of individuals by workers from two (2) or more professions.

Medically Underserved Community (MUC) is a geographic location or population of individuals that is eligible for designation by a state and/or the federal government as a health professions shortage area (HPSA); medically underserved area (MUA) and/or medically underserved population (MUP). These communities have limited access to primary health care services. The term MUC is an umbrella term that can be used to describe any location that meets one or more of the previously identified designations.

Multipurpose/Hybrid program is a type of grant that is designed to: a) provide individuals, via grantee organizations, with a BHW-funded financial award to help defray costs associated with health professions training; **and b)** enhance the scope, quality, and opportunities for health professions training programs or training activities.

Newly developed course or other training activity is a specific type of training activity that was not in existence at the grantee institution or organization and was developed in its entirety as part of the grant project.

Online degree program is a degree program that requires students to complete all academic coursework through distance learning.

Partner/consortium is an organization or group of organizations that provide(s) resources and/or support to grantees for the implementation of training programs and/or training activities.

Patient encounter is a direct interaction between a designated caregiver and a patient for the purposes of health care.

Practicum is a type of experiential training activity. (See "Experiential training").

Primary care is the provision of integrated, accessible health services by clinicians who are accountable for addressing a large majority of personal health care needs, developing a sustained partnership with patients, and practicing in the context of family and community.

Primary care setting is a facility that is staffed with professionals who provide primary care. (See "Primary Care")

Profession & discipline is a phrase that identifies a general occupation (profession) and, where applicable, a type of specialty within that occupation (discipline).

Program completer is an individual who has completed all requirements for a non-degree bearing training program or training activity. (See "Graduate" for individuals who complete all requirements of a degree-bearing training program)

Publication is a written material that has been submitted to and accepted by a publishing authority as part of a collection of related work.

Race is an individual's self-identified affiliation with one (1) or more of the following origins:

- **White** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- **Black or African American** – A person having origins in any of the Black racial groups of Africa.
- **American Indian or Alaska Native** – A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
- **Asian** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- **Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Residency is a training program that provides an individual or group of individuals (known as "residents") with advanced clinical training in a specialty area.

Residential background is/are the type/s of location/s an individual has established residence in.

Rural is a geographical area that is not part of a Metropolitan Statistical Area (MSA). *Note: To determine if a specific geographical area is considered rural, go to [HRSA's Office of Rural Health Policy](#).*

Structured training program is a series of curriculum-based training activities that are provided to an individual or groups of individuals over a specific amount of time.

Trainee is an individual who participates in a training program or training activity.

Underrepresented Minority (URM) is an individual from a racial and/or ethnic group that is considered inadequately represented in a specific profession relative to the numbers of that racial and/or ethnic group in the general population. **Note: For the purposes of the health professions, BHW considers individuals who are from the following racial and ethnic backgrounds to be underrepresented:**

- Black or African American
- Hispanic (all races)
- Native Hawaiian or Other Pacific Islander

- American Indian or Alaska Native

Unstructured faculty development activity is generally a stand-alone single training activity provided to faculty for the purposes of additional training and/or faculty development. Unstructured faculty development activities can include conferences, workshops, or grand rounds and do not necessarily have to be offered at or by the grantee institution or organization.

Unstructured training activity is generally a stand-alone single training activity that is not part of a curriculum.

Veteran is any person who served in one (1) of the seven (7) uniformed services of the United States. The seven uniform services include: the United States Army, Navy, Air Force, Marines, Coast Guard, Public Health Service, and National Oceanic & Atmospheric Administration Commissioned Officers Corps.

Vulnerable populations are groups of individuals at higher risk for health disparities by virtue of their race or ethnicity, socio-economic status, geography, gender, age, disability status, and other risk factors associated with sex and gender.

Appendix B: FAQs

General FAQs:

Q1: When is the due date for the performance report?

A1: Performance reports are due by **August 01, 2016** for all programs. No extensions will be granted beyond this date. Failure to submit a performance report by your due date may place your grant in a non-compliant status.

Q2: What dates does the performance report cover?

A2: The performance report submitted by grantees should cover all activities conducted through the grant for the period **July 01, 2015 - June 30, 2016**.

Q3: Is it possible to change data entered incorrectly in a prior reporting period?

A3: No. Data entered in a previous reporting period cannot be edited. It is important that grantees endeavor to provide the most accurate data during each reporting period.

FAQs about the Program Characteristics (PC) forms:

Q4: Do I need to set up my training program again if it is being reused in the current reporting period?

A4: No. If you previously reported on a training program, you do not need to set up the program again. All of your previously used training programs will be displayed in your training program setup menu with a record status of 'Prior Record' displayed.

Q5: What are the status options for the different types of programs?

A5: Structured and Unstructured Training programs use program status options of "Ongoing" or "Complete." All other types of training programs (degree/certificate, internships, fellowships, 1-year retraining, practica/field placements, and residencies) use the status options of "Active" and "Inactive."

Q6: In the PC forms, do we count all trainees in our program regardless of the year of study; include full-time/part-time trainees, etc.?

A6: Yes, as long as trainees are enrolled or participating in the training program identified under Block 1.

Q7: Are we required to provide this information only on the trainees in the programs we received funding for?

A7: The PC tables capture information about the universe of trainees regardless of funding status at your school. This is the only form that collects this type of information in aggregate.

FAQs about the LR-1 through DV-3 forms:

Q8: In prior reports, the LR-1, LR-2 and DV tables reported unduplicated counts. In this current reporting format, will we be reporting duplicated counts for those tables?

A8: The new format requires grantees to provide counts by training program. While we understand that an individual may participate in multiple programs offered by grantees, this new approach will allow us to better understand each program separately.

Q9: In the LR- and DV- tables, are the counts for graduates and/or program completers a subset of the total trainee number or are they to be reported separately?

A9: On the LR- and DV- forms, graduates and program completers are not reported as a subset of the current trainee total. Please report aggregate counts of trainees (e.g., enrollees, residents, and fellows) SEPARATELY from the aggregate counts of graduates or program completers.

Q10: What address should we use to determine if an individual is considered to come from a rural residential background? Do we consider a student's high school address, medical school address or childhood home address?

A10: It depends on the information available. The definition of rural residential background is based on whether an individual has ever lived in a rural area. Grantees may choose to use the address prior to matriculation or the institution's address.

FAQs about the INDGEN form:

Q11: Where do we get the Trainee Unique ID?

A11: Grantees are responsible for developing a unique ID for each individual for which an INDGEN entry is required. Grantees must keep a log of these unique IDs in order to provide 1-year follow-up updates through the BPMH system.

Q12: What are the characters of the 7 digit unique ID?

A12: Each unique ID must be made up of 7 alphanumeric characters (meaning that, you may use a combination of both letters and numbers).

Q13: Are INDGEN records from the last reporting period stored in the EHB?

A13: It depends. All INDGEN records that were reported during prior reporting periods will be shown in your INDGEN table as 'Prior Records' until (a) the record is marked as a graduate/ program completer, or (b) the individual permanently discontinues participation in the training program (i.e., attrition). Any INDGEN record that was marked as having graduated or completed will be transferred into INDGEN-PY for the next reporting period. INDGEN records for individuals who permanently discontinued training will not re-populate in EHB in the next reporting period.

Q14: Last year we created individual participant codes (Unique IDs) to be included in the INDGEN table. If any of those participants attend a new training cycle this year, should we use the same code for that participant, or create a new code for that participant? Are those codes needed this year?

A14: The purpose of the Unique ID is to track an individual's training participation over time. If the same individual is simultaneously participating in multiple training programs, you should use the same unique ID. Note that each training program must also have a unique name. The same unique ID-training program combination cannot be present in more than one location (INDGEN/INDGEN-PY).

Q15: What if an individual already listed on INDGEN did not receive a financial award during the six month reporting period?

A15: If an individual from a prior record did not receive a financial award during the current reporting period, please indicate this under Block 11. The record will remain on INDGEN until this individual is marked as a graduate/program completer or a drop-out of the training program.

Q16: Is there an option to report Ethnicity as unknown?

A16: No. While there is an option for "Not Reported" on the INDGEN form, grantees are expected to collect race and ethnicity data on each individual for whom an INDGEN entry is required. If the option of "Not Reported" is selected for an individual's race, ethnicity or any other of the core demographic variables, it is expected that the grantee will collect this information and provide an update by the next reporting period.

Q17: Is reporting the underrepresented Asian distinction no longer included? The loss of the Asian Underrepresented category is a real loss to describing the diversity of our enrollees and their under-representation in medicine – any suggestions on how we can still express this diversity within our report?

A17: The definition of an underrepresented minority (URM) included in the instruction manuals specifically states that a URM is "is an individual from a racial and/or ethnic group that is considered inadequately represented in a specific profession relative to the numbers of that racial and/or ethnic group in the general population". While some professional or accrediting organizations collect detailed information on Asian subpopulations, data sources for the general population (i.e., the Census) do not. Therefore, it is not possible to determine that specific Asian subpopulations are underrepresented relative to the general population. Furthermore, federal agencies have been directed by the Office of Management and Budget to

collect race/ethnicity data in a manner consistent with that used for the Census. As a result, all race and ethnicity categories displayed in the INDGEN sub-form are identical to those used in the Census.

Q18: Can we use our institutions definitions/standards for disadvantaged background?

A18: The BHW definition of disadvantaged background is included in the glossary of each instruction manual. As long as an institution's definition or standard does not contradict the federal definition of disadvantaged, then grantees may choose to count individuals who have been deemed disadvantaged by the institution. Otherwise, you must use the definition for disadvantaged background located in your program manual glossary.

Q19: Do we report full time faculty who receive salary support for teaching or administrative responsibilities?

A19: It depends on whether a specific faculty member is part of the project. For project staff (including faculty), this information is not required as it is captured in your grant's budget documents.

Q20: Do conference registration fees count as financial support?

A20: Yes, but only for non-project staff.

Q21: How do we find out an individual's family income?

A21: The institution's financial aid office should have that information, as part of the required application for financial aid.

Q22: For veteran status, are we asking only for the student or trainee's status, or the trainee's family status (e.g. dependent of veteran, spouse of veteran, etc.)?

A22: Only the trainee's status should be reported.

Q23: How is the academic year funding total calculated?

A23: The academic year total is automatically calculated in EHB as the sum of funding during the academic year. When you enter, save, and validate the funding amount for the current reporting period, the academic year total will automatically populate.

Q24: How is the cumulative funding total calculated?

A24: The cumulative funding total is automatically re-calculated each annual reporting period in EHB. This is the total of each annual amount that has been entered for the individual record either (a) across the life of the grant or (b) since the BPMH system has been in use starting with Academic Year 2012-2013.

FAQs about the INDGEN-PY form:

Q25: How do I use the INDGEN-PY form?

A25: One year after an INDGEN record is marked as a graduate/program completer, you will be asked to provide an update on the individual's employment/enrollment status.

FAQs about the Experiential Training (EXP) forms:

Q26: What training sites do I need to report on this form? Is it all of the sites our program uses?

A26: Grantees should report only on sites used to provide training to students, trainees, or faculty supported by the grant during the current reporting period.

Q27: Our hospital provides multiple training sites for our trainees. Do I list the hospital or the specific clinics and offices within the hospital?

A27: You should list the specific clinics and offices within the hospital that provide training to supported trainees for the EXP forms.

Q28: Do I need to list a site more than once on EXP-2?

A28: You may need to list a site multiple times on the EXP-2 form. For sites that provide training to students, trainees and faculty from different training programs, it should be listed on the form for each training program the grant sponsors.

Q29: How can I report Interprofessional team-based care at the training sites?

A29: Interprofessional team-based care reporting is a three-step process on the EXP-3 form. After identifying the training program and site, the first step is to select ALL of the professions and disciplines represented on the interprofessional team (including the profession of the principal-HRSA sponsored trainees). The second step is to provide the number of trainees (by discipline) who were trained by the HRSA-sponsored program (principal trainees). The final step is to provide the number of other trainees (by discipline) who were trained at the site, alongside the principal trainees, but were not enrolled in the HRSA-sponsored program.

FAQs about the Curriculum Development and Enhancement (CDE) forms:

Q30: What if courses are created with a variety of funding sources?

A30: Grantees should complete a CDE-1 entry for each course or training activity that was developed or enhanced using any amount of HRSA grant funds.

Q31: Why do only some of the courses I entered last time appear in the CDE-1 form this time?

A:31 Only courses that were marked as ‘Under Development’ or ‘Developed but Not Yet Implemented’ will pre-populate the CDE-1 table. Courses marked as ‘Implemented’ will pre-populate the new CDE-1a table.

Q32: For CDE-2, do we report on all attendees or only those directly funded by a BHW-funded program for this reporting period?

A32: For the purposes of the CDE-2 form, count all individuals trained (whether or not the individuals received direct financial support) through courses or training activities developed or enhanced using any BHW funds during the current reporting period.

FAQs about the Faculty Development (FD) forms:

Q33: What is the difference between a structured faculty development program and an unstructured faculty development activity?

A33: Structured and unstructured faculty development programs differ in a few ways. Generally, structured faculty development programs are administered over a longer period of time and involve multiple meetings/sessions. Additionally, structured programs tend to be curriculum-driven, and may lead to the conferral of a degree or certificate. In contrast, unstructured faculty development activities are shorter in duration, and are single, stand-alone trainings. Faculty development activities include conferences, workshops, and grand rounds.

FAQs about the Continuing Education (CE) forms:

Q34: For CE-2, do we report on all attendees or only those directly funded by a BHW-funded program for this reporting period?

A34: For the purposes of the CE-2 form, count all individuals trained (whether or not the individuals received direct financial support) through courses or training activities developed or enhanced using any BHW funds during the current reporting period. Individuals attending CE trainings should be current providers, rather than students.

FAQs about Technical Support & Assistance:

Q35: Who do we contact if we need technical assistance entering data in EHB?

A35: Grantees should contact HRSA's Call Center for any type of questions related to the performance report. The Call Center can be reached via phone at 1-877-464-4772.

Q36: Where will grantees be able to locate the instruction manuals for the performance reports?

A36: Grantees will be able to access their program-specific instruction manual through the EHB. In addition, the manuals will be posted on the BHW grants website at <http://bhw.hrsa.gov/grants/reporting/index.html>.

Q37: Is there a way to look at the data forms required for my program without logging into EHB?

A37: Yes. Grantees will be able to view a program-specific overview of the required performance measure forms on the BHW grants website at <http://bhw.hrsa.gov/grants/reporting/index.html>.

Q38: Are reports from prior years stored in the EHBs?

A38: Yes. Grantees can locate reports from prior reporting periods in EHB by using any of the following methods:

- a) Clicking the 'view prior period data' link within a form or under your Resources tab;
- b) Going into your grant folder and searching for previously completed reports; or
- c) Clicking on the "submissions" link in the left side navigation menu.

Q39: Will the information we are submitting in this reporting period be automatically used to populate the forms in the future?

A39: Yes. Depending on the form, certain data fields will prepopulate for future reporting periods based on the data you enter when the record is initially created. For example, information reported on the EXP-1 and EXP-2 forms for training sites used will carry over each reporting period. Similarly, much of the information reported on the INDGEN form will also carry over each reporting period until the individual completes their specific training program or permanently leaves before completion.