

ACADEMIC YEAR 2015-2016



**Instruction Manual for Grantees of the  
Faculty Development in General, Pediatric, and  
Public Health Dentistry and Dental Hygiene**

**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 **Faculty Development in Dentistry and Dental Hygiene** grant program:
  - **Plan, develop, and operate a program for the training of oral health care providers who plan to teach.**
  - **Provide financial assistance in the form of traineeships and fellowships to dentists who plan to teach.**
  - **Meet the costs of projects to establish, maintain, or improve dental faculty development.**
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
1	Performance Data Form	Individual Characteristics-INDGEN Subforms	IND-GEN
2	Performance Data Form	Individual Characteristics-INDGEN Subforms	INDGEN-PY
3	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-1
4	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-1a
5	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-2
6	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-1a
7	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-1b
8	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-2a
9	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-2b
10	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-4a

Order	Type of Form	Parent Form	Form ID
11	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-4b
12	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-5

## **Individual-level Data: INDGEN Subforms**

### **INDGEN - Introduction**

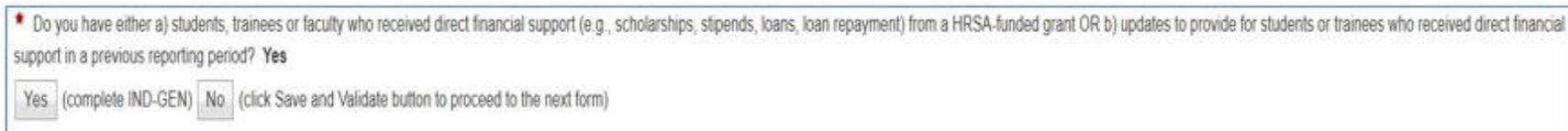
#### **Notice to Grantees about Individual-level Data:**

1. You must complete an INDGEN record for each individual who received a BHW-funded financial award during the annual reporting period. In addition, annual updates are required for individuals who were previously reported on INDGEN and were not marked as having graduated, completed or attrited from their training program by **June 30, 2016**.
2. For prior records, the BPMH system will prepopulate certain blocks in the INDGEN subform with data submitted in previous reporting periods for each individual.
3. The INDGEN subform will automatically calculate and display read-only columns labeled "Academic Year Total" and "Cumulative BHW Financial Award Total."
  - a. The Academic Year Total will display the amount entered for a given academic year.
  - b. The Cumulative BHW Financial Award Total will sum all amounts entered for this individual in the BMPH system.
4. Individuals who were reported as having graduated from or completed their training program in the previous reporting period will automatically be transferred from INDGEN to the INDGEN-PY subform after one (1) full calendar year has passed from the moment of graduation/completion. At that point, 1-year post-graduation/completion employment status data must be provided for each individual.

## IND-GEN: Individual Characteristics

### IND-GEN - Setup

To begin providing individual-level data for all Dental Faculty Development residents, faculty or community providers who received a BHW-funded financial award during the current reporting period or to provide updates for individuals previously reported on INDGEN, click "Yes" to the initial setup question. Clicking "Yes" will activate the embedded Excel® form that will allow you to begin data entry.



Do you have either a) students, trainees or faculty who received direct financial support (e.g., scholarships, stipends, loans, loan repayment) from a HRSA-funded grant OR b) updates to provide for students or trainees who received direct financial support in a previous reporting period? **Yes**

(complete IND-GEN)  (click Save and Validate button to proceed to the next form)

Figure 3. IND-GEN - Setup



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



**Warning:** If you are unable to enter data into the INDGEN form, edit prior records, or see drop-down menus despite the question above being answered 'Yes', you have a browser compatibility problem. Please refer to the Getting Started-Browser Settings page at the beginning of this manual.



**Warning:** Gray fields in prior records cannot be edited.

**IND-GEN - Entering Trainee Unique ID**

Record Status	Trainee Unique ID	Select Individual's Training or Awardee Category	Select Individual's Enrollment / Employment Status	Select Individual's Sex
	(2) Block 1	(3) Block 2	(4) Block 3	(5) Block 4

**Figure 4. IND-GEN - Entering Trainee Unique ID**

**Trainee Unique ID:** Enter a seven (7) alphanumeric unique identifier for each individual in the textbox in Column 2 (Block 1).



**Warning:** It is the responsibility of each grantee to keep a log of all unique IDs used, as these will be required to provide annual updates and 1-year follow-up data for each individual.



**Note:** This column will pre-populate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.

### IND-GEN - Selecting Individual's Training or Awardee Category

Record Status	Trainee Unique ID	Select Individual's Training or Awardee Category	Select Individual's Enrollment / Employment Status	Select Individual's Sex
	(2) Block 1	(3) Block 2	(4) Block 3	(5) Block 4
		<input type="text" value="Select one"/> Faculty		

Figure 5. IND-GEN - Selecting Individual's Training or Awardee Category

**Select Individual's Training or Awardee Category:** Select each individual's training category by clicking on the drop-down menu in Column 3 (Block 2) and choosing one of the following options:

- Faculty
- Practicing Professional
- Resident



*Note: This column will pre-populate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.*

### IND-GEN - Selecting Individual's Enrollment/Employment Status

Record Status	Trainee Unique ID (2) Block 1	Select Individual's Training or Awardee Category (3) Block 2	Select Individual's Enrollment / Employment Status (4) Block 3	Select Individual's Sex (5) Block 4
			<input type="text" value="Select one"/> Full-time Part-time	

Figure 6. IND-GEN - Selecting Individual's Enrollment/Employment Status

**Select Individual's Enrollment / Employment Status:** Select each individual's current enrollment or employment status by clicking on the drop-down menu in Column 4 (Block 3) and choosing one of the following options:

- Both Full-time and Part-time
- Full-time
- On leave of absence
- Part-time
- Inactive

## IND-GEN - Selecting Individual's Sex

Record Status	Trainee Unique ID (2) Block 1	Select Individual's Training or Awardee Category (3) Block 2	Select Individual's Enrollment / Employment Status (4) Block 3	Select Individual's Sex (5) Block 4
			Select one	<input type="text" value="Select one"/> Select one Male Female

Figure 7. IND-GEN - Selecting Individual's Sex

**Select Individual's Sex:** Select each individual's sex by clicking on the drop-down menu in Column 5 (Block 4) and choosing one of the following options:

- Female
- Male
- Not Reported



**Warning:** The "Not Reported" option may not be selected for prior records.



*Note:* This column will pre-populate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.

**IND-GEN - Selecting Individual's Age**

Trainee Unique ID	Select Individual's Training or Awardee Category	Select Individual's Enrollment / Employment Status	Select Individual's Sex	Select Individual's Age
(2) Block 1	(3) Block 2	(4) Block 3	(5) Block 4	(6) Block 5
		Select one	Select one	<div style="border: 1px solid red; padding: 2px;"> <input type="text" value="24"/> </div>
				25

**Figure 8. IND-GEN - Selecting Individual's Age**

**Select Individual's Age:** Select each individual's age at the end of the current reporting period in the drop-down menu in Column 6 (Block 5).

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Health Resources and Services Administration  
Bureau of Health Workforce

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- Not Reported

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### IND-GEN - Selecting Individual's Ethnicity

Trainee Unique ID	Select Individual's Ethnicity	Select Individual's Race	Select Whether Individual is from a Rural Residential Background
(2) Block 1	(7) Block 6	(8) Block 7	(9) Block 8
	<div style="border: 1px solid red; padding: 2px;">Select one Hispanic/Latino Non-Hispanic/Non-Latino</div>		

**Figure 9. IND-GEN - Selecting Individual's Ethnicity**

**Select Individual's Ethnicity:** Select each individual's ethnicity by clicking on the drop-down menu in Column 7 (Block 6) and choosing one of the following options:

- Hispanic/Latino
- Non-Hispanic/Non-Latino
- Not Reported



**Warning:** The "Not Reported" option may not be selected for prior records.



*Note:* This column will pre-populate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.

## IND-GEN - Selecting Individual's Race

Trainee Unique ID	Select Individual's Ethnicity	Select Individual's Race	Select Whether Individual is from a Rural Residential Background
(2) Block 1	(7) Block 6	(8) Block 7	(9) Block 8
		<input type="checkbox"/> American Indian or Alaska N <input type="checkbox"/> Asian	

Figure 10. IND-GEN - Selecting Individual's Race

**Select Individual's Race:** Select each individual's race by clicking on the drop-down menu in Column 8 (Block 7) and choosing all that apply from the following options. You may select more than one option for individuals of multiple races:

- American Indian or Alaska Native
- Black or African-American
- White
- Asian
- Native Hawaiian or Other Pacific Islander
- Not Reported



**Warning:** You may not select "Not Reported" in combination with any other option.



**Warning:** The "Not Reported" option may not be selected for prior records.



*Note:* This column will pre-populate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.

## IND-GEN - Selecting if Individual is from a Rural Residential Background

Trainee Unique ID	Select Individual's Ethnicity	Select Individual's Race	Select Whether Individual is from a Rural Residential Background
(2) Block 1	(7) Block 6	(8) Block 7	(9) Block 8
			<input type="text" value="Select one"/>
			Yes
			No

Figure 11. IND-GEN - Selecting if Individual is from a Rural Residential Background

**Select Whether Individual is from a Rural Residential Background:** Select whether each individual is from a rural residential background by clicking on the drop-down menu in Column 9 (Block 8) and choosing one of the following options:

- Yes
- No
- Not Reported



**Warning:** The 'Not Reported' option may not be selected for prior records.



*Note:* This column will pre-populate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.



*Reference:* Refer to the glossary for a definition of rural setting.

## IND-GEN - Selecting if Individual is from a Disadvantaged Background

Trainee Unique ID	Select Whether Individual is from a Disadvantaged Background	Select Individual's Veteran Status
(2) Block 1	(10) Block 9	(11) Block 10
	<input type="text" value="Select one"/> Yes No	

Figure 12. IND-GEN - Selecting if Individual is from a Disadvantaged Background

**Select Whether Individual is from a Disadvantaged Background:** Select whether each individual is from a disadvantaged background by clicking on the drop-down menu in Column 10 (Block 9) and choosing one of the following options:

- Yes
- No
- Not Reported



**Warning:** The "Not Reported" option may not be selected for prior records.



*Note:* This column will pre-populate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.



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

### IND-GEN - Selecting Individual's Veteran Status

Trainee Unique ID	Select Whether Individual is from a Disadvantaged Background	Select Individual's Veteran Status
(2) Block 1	(10) Block 9	(11) Block 10
		<div style="border: 1px solid red; padding: 2px;">           Select one            Active Duty Military            Reservist            Veteran - Prior Service         </div>

**Figure 13. IND-GEN - Selecting Individual's Veteran Status**

**Select Individual's Veteran Status:** Select each individual's current veteran status by clicking on the drop-down menu in Column 11 (Block 10) and choosing one of the following options:

- Active Duty Military
- Reservist
- Veteran - Retired
- Individual is not a Veteran
- Veteran - Prior Service
- Not Reported



**Warning:** The "Not Reported" option may not be selected for prior records.



*Note:* This column will pre-populate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.

## IND-GEN - Entering BHW-Funded Financial Award Information



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

Trainee Unique ID	Select Whether Individual Received BHW Financial Award?	Enter Individual	
		Traineeship	Fellowship
(2) Block 1	(12) Block 11	(14) Block 11	(20) Block 11
	<div style="border: 1px solid red; padding: 2px;">           Select one            Yes            No         </div>		

**Figure 14. IND-GEN - Entering BHW-Funded Financial Award Information**

**Select Whether Individual Received BHW Financial Award?:** Select whether each individual received a BHW-funded financial award (i.e., salary and benefits) during the current reporting period by clicking on the drop-down menu in Column 12 (Block 11) and choosing one of the following options:

- Yes
- No

### Enter Individual's Financial Award Amount (BHW funds only): Traineeship:

- **If the individual is a resident, faculty, or community provider and received a BHW-funded financial award (Traineeship),** enter the total amount of BHW dollars provided during the current reporting period in the textbox under **Traineeship**. Total amount reported should account for all BHW dollars including those applied to salary, fringe benefits, travel expenses, conference expenses, tuition, fees, books, and reasonable living expenses, as allowed by federal statutes and regulations.
- **If the individual did not receive a Traineeship,** select "No" under Column 12 (Block 11) and enter "0" in all financial award columns where no money was disbursed.

**Enter Individual's Financial Award Amount (BHW funds only): Fellowship:**

- **If the individual is a resident, faculty, or community provider and received a BHW-funded financial award (Fellowship)**, enter the total amount of BHW dollars provided during the current reporting period in the textbox under **Fellowship**. Total amount reported should account for all BHW dollars including those applied to salary, fringe benefits, travel expenses, conference expenses, tuition, fees, books, and reasonable living expenses, as allowed by federal statutes and regulations.
- **If the individual did not receive a Fellowship**, select "No" under Column 20 (Block 11) and enter "0" in all financial award columns where no money was disbursed.



*Note: The amount reported under the column labeled "Salary and benefits" should be the total monies from the grant provided to an individual during the current reporting period for the purposes of participating in the training program that was selected under the column labeled "Type of Training Program." Do not include dollars that came from other sources of funding. If an individual participated in more than one (1) program and received salary and benefits for each program, multiple entries on INDGEN are required to capture participation and funding amounts for each program separately.*

### IND-GEN - Entering # of Academic Years the Individual has Received BHW Funding

Trainee Unique ID	Enter # of Academic Years the Individual has Received BHW Funding	Select Individual's Academic or Training Year
(2) Block 1	(22) Block 12	(26) Block 15
	<input type="text" value="Select one"/> 0 1	

Figure 15. IND-GEN - Entering # of Academic Years the Individual has Received BHW Funding

**Enter # of Academic Years the Individual has Received BHW Funding:** Select the cumulative number of academic years in which each individual has received a BHW-funded financial award by clicking on the drop-down menu in Column 22 (Block 12) and choosing one of the following options:

- 0
- 1
- 2
- 3
- 4
- 5 or more



**Warning:** All new records should select at least one academic year of funding.



*Note: The number of academic years receiving BHW-funded financial awards does not need to be consecutive; rather, the cumulative total number of years should be reported.*



*Note: If an individual has received money for a partial academic year, please round up to the nearest whole number. For example, if an individual has received direct financial support for 1 ½ years, please enter 2 in Column 22 (Block 12).*



*Note: If an individual received a BHW-funded financial award for the first time during the current reporting period, select "1" under Column 22 (Block 12).*

## IND-GEN - Selecting Individual's Academic or Training Year

Select Individual's Academic or Training Year	Select Individual's Primary Discipline
(26) Block 15	(27) Block 16
Select one Graduate Year 1 Graduate Year 2	

Figure 16. IND-GEN - Selecting Individual's Academic or Training Year

**Select Individual's Academic or Training Year:** Select each individual's current training year in the training program by clicking on the drop-down menu under Column 26 (Block 15) and choosing one of the following options:

- Faculty
- Graduate Year 2
- Non-degree Training Program Year 2
- Residency Year 1
- Residency Year 3
- Graduate Year 1
- Graduate Year 3
- Non-degree Training Year 1
- Residency Year 2
- Residency Year 4



*Note: For residents, use Residency Year. For faculty and dentists earning a degree, select Graduate Year. For faculty and community dentists who are not in a degree program, select Non-degree Training Program Year 1 or Year 2.*



*Note: If an individual has received money for 1/2 an academic year, please round up. For example, if a resident or faculty member has received a financial award for 1 1/2 years, please enter 2.*

## IND-GEN - Selecting Individual's Primary Discipline

Select Individual's Academic or Training Year	Select Individual's Primary Discipline	Select Whether Individual Left the Program Before Completion
(26) Block 15	(27) Block 16	(36) Block 21
Select one	<input type="text" value="Select one"/>	
	<ul style="list-style-type: none"> <li>Dentistry - Dental Hygiene</li> <li>Dentistry - Endodontic Dentistry</li> <li>Dentistry - General Dentistry</li> </ul>	

Figure 17. IND-GEN - Selecting Individual's Primary Discipline

**Select Individual's Primary Discipline:** Select individual's profession and discipline by clicking on the drop-down menu in Column 27 (Block 16) and choosing one of the available options.

- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry



**Warning:** If the faculty member or dentist is teaching in a discipline area that is different than the one reported above (the area they trained in), please note in the comment field which discipline area the faculty member is teaching in during the reporting period.



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

### IND-GEN - Selecting Whether Individual Left the Program Before Completion

Select Individual's Academic or Training Year	Select Individual's Primary Discipline	Select Whether Individual Left the Program Before Completion
(26) Block 15	(27) Block 16	(36) Block 21
		<input type="text" value="Select one"/>
		Yes
		No

Figure 18. IND-GEN - Selecting Whether Individual Left the Program Before Completion

**Select Whether Individual Left the Program Before Completion:** Select whether each individual permanently left their training program before completion during the current reporting period by clicking on the drop-down menu in Column 36 (Block 21) and choosing one of the following options:

- Yes
- No

## IND-GEN - Entering Graduation/Completion Information



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

Select Whether Individual Left the Program Before Completion	Select Whether Individual Graduated/Completed the Program	Select Degree Earned	Select Individual's Post-Graduation/Completion Intentions
(36) Block 21	(37) Block 22	(38) Block 22a	(39) Block 22b
	Yes Select one Yes No	MA	Individual intends to teach

**Figure 19. IND-GEN - Entering Graduation/Completion Information**

**Select Whether Individual Graduated/Completed the Program:** Select whether each individual completed from their training program during the current reporting period by clicking on the drop-down menu in Column 37 (Block 22) and choosing one of the following options:

- Yes
- No

**Select Degree Earned:** If a resident, faculty, or community dentist graduated from their Dental Faculty Development program during the current reporting period, select any degree earned through the program by clicking on the drop-down menu under Column 38 (Block 22a) and choosing one of the available options

If an individual did not graduate during the current reporting period, select "N/A" under Column 38 (Block 22a).

- Certificate
- Master's Degree Not Otherwise Specified
- MHA
- MS-CTS
- Doctoral Degree Not Otherwise Specified
- MBA
- MPH
- MSC
- MA
- MEd
- MS
- MSCR

- MSPH

- PhD

- N/A

### Select Individual's Post-Graduation/Completion Intentions:

Select the resident's or community provider's training or employment intentions by clicking on the drop-down menu under Column 39 (Block 22b) and choosing all that apply from the available options.

**If an individual did not graduate during the current reporting period,** select "N/A" under Column 39 (Block 22b).

- Individual intends to conduct research
- Individual intends to practice in a primary care setting
- Individual intends to teach
- Not Reported
- Individual intends to practice in a medically underserved area
- Individual intends to practice in a rural area
- None of the above
- N/A



**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.**

## INDGEN-PY: Individual Prior Year

### INDGEN-PY - Entering Employment Data 1-year Post Graduation/Completion



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

Type of Training Program	Trainee Unique ID	Select Individual's Training or Awardee Category	Select Individual's Enrollment / Employment Status	Select Individual's Sex	Select Individual's Age	Select Individual's Ethnicity	Select Individual's Race	Select Whether Individual is from a Rural Residential Background	Select Whether Individual is from a Disadvantaged Background	Select Individual's Post-Graduation/Completion Intentions	Select whether status/employment data are available for the individual 1-year post graduation/completion	Select Individual's Current Training/Employment Status	Select Whether Your Organization Hired this Individual
(1)	(2) Block 1	(3) Block 2	(4) Block 3	(5) Block 4	(6) Block 5	(7) Block 6	(8) Block 7	(9) Block 8	(10) Block 9	(12) Block 22b	(13) Block 23	(14) Block 23a	(16)

**Figure 20. INDGEN-PY - Entering Employment Data 1-year Post Graduation/Completion**

**Select whether status/employment data are available for the individual 1-year post graduation/completion:** To select whether current training/employment data are available for each prior program completer click on the drop-down menu in Column 13 (Block 23) and choose one of the following options:

- Yes
- No

#### Select Individual's Current Training/Employment Status:

If current training/employment data are available, select the individual's status by clicking on the drop-down menu in Column 14 (Block 23a) and choosing all that apply from the options listed below.

**If current training/employment data are not available,** select 'N/A' in Column 14 (Block 23a).

- Individual currently practices in a medically underserved area
- Individual currently practices in a rural area
- Individual currently practices in a primary care setting
- Individual is currently conducting research

- Individual is currently teaching
- N/A
- None of the above

**Select Whether Your Organization Hired this Individual:** Select whether your organization hired this individual following training program completion by clicking on the drop-down menu under Column 16 and choosing one of the following options:

- No
- Yes
- N/A



**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 - Introduction**

### **Notice to Grantees about Forms Pertaining to Course Development & Enhancement Activities**

The CDE-1 and CDE-2 forms will pre-populate specific information about the names and characteristics of courses or other training activities that have been developed or enhanced using BHW funds in previous reporting periods. Please read the following instructions carefully to ensure the CDE-1 and CDE-2 forms are completed accurately.

- CDE-1: Collects information about newly developed or enhanced courses. Courses or other training activities marked as "Under Development" or "Developed, but not Yet Implemented" in a previous reporting period will be pre-populated and must be updated on an annual basis until marked as "Implemented."
- CDE-1a: Courses and other training activities that were marked as "Implemented" in a previous reporting period will be transferred to the CDE-1a form. The only action required in this form is to select whether the course or training activity that was previously implemented was offered during the current reporting period.
- CDE-2: Collects the number of individuals who participated in the CDE courses and training activities (grouped by course and primary discipline).

 **Warning: CDE-1 and CDE-1a forms must be completed and validated prior to beginning the CDE-2 form.**

## CDE-1: Course Development and Enhancement - Course Information

### CDE-1 - Setup

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.



The screenshot shows a web interface for the CDE-1 Setup form. At the top, there is a link for "View Prior Period Data". Below this, there are three tabs: "CDE-1", "CDE-1a", and "CDE-2". The "CDE-1" tab is currently selected. Below the tabs, there is a message: "Fields with \* are required". A red asterisk is followed by the question: "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". Below the question are two buttons: "Yes (complete CDE-1 and CDE-2)" and "No (Click Save and Validate to proceed to the next form)".

Figure 21. CDE-1 - Setup



**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 forms.



**Warning:** Complete the CDE-1 Setup form only if grant funds were used to develop or enhance NEW courses or training activities other than those previously reported.

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

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



• Add Course

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

Add Record

**Figure 22. 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 at any point during the entire project period. Next, click the "Add Record" button to save your entry. Repeat this process to enter each course or training activity that was developed or enhanced through the grant separately.

 **Warning: Complete the CDE-1 Setup form only if grant funds were used to develop or enhance NEW courses or training activities other than those previously reported.**

### CDE-1 - Selecting Type of Course or Training Activity

No. Record	Name of Course or Training Activity	Select Type of Course or Training Activity	Select whether Course or Training Activity was Newly Developed or Enhanced	Select Status of Development or Enhancements
(1)	Block 1	Block 2	Block 3	Block 4
1	New Record Course 1	Select one Select one Academic course	Select one	Select one

Figure 23. 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
- Clinical rotation
- Faculty development programs or activities
- Field placement/practicum
- Grand rounds

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

No. Record	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
1	New Record Course 1	Select one	Select one Select one Newly developed	Select one

Figure 24. 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 identified under Column 1 (Block 1) was newly developed or was enhanced by clicking on the drop-down menu under 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.*

## CDE-1 - Entering Development/Enhancement Status



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

No. Record	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
1 New Record	Course 1	Select one	Select one	Select one Select one Under development		

**Figure 25. 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 under 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:**

- **For records marked as "Implemented" in Column 4 (Block 4),** 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 records marked as "Under Development" or "Developed, not yet implemented",** enter N/A under Column 6 (Block 4a).

**For Courses or Training Activities Implemented, Enter Academic Year of First Implementation: To Year:**

- **For records marked as "Implemented" in Column 4 (Block 4)**, 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.
- **For records marked as "Under Development" or "Developed, not yet implemented"**, enter N/A under Column 6 (Block 4a).

### CDE-1 - Entering Curriculum

No. Record Status	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		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
					From Year (5) Block 4a	To Year (6) Block 4a		
1 New Record	Course 1	Select one	Select one	Select one				Select one

Figure 26. 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".*

### CDE-1 - Selecting Delivery Mode

No. Record Status	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		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
					From Year (5) Block 4a	To Year (6) Block 4a		
1 New Record	Course 1	Select one	Select one	Select one				Select one Select one Classroom-based

Figure 27. 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 under 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



**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

No. Record Status	Name of Course or Training Activity	Select Type of Course or Training Activity	Select whether Course or Training Activity was Newly Developed or Enhanced	Select Status of Development or Enhancements	For Courses or Training Activities Implemented, Enter Academic Year of First Implementation		Enter the Curriculum the Course or Training Activity is Associated With	Select Delivery Mode Used to Offer this Course or Training Activity	Select Whether the Course or Training Activity was Offered in the Current Reporting Period
					From Year	To Year			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	
1	Prior Record of the Underserved	Faculty developm*	Newly developed*	Implemented*	2012	2013	Addressing the Oral He	Experiential/Field*	Select one Select one Yes

Figure 28. 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:** To begin completing the CDE-1a subform, select whether a particular course or training activity previously implemented was offered during the current reporting period by clicking on the drop-down menu under the column labeled "Select Whether Course or Training Activity was Offered During Current Reporting Period" (Column 9) and choosing one of the following options:

- Yes
- No



**Warning:** If "No" was selected in the CDE-1a subform, the name of the course or training activity previously implemented will not display as an option in the CDE-2 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: Course Development and Enhancement - Trainees by Profession/Discipline

### CDE-2 - Adding Courses and Profession/Disciplines



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

**Figure 29. CDE-2 - Adding Courses and Profession/Disciplines**

**Name of Course or Training Activity:** To begin completing the CDE-2 subform for academic courses, training workshops, grand rounds, clinical rotations, and field placement/practica that were implemented during the current reporting period, select the name of a course by clicking on the drop-down menu next to "Name of Course or Training Activity" in Column 1 (Block 1) and choosing one of the available options.

**Profession and Discipline of Individuals Trained:** Select the profession(s) and discipline(s) of individuals trained through each course or workshop offered during the current reporting period by choosing all that apply from the options listed below. Click on the "Add Record" button to save your entry. Repeat this process to capture the profession and discipline of all individuals trained in each course or training activity implemented during the current reporting period.

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Endodontic Dentistry
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Dental Hygiene
- Dentistry - General Dentistry
- Dentistry - Orthodontic Dentistry
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry - Dental Hygiene/Public Health
- Dentistry - General Dentistry/Public Health
- Dentistry - Other
- Dentistry - Periodontic Dentistry

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- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family 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 - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Public health nurse
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Allergy and Immunology
- Medicine - Dermatology
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Registered Nurse
- Other - Chiropractic
- Other - Facility Administrator
- Other - Health Informatics/Health
- Dentistry - Radiology Dentistry
- Medicine - Anesthesiology
- Medicine - Emergency 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 - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Child/Adolescent Psychiatric/Mental Health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse anesthetist
- Nursing - Nurse midwife
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife
- Other - Optometry
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Other - Veterinary Medicine
- Other - Speech Therapy

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- Other - Audiology
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Midwife (non - nurse)
- Other - Pharmacy
- Other - Radiologic technology
- Other - Speech Pathology
- Other – Occupational Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Health Policy & Management
- Public Health - Nutrition
- Student - CNS - Adult gerontology
- Student - CNS - Neonatal
- Student - CNS - Women’s health
- Student - Dental Hygiene/Public Health
- Student - Diploma/Certificate
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Home Health Aide
- Student - Medical School
- Student - NP - Adult gerontology
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Pediatrics
- Student - Physical Therapy
- Student - Registered nurse (RN)
- Student - Undergraduate - Public Health

- Information Technology
- Other - Medical Laboratory Technology
- Other - Office/Support Staff
- Other - Podiatry
- Other - Registered Dietician
- Other - Unknown
- Other – Physical Therapy
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Infectious Disease Control
- Public Health - Social & Behavioral Sciences
- Student - CNS - Family
- Student - CNS - Pediatrics
- Student - Dental Assistant
- Student - Dental School
- Student - Graduate - Nursing Doctorate
- Student - Graduate - Other Behavioral Health
- Student - Graduate - Social Work
- Student - Law School
- Student - NP - Acute care adult gerontology
- Student - NP - Adult Psychiatric/Mental health
- Student - NP - Family
- Student - NP - Neonatal
- Student - NP - Women’s health
- Student - Physician Assistant
- Student - Registered Nurse - BSN

- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Administration
- Public Health - Injury Control & Prevention
- Student - Alternative/Complementary Nursing
- Student - CNS - Geropsychiatric
- Student - CNS - Psychiatric/Mental health
- Student - Dental Hygiene
- Student - Dental School/Public Health
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Health Informatics
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - NP - Acute care pediatric
- Student - NP - Child/Adolescent Psychiatric/Mental Health
- Student - NP - Family Psychiatric/Mental Health
- Student - NP - Other advanced nurse specialists
- Student - Pharmacy School
- Student - Post - high school / Pre - college
- Student - Undergraduate - Other



*Note: Only the names of courses/training activities that were marked as "Implemented" in the CDE-1 subform (for new records) or marked as "Offered" in the CDE-1a subform (for previous records) will appear as options in the drop-down menu.*

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



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

No. Activity (1)	Name of Course or Training (1)	Profession and Discipline of Individuals Trained (2)	Enter # Trained in this Profession and Discipline (3)
	Block 1	Block 7	Block 7
1	Course 1	Student - NP - Acute care pediatric	<input type="text"/>

**Figure 30. CDE-2 - Entering # Trained in the Profession and Discipline**

#### Enter # Trained in this Profession and Discipline:

For each row, enter the number of trainees from that 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 or workshop offered during the current reporting period.



**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.

## **Faculty Development, Instruction, and Recruitment—FD Subforms**

### **FD - Introduction**

- Purpose: The FD-1 subforms collect information about the characteristics and the trainees of structured faculty development programs.
- Purpose: The FD-2 subforms collect information about the characteristics and the trainees of faculty development activities.
- Purpose: The FD-4 subforms collect information about the characteristics and the trainees participating in courses and workshops offered by faculty receiving direct financial support from a BHW grant.
- Purpose: The FD-5 form collects information about faculty recruitment.

## FD-1a: Faculty Development - Structured Faculty Development Training Programs

### FD-1a - Adding Structured Faculty Development Programs



**Warning:** The FD-1a and FD-1b subforms will only appear if "Structured Faculty Development Training Program" was selected in the Faculty Development Setup form.



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

\* Add Structured Faculty Development Program

Program Name Program 1

Add Record

Figure 31. FD-1a - Adding Structured Faculty Development Programs

#### Program Name:

Enter the name of each new structured faculty development program coordinated and/or supported through the grant during the current reporting period. Next, select "Add Record." Repeat this process as necessary to enter each new structured faculty development program that was coordinated and/or supported through the grant during the current reporting period.



**Warning:** If a previously-completed program (prior record) is being offered again with a new cohort, it will need to be re-created as a new record.

*Example:*

*Example: The School of Medicine used BHW funds to support TeamSTEPPS training for ten (10) faculty members. In the first semester, the school used grant funds to pay for the costs of training three (3) faculty members. In the second semester, the school used grant funds to pay for the costs of training an additional seven (7) faculty members.*

*Since each faculty development program supported through the grant must be reported separately, the School of Medicine would have 2 entries—TeamSTEPPS #1 and TeamSTEPPS #2 (names are for illustrative purposes only). The School of Medicine would complete the FD-1a and FD-1b subforms for each of these programs.*

### FD-1a - Selecting Program Status

No. Record	Program Status	Program Name (1)	Select Program Status in the Current Reporting Period (1a)	Select Whether this was a Degree Bearing Program (2) Block 2	For Degree-bearing Programs		For Non-Degree Bearing Program, Enter
					Select Type of Degree Offered (3) Block 2a	Select Primary Focus Area (4) Block 2b	Length of Training Program in Clock Hours (5) Block 3
1	New Record	Program 1	<div style="border: 1px solid red; padding: 2px;">                     Select one                      Select one                      Ongoing                 </div>	Select one	Select one	Select one	

Figure 32. FD-1a - Selecting Program Status

**Select Program Status in the Current Reporting Period:** Select the status of each structured faculty development program at the end of the current reporting period by clicking on the drop-down menu under Column 1a and choosing one of the following options:

- Complete
- Ongoing



**Warning:** If no additional structured faculty development programs were supported through the grant during the current reporting period other than those previously reported, skip to FD-1a Step 5.



*Note: Select "Ongoing" if the training program did not conclude by the end of the current reporting period.*

 *Note: Select "Complete" if the training program concluded at some point during the current reporting period.*

### FD-1a - Entering Program Information for Degree/Non-Degree Programs



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

No. Record	Program Status (1)	Program Name (1)	Select Program Status in the Current Reporting Period (1a)	Select Whether this was a Degree Bearing Program (2) Block 2	For Degree-bearing Programs		For Non-Degree Bearing Program, Enter
					Select Type of Degree Offered (3) Block 2a	Select Primary Focus Area (4) Block 2b	Length of Training Program in Clock Hours (5) Block 3
1	New Record	Program 1	Select one	Select one Select one Yes	Select one	Select one	

**Figure 33. FD-1a - Entering Program Information for Degree/Non-Degree Programs**

**Select Whether this was a Degree Bearing Program:** Select whether each structured faculty development program that was supported through the grant during the current reporting period culminates in awarding participants with a professional certificate or academic degree by clicking on the drop-down menu and choosing one of the following options:

- Yes
- No

**For Degree-bearing Programs: Select Type of Degree Offered:** Select the type of degree that participants will earn when completing each program by clicking on the drop-down menu in Column 3 (Block 2a) and choosing one of the available options. **If you selected "No" in Column 2 (Block 2),** select "N/A" in Column 3 (Block 2a).

- BA
- BCHS
- BPH

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- |  |   |  |
|--|---|--|
| <ul style="list-style-type: none"> <li>• BS</li> <li>• Certificate</li> <li>• DDS/MPH</li> <li>• DMD</li> <li>• DO</li> <li>• DO/MSPH</li> <li>• DrPH</li> <li>• MA</li> <li>• MCHS</li> <li>• MD/MPH</li> <li>• MD/ScD</li> <li>• MHS</li> <li>• MMS/MPH</li> <li>• MPAP</li> <li>• MPAS/MPH</li> <li>• MPH</li> <li>• MSCR</li> <li>• MSPH</li> <li>• No Degree Earned</li> <li>• Post-Masters Certificate</li> <li>• N/A</li> </ul> | <ul style="list-style-type: none"> <li>• BSN</li> <li>• DC</li> <li>• DDS/MSPH</li> <li>• DMD/MPH</li> <li>• DO/DrPH</li> <li>• DO/ScD</li> <li>• DVM</li> <li>• Master's Degree Not Otherwise Specified</li> <li>• MD</li> <li>• MD/MSPH</li> <li>• MEd</li> <li>• MMS</li> <li>• MMS/MSPH</li> <li>• MPAS</li> <li>• MPAS/MSPH</li> <li>• MS</li> <li>• MSHS</li> <li>• MSSW</li> <li>• PharmD</li> <li>• PsyD</li> </ul> | <ul style="list-style-type: none"> <li>• BSW</li> <li>• DDS</li> <li>• Diploma</li> <li>• DMD/MSPH</li> <li>• DO/MPH</li> <li>• Doctoral Degree Not Otherwise Specified</li> <li>• Joint Degrees not otherwise specified</li> <li>• MBA</li> <li>• MD/DrPH</li> <li>• MD/PhD</li> <li>• MHA</li> <li>• MMS/DrPH</li> <li>• MMS/ScD</li> <li>• MPAS/DrPH</li> <li>• MPAS/ScD</li> <li>• MS-CTS</li> <li>• MSPAS</li> <li>• MSW</li> <li>• PhD</li> <li>• ScD</li> </ul> |
|--|---|--|

**For Degree-bearing Programs: Select Primary Focus Area:** Select the primary focus area of the degree-bearing structured faculty development program by clicking on the drop-down menu in Column 4 (Block 2b) and choosing one of the available options. **If you selected "No" in Column 2 (Block 2),** select "N/A" in Column 4 (Block 2b).

- |   |  |   |
|---|--|---|
| <ul style="list-style-type: none"> <li>• Business Administration</li> <li>• Dentistry - Endodontic Dentistry</li> <li>• Dentistry - Orthodontic Dentistry</li> <li>• Dentistry - Periodontic Dentistry</li> <li>• Dentistry - Radiology Dentistry</li> <li>• Health Administration</li> </ul> | <ul style="list-style-type: none"> <li>• Dentistry - Dental Assistant</li> <li>• Dentistry - General Dentistry</li> <li>• Dentistry - Pathology Dentistry</li> <li>• Dentistry - Prosthodontic Dentistry</li> <li>• Education</li> <li>• Leadership</li> </ul> | <ul style="list-style-type: none"> <li>• Dentistry - Dental Hygiene</li> <li>• Dentistry - Oral Surgery Dentistry</li> <li>• Dentistry - Pediatric Dentistry</li> <li>• Dentistry - Public Health Dentistry</li> <li>• Education and Clinical Research</li> <li>• Other Focus Area</li> </ul> |
|---|--|---|

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- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention
- Public Health - Social & Behavioral Sciences

- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Management
- Public Health - Maternal and Child Health
- Teaching

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- Public Health - Environmental Health
- Public Health - Infectious Disease Control
- Public Health - Nutrition
- N/A

**For Non-Degree Bearing Program, Enter Length of Training Program in Clock Hours:** Enter the duration (in clock hours) of each non-degree bearing structured faculty development program in the textbox in Column 5 (Block 3). **If you selected "Yes" in Column 2 (Block 2),** enter a zero ("0") in Column 5 (Block 3).



*Note: Select "N/A" if the program culminates in a degree that is not in dentistry, education, or public health.*

### FD-1a - Entering % of Time Spent Developing Competencies in Different Roles



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

Enter the % of Time Spent Developing Competencies for the Following Roles			
Clinician (6) Block 5	Administrator (7) Block 5	Educator (8) Block 5	Researcher (9) Block 5
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Figure 34. FD-1a - Entering % of Time Spent Developing Competencies in Different Roles**

**Enter the % of Time Spent Developing Competencies for the Following Roles: Clinician:** Enter the percentage of time spent in each structured faculty development program developing competencies associated with Clinician in Column 6 (Block 5).

**Enter the % of Time Spent Developing Competencies for the Following Roles: Administrator:** Enter the percentage of time spent in each structured faculty development program developing competencies associated with Administrator in Column 7 (Block 5).

**Enter the % of Time Spent Developing Competencies for the Following Roles: Educator:** Enter the percentage of time spent in each structured faculty development program developing competencies associated with Educator in Column 8 (Block 5).

**Enter the % of Time Spent Developing Competencies for the Following Roles: Researcher:** Enter the percentage of time spent in each structured faculty development program developing competencies associated with Researcher in Column 9 (Block 5).



*Note: Percentages of time spent across the four roles must sum up to 100%.*

**FD-1a - Entering # of Faculty Who Completed the Program**

For Degree-bearing Programs		For Non-Degree Bearing Program,	Enter the % of Time Spent Developing Competencies for the Following Roles				Enter # of Faculty Who Completed the Program	Select whether any Faculty Received any type of BHPF-funded Financial Award during the Training Program
Select Type of Degree Offered (3)	Select Primary Focus Area (4)	Enter Length of Training Program in Clock Hours (5)	Clinician (6)	Administrator (7)	Educator (8)	Researcher (9)	(10)	(11)
Block 2a	Block 2b	Block 3	Block 5	Block 5	Block 5	Block 5	Block 5	Block 7
Select one	Select one							Select one

**Figure 35. FD-1a - Entering # of Faculty Who Completed the Program**

**Enter # of Faculty Who Completed the Program:** If you marked a program as "Complete" in Column 1a, enter the number of faculty who completed each structured faculty development program during the current reporting period in the textbox in Column 10 (Block 6). **If you selected "Ongoing" in Column 1a,** enter a zero ("0") in the textbox in Column 10 (Block 6).

## FD-1a - Selecting whether Faculty Received BHW-Funded Financial Award

Enter # of Faculty Who Completed the Program (10) Block 6	Select whether any Faculty Received any type of BHW-Funded Financial Award during the Training Program (11) Block 7

Figure 36. FD-1a - Selecting whether Faculty Received BHW-Funded Financial Award

### Select whether any Faculty Received any type of BHW-Funded Financial Award during the Training Program:

Select whether any faculty who participated in a structured faculty development program and received any type of BHW-funded financial award during the current reporting period by clicking on the drop-down menu in Column 11 (Block 7) and choosing from the following options:

- Yes
- No



**Warning:** You must complete an INDGEN subform for each individual who received a BHW-funded financial award during the current reporting period for participating in a structured faculty development program.



**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.

## FD-1b: Faculty Development - Faculty Trained By Profession/Discipline

### FD-1b - Adding Profession and Discipline for Structured Programs



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

Figure 37. FD-1b - Adding Profession and Discipline for Structured Programs

#### Program Name:

Select a program name by clicking on the drop-down menu next to "Program Name" and choosing one of the available options (available options will be those entered and saved in the FD-1a subform).

#### Profession and Discipline of Faculty Trained:

Select the profession(s)/discipline(s) of all faculty members who participated in each structured faculty development program during the current reporting period by choosing all that apply from the options below. Select "Add Record." Repeat this process to capture the profession/discipline of all faculty members who participated in each structured faculty development program during the current reporting period.

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry

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- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family 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 - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery -  
Integrated
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental  
health
- 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
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Allergy and Immunology
- Medicine - Dermatology
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and  
Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive  
Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery -  
Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- 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
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife
- Dentistry - Radiology Dentistry
- Medicine - Anesthesiology
- Medicine - Emergency 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 - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- 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 - Audiology
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Midwife (non - nurse)
- Other - Optometry
- Other - Podiatry
- Other - Registered Dietician

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- Nursing - Nurse midwife
- Nursing - Registered Nurse
- Other - Chiropractic
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Other - Unknown
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Infectious Disease Control
- Public Health - Other
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Radiologic technology
- Other - Speech Pathology
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Administration
- Public Health - Injury Control & Prevention
- Public Health - Social & Behavioral Sciences

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- Other - Speech Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Health Policy & Management
- Public Health - Nutrition

### FD-1b - Entering # Trained in the Profession and Discipline

No.	Program Name (1)	Profession and Discipline of Faculty Trained (2) Block 4	Enter # Trained in this Profession and Discipline (3) Block 4
1	Program 1	Dentistry - Endodontic Dentistry	<input type="text"/>

Figure 38. FD-1b - Entering # Trained in the Profession and Discipline

#### Enter # Trained in this Profession and Discipline:

For each structured faculty development program, enter the number of faculty in each profession/discipline who participated in the program during the current reporting period in the textbox in Column 3 (Block 4). Repeat this step as many times as necessary to capture the total number of faculty by profession/discipline who participated in each structured faculty development program during the current reporting period.



**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.**

## FD-2a: Faculty Development - Faculty Development Activities

### FD-2a - Entering Faculty Development Activities

 **Warning:** The FD-2a and FD-2b subforms will only appear if "Faculty Development Activities" was selected in the Faculty Development Setup form.

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



* Add Faculty Development Activities	
Activity Name	Activity 1

Add Record

Figure 39. FD-2a - Entering Faculty Development Activities

#### Activity Name:

Enter the name of each new faculty development activity coordinated and/or supported through the grant during the current reporting period in Column 1 (Block 1). Next, select "Add Record." Repeat this process as necessary to enter each new faculty development activity that was coordinated and/or supported through the grant during the current reporting period.

 **Warning:** If a previously-completed faculty development activity (prior record) is being offered again with a new cohort, it will need to be re-created as a new record.

*Example:*

*Example: The School of Medicine used BHW funds to pay for the cost of sending five (5) fellow and faculty members to the annual Academy Health conference. In addition, the school also used BHW funds to pay for the cost of sending two (2) faculty members to a local workshop on the integration of behavioral health and primary care.*

*Since each faculty development activity supported through the grant must be reported separately, the School of Medicine would have 2 entries—one entry for the Academy Health Annual Conference and one for the Integration of Behavioral Health and Primary care workshop (names are for illustrative purposes only). The School of Medicine would complete the FD-2a and FD-2b subforms for each of these activities.*

## FD-2a - Selecting Type of Faculty Development Activity Offered



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

No. (1)	Activity Name	Select Type of Faculty Development Activity Offered (2) Block 8	For Courses or Workshops	
			Select Whether Activity is Accredited for Continuing Education Credit (3) Block 8a	Select Whether Attendance was to Acquire or Maintain Professional Certification (4) Block 8b
1	Activity 1	<input type="text" value="Select one"/> <input type="text" value="Select one"/> <input type="text" value="Professional Conference"/>	<input type="text" value="Select one"/>	<input type="text" value="Select one"/>

Figure 40. FD-2a - Selecting Type of Faculty Development Activity Offered

### Select Type of Faculty Development Activity Offered:

Select the type of faculty development activity supported and/or coordinated through the grant during the current reporting period by clicking on the drop-down menu in Column 2 (Block 8) and choosing one of the following options:

- Academic Course for Continuing Education
- Clinical Rotation for Continuing Education
- Grand Rounds for Continuing Education
- Professional Conference
- Training/Workshop for Continuing Education

**For Courses or Workshops: Select Whether Activity is Accredited for Continuing Education Credit:**

- **For Clinical Rotations and Grand Rounds for Continuing Education, as well as Professional Conferences (as selected in Column 2, Block 8),** Select N/A for Column 3 (Block 8a).
- **For Academic Courses and Trainings/Workshops for Continuing Education (as selected in Column 2, Block 8),** select whether these activities are accredited for continuing education credit by clicking on the drop-down menu under Column 3 (Block 8a) and choosing one of the following options:
  - Yes
  - No
  - N/A

**For Courses or Workshops: Select Whether Attendance was to Acquire or Maintain Professional Certification:**

- **For Clinical Rotations and Grand Rounds for Continuing Education, as well as Professional Conferences (as selected in Column 2, Block 8),** Select N/A for Column 4 (Block 8b).
- **For Academic Courses and Trainings/Workshops for Continuing Education (as selected in Column 2, Block 8),** select whether attendance by faculty was for the purposes of acquiring or maintaining a professional certification by clicking on the drop-down menu under Column 4 (Block 8b) and choosing one of the following options:
  - Yes
  - No
  - N/A

**FD-2a - Entering Duration of Training Activity**

No. Activity Name (1)	Select Type of Faculty Development Activity Offered (2) Block 8	For Courses or Workshops		Enter Duration of Training Activity in Clock Hours (5) Block 9	Select Delivery Mode Used to Offer Training Activity (6) Block 10	Select the Faculty Role(s) Addressed at Training Activity (7) Block 11
		Select Whether Activity is Accredited for Continuing Education Credit (3) Block 8a	Select Whether Attendance was to Acquire or Maintain Professional Certification (4) Block 8b			
1 Activity 1	Select one	Select one	Select one		Select one	

**Figure 41. FD-2a - Entering Duration of Training Activity**

**Enter Duration of Training Activity in Clock Hours:** Enter the duration (in clock hours) of each faculty development activity in the textbox in Column 5 (Block 9).



*Note: For activities 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 be entered as 15/60 = .25).*

## FD-2a - Selecting Delivery Mode

No. Activity Name (1)	Select Type of Faculty Development Activity Offered (2) Block 8	For Courses or Workshops		Enter Duration of Training Activity in Clock Hours (5) Block 9	Select Delivery Mode Used to Offer Training Activity (6) Block 10	Select the Faculty Role(s) Addressed at Training Activity (7) Block 11
		Select Whether Activity is Accredited for Continuing Education Credit (3) Block 8a	Select Whether Attendance was to Acquire or Maintain Professional Certification (4) Block 8b			
1 Activity 1	Select one	Select one	Select one		Select one Select one Classroom-based	

Figure 42. FD-2a - Selecting Delivery Mode

**Select Delivery Mode Used to Offer Training Activity:** Select the primary delivery mode used to offer each faculty development activity by clicking on the drop-down menu in Column 6 (Block 10) and choosing one of the following options:

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

## FD-2a - Selecting Faculty Role(s)

No. (1)	Activity Name	Select Type of Faculty Development Activity Offered (2) Block 8	For Courses or Workshops Select Whether Activity is Accredited for Continuing Education Credit (3) Block 8a	Select Whether Attendance was to Acquire or Maintain Professional Certification (4) Block 8b	Enter Duration of Training Activity in Clock Hours (5) Block 9	Select Delivery Mode Used to Offer Training Activity (6) Block 10	Select the Faculty Role(s) Addressed at Training Activity (7) Block 11
1	Activity 1	Select one	Select one	Select one		Select one	Administrator

Figure 43. FD-2a - Selecting Faculty Role(s)

**Select the Faculty Role(s) Addressed at Training Activity:** Select the faculty role(s) addressed in each faculty development activity by clicking on the drop-down menu in Column 7 (Block 11) and choosing all that apply from the following options:

- Administrator
- Clinician
- Educator
- Researcher



**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.

## FD-2b: Faculty Development - Faculty Trained By Profession/Discipline

### FD-2b - Adding Profession and Discipline for Activities



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

\* Add Activity Name and Discipline

Activity Name Select one

Select Profession and Discipline of Faculty Trained

- Dentistry - Endodontic Dentistry

Add Record

Figure 44. FD-2b - Adding Profession and Discipline for Activities

**Activity Name:** Select an activity name by clicking on the drop-down menu next to "Activity Name" and choosing one of the available options (available options will be those entered and saved in the FD-2a subform).

#### Profession and Discipline of Faculty Trained:

Select the profession(s)/discipline(s) of all faculty who participated in each faculty development activity during the current reporting period by choosing all that apply from the options below. Next, select "Add Record." Repeat this process to capture the profession/discipline of all faculty who participated in each faculty development activity during the current reporting period.

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Allergy and Immunology
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Anesthesiology
- Medicine - Emergency Medicine

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- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family 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 - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- 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 - Chiropractic
- Medicine - Dermatology
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- 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
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Radiologic technology
- 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 - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- 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 - Audiology
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Midwife (non - nurse)
- Other - Optometry
- Other - Podiatry
- Other - Registered Dietician
- Other - Speech Therapy
- Physician Assistant
- Public Health - Environmental Health

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- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Other - Unknown
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Infectious Disease Control
- Public Health - Other

- Other - Speech Pathology
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Administration
- Public Health - Injury Control & Prevention
- Public Health - Social & Behavioral Sciences

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- Public Health - Health Policy & Management
- Public Health - Nutrition

### FD-2b - Entering # Trained in the Profession and Discipline

No.	Activity Name (1)	Profession and Discipline of Faculty Trained (2) Block 12	Enter # Trained in this Profession and Discipline (3) Block 12
1	Activity 1	Dentistry - Endodontic Dentistry	<input type="text"/>

Figure 45. FD-2b - Entering # Trained in the Profession and Discipline

#### Enter # Trained in this Profession and Discipline:

Enter the number of faculty in each profession/discipline who participated in the faculty development activity during the current reporting period in the textbox in Column 3 (Block 12). Repeat this step as many times as necessary to capture the total number of faculty by profession/discipline who participated in each faculty development activity during the current reporting period.



**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 subform or click on the "Submit" button in the left hand side of the EHB to begin the submission process of your PRGCA.**

## FD-4a: Faculty Development - Faculty Instruction

### FD-4a - Adding Faculty Instructional Activities



**Warning:** The FD-4a and FD-4b subforms will only appear if "Faculty Instruction" was selected in the Faculty Development Setup form.



**Warning:** Complete the Setup for new instructional activities offered by residents, fellows, faculty, or community providers who received Dental Faculty Development financial awards.

The screenshot shows a web form titled "Add Courses/Workshops". Below the title is a label "Enter the Name of the Course or Workshop Offered by the Faculty" and a text input field containing "Course 1". Below the input field is a button labeled "Add Record".

**Figure 46. FD-4a - Adding Faculty Instructional Activities**

#### **Name of the Course or Workshop Offered by the Faculty:**

For new records, enter the name of an instructional activity offered by residents, fellows, faculty, or community providers who received Dental Faculty Development financial awards during the current reporting period in the textbox next to "Enter the Name of the Course or Workshop Offered by the Faculty". Next, click the "Add Record" button to save your entry. Repeat this process to capture all instructional activities offered by individuals who received a Dental Faculty Development financial award during the current reporting period.

For prior records, go to the next page to update their status.



**Warning:** Complete the Setup for new instructional activities offered by residents, fellows, faculty, or community providers who received Dental Faculty Development financial awards.

### FD-4a - Selecting Whether the Course was Offered in the Current Period

No. Record	Status	Name of the Course or Workshop Offered by the Faculty (1) Block 17	Select Whether the Course/Workshop was Offered in the Current Reporting Period (1a)	Select the Content Area Of the Course or Workshop (2) Block 18
1	New Record	Course 1	<input type="text" value="Select one"/> <input type="text" value="Select one"/> <input type="text" value="Yes"/>	<input type="text" value="Select one"/>

Figure 47. FD-4a - Selecting Whether the Course was Offered in the Current Period

**Select Whether the Course/Workshop was Offered in the Current Reporting Period:** Select whether each instructional activity was offered by residents, fellows, faculty, or community providers during the current reporting period by clicking on the drop-down menu under Column 1a and choosing one of the following options:

- Yes
- No



**Warning:** For new records, you must select "Yes" under Column 1a.



**Warning:** If "Yes" is selected for a prior record, then the remaining columns in the FD-4a subform must be completed. If "No" is selected for a prior record, do not complete any other columns in the FD-4 subform.

## FD-4a - Selecting Content Area

No. Record Status	Name of the Course or Workshop Offered by the Faculty (1) Block 17	Select Whether the Course/Workshop was Offered in the Current Reporting Period (1a)	Select the Content Area Of the Course or Workshop (2) Block 18	Enter the Length of the Course or Workshop in Clock Hours (3) Block 19	Enter # of Times the Course or Workshop was Offered (4) Block 20	Select the Delivery Mode Used to Offer the Course or Workshop (5) Block 22
1 New Record	Course 1	Select one	Select one			Select one

Figure 48. FD-4a - Selecting Content Area

**Select the Content Area Of the Course or Workshop:** Select the content area of each instructional activity offered by residents, fellows and faculty during the current reporting period by clicking on the drop-down menu under Column 2 (Block 18) and choosing one of the following options:

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

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- Focus groups
- Genomics
- Geriatrics
- Health care and older adults
- Health literacy
- Health Reform/Health Insurance Marketplaces
- Hepatitis
- HIV/AIDS and other infectious diseases
- Homeless
- Improving communication skills
- Informatics
- Interactive simulated case studies
- Interprofessional Education
- Leadership Training
- Long - Term Care
- Mannequin - based and patient simulators
- Medication basics
- Mental health
- Minority Health
- Needs - specific training
- Nursing leadership and management
- Obesity
- Other simulated or virtual methods
- Palliative care
- Perioperative care
- Physical activity/active lifestyles
- Primary care
- Program evaluation
- Project management
- Public health policy development
- Quality improvement and patient
- Geriatric education for direct care providers
- Gerontological nursing
- Health Disparities
- Health promotion
- Healthy aging
- Hispanics
- Home health
- Homelessness
- Infection control
- Information Technology
- Interdisciplinary training
- Interprofessional integrated models of care
- Leadership/Management
- Long - term care nursing
- Maternal and child health
- Medications/drugs
- Mental health and older adults
- Minority health issues
- Negotiations
- Nutrition
- Oral health
- Pain management
- Pastoral/Spiritual Care
- Personal care skills
- Prescription drug abuse
- Professional development
- Program management
- Public health infrastructure
- Public health science
- Rehabilitation
- Rural Health
- Sexually transmitted infections
- Geriatric medicine
- Grant writing
- Health information technology
- Health Promotion and disease prevention
- Heart disease
- HIV/AIDS
- Home health care
- Hypertension
- Influenza
- Injury prevention
- Interpersonal skills
- Interprofessional team training
- Lesbian/Gay/Bisexual/Transgender individuals
- Managed Care
- Medical economics
- Meeting facilitation
- Migrant health initiatives
- Native Hawaiian/Pacific Islander
- Nursing care for vulnerable populations
- Nutrition/healthy eating
- Other
- Palliative and end of life care
- Patient safety (medical errors)
- Pharmacology
- Prevention/Primary care
- Program design
- Program planning
- Public health law
- Quality Improvement
- Rehabilitation Therapies
- Secondary care Technology
- Skills - based training (including coalition building)

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- safety
- Research
- Sexual health
- Social marketing
- Suicide
- Teledentistry
- Tertiary care
- Transitional care
- Urban health
- Veterans Health
- Women's health
- Workforce development

- Stroke
- Survey design
- Telehealth
- Tobacco cessation
- Trauma
- Urgent care
- Violence
- Women's health issues
- Wound care

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- Substance Abuse
- Sustainability
- Telemedicine/telehealth
- Training
- Tuberculosis
- Veteran Related
- Virtual simulation
- Worker and patient safety

### FD-4a - Entering Course/Workshop Length

No. Record Status	Name of the Course or Workshop Offered by the Faculty (1) Block 17	Select Whether the Course/Workshop was Offered in the Current Reporting Period (1a)	Select the Content Area Of the Course or Workshop (2) Block 18	Enter the Length of the Course or Workshop in Clock Hours (3) Block 19	Enter # of Times the Course or Workshop was Offered (4) Block 20	Select the Delivery Mode Used to Offer the Course or Workshop (5) Block 22
1 New Record	Course 1	Select one	Select one	<input style="border: 2px solid red;" type="text"/>	<input type="text"/>	Select one

Figure 49. FD-4a - Entering Course/Workshop Length

**Enter the Length of the Course or Workshop in Clock Hours:** Enter the duration (in clock hours) of each instructional activity offered by residents, fellows and faculty during the current reporting period in the textbox under Column 3 (Block 19).



*Note: For courses 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 be entered as  $15/60 = .25$ ).*

### FD-4a - Entering # of Times the Course or Workshop was Offered

No. Record Status	Name of the Course or Workshop Offered by the Faculty (1) Block 17	Select Whether the Course/Workshop was Offered in the Current Reporting Period (1a)	Select the Content Area Of the Course or Workshop (2) Block 18	Enter the Length of the Course or Workshop in Clock Hours (3) Block 19	Enter # of Times the Course or Workshop was Offered (4) Block 20	Select the Delivery Mode Used to Offer the Course or Workshop (5) Block 22
1 New Record	Course 1	Select one	Select one			Select one

Figure 50. FD-4a - Entering # of Times the Course or Workshop was Offered

**Enter # of Times the Course or Workshop was Offered:** Enter the number of times each instructional activity was offered by residents, fellows and faculty during the current reporting period in the textbox under Column 4 (Block 20).

## FD-4a - Selecting Delivery Mode

Enter the Length of the Course or Workshop in Clock Hours (3) Block 19	Enter # of Times the Course or Workshop was Offered (4) Block 20	Select the Delivery Mode Used to Offer the Course or Workshop (5) Block 22
<input type="text"/>	<input type="text"/>	<div style="border: 2px solid red; padding: 2px;"><input type="text" value="Select one"/></div> <div style="border: 1px solid gray; padding: 2px;"><input type="text" value="Select one"/></div> <div style="border: 1px solid gray; padding: 2px;"><input type="text" value="Classroom-based"/></div>

**Figure 51. FD-4a - Selecting Delivery Mode**

**Select the Delivery Mode Used to Offer the Course or Workshop:** Select the delivery mode used by residents, fellows and faculty to offer each instructional activity offered during the current reporting period by clicking on the drop-down menu under Column 5 (Block 22) and choosing one of the following options:

- Archived/Self-paced distance learning
- Clinical Rotation
- Hybrid
- Real-time/Live distance learning
- Classroom-based
- Grand Rounds
- Other

## FD-4b: Faculty Development - Faculty Trained by Profession/Discipline

### FD-4b - Adding Profession and Discipline for Faculty Instructional Activities



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

**Figure 52. FD-4b - Adding Profession and Discipline for Faculty Instructional Activities**

**Name of the Course or Workshop Offered by the Faculty:** Select the name of the course or workshop offered by faculty by clicking on the drop-down menu and choosing one of the available options.

**Profession and Discipline of Individuals Trained:** Select profession(s)/discipline(s) of all individuals trained in each instructional activity offered during the current reporting period by choosing all that apply from the available options. Next, click on the "Add Record" button to save your entry. Repeat this process as necessary to identify the profession/discipline of all individuals trained in each instructional activity offered during the current reporting period.

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

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- Medicine - Colon and Rectal Surgery
- Medicine - Family 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 - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- 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 - Audiology
- Other - Direct Service Worker

- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - Midwife
- 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 - Chiropractic
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Optometry
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Other - Veterinary Medicine

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- 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 - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - Home Health Aide
- 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
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife (non - nurse)
- Other - Pharmacy
- Other - Radiologic technology
- Other - Speech Pathology
- Other - Occupational Therapy
- Physician Assistant
- Public Health - Environmental Health

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- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Office/Support Staff
- Other - Podiatry
- Other - Registered Dietician
- Other - Unknown
- Other – Physical Therapy
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention
- Public Health - Social & Behavioral Sciences
- Student - CNS - Family
- Student - CNS - Pediatrics
- Student - Dental Assistant
- Student - Diploma/Certificate
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Law School
- Student - Midwife
- Student - NP - Adult gerontology
- Student - NP - Geropsychiatric
- Student - NP - Pediatrics
- Student - Nurse Midwife
- Student - Registered nurse (RN)
- Other – Speech Therapy
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Management
- Public Health - Nutrition
- Student - Alternative/Complementary Nursing
- Student - CNS - Geropsychiatric
- Student - CNS - Psychiatric/Mental health
- Student - Dental Hygiene
- Student - Graduate - Nursing Doctorate
- Student - Graduate - Other Behavioral Health
- Student - Graduate - Social Work
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - NP - Acute care adult gerontology
- Student - NP - Emergency care
- Student - NP - Neonatal
- Student - NP - Psychiatric/Mental health
- Student - Physician Assistant
- Student - Undergraduate - Other

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- Public Health - Infectious Disease Control
- Public Health - Other
- Student - CNS - Adult gerontology
- Student - CNS - Neonatal
- Student - CNS - Women's health
- Student - Dental School
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Home Health Aide
- Student - Medical School
- Student - NP - Acute care pediatric
- Student - NP - Family
- Student - NP - Other advanced nurse specialists
- Student - NP - Women's health
- Student - Post - high school / Pre - college
- Student - Undergraduate - Public Health

### FD-4b - Entering # Trained in the Profession and Discipline

No. (1) Block 17	Name of the Course or Workshop Offered by the Faculty (1) Block 17	Profession and Discipline of Individuals Trained (2) Block 21	Enter # Trained in this Profession and Discipline (3) Block 21
1	Course 1	Student - Diploma/Certificate	<input type="text"/>

Figure 53. FD-4b - Entering # Trained in the Profession and Discipline

**Enter # Trained in this Profession and Discipline:** Enter the number of individuals trained in each profession/discipline in Column 3 (Block 21).



**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 subform or click on the "Submit" button in the left hand side of the EHB to begin the submission process of your PRGCA.

## FD-5: Faculty Development - Faculty Recruitment

### FD-5 - Adding Faculty Recruitment Activities



**Warning:** The FD-5 subform will only appear if "Faculty Recruitment Activities" was selected in the Faculty Development Setup form.



**Warning:** Completing this subform requires three (3) steps. Please read instructions carefully.

* Faculty Recruitment Details	
Enter # of Faculty Recruited through the Program (Block 23a)	← 1
Enter # of URM Faculty Recruited through the Program (Block 23b)	← 2
Enter # of Faculty Positions Retained (Block 23c)	← 3

**Figure 54. FD-5 - Adding Faculty Recruitment Activities**

**Enter # of Faculty Recruited through the Program :** Enter the total number of faculty recruited during the current reporting period through your faculty recruitment program sponsored by the grant in Block 23a.

**Enter # of URM Faculty Recruited through the Program :** Of the number reported in Block 23a, enter the number of underrepresented minority faculty recruited during the reporting period in Block 23b (this number is a subset of Block 23a).

**Enter # of Faculty Positions Retained :** Enter the number of faculty positions recruited and retained since the beginning of your program sponsored by the grant.



**Warning: If there is no data for a specific Block, enter "0".**



**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, click on the "Submit" button in the left hand side of the EHB to begin the submission process of your PRGCA. Follow the instructions to submit your PRGCA on the following pages. You have not submitted your report until you receive a tracking number.**

## Printing Your Performance Report

The screenshot shows the Performance Report interface for the reporting period of 7/1/2014 - 12/31/2014. The left sidebar contains a navigation menu with sections: Overview, Status, Basic Information, Setup Data (with a checkmark for Training Program), Performance Data (with checkmarks for PC-1, IND-GEN, INDGEN-GPC, INDGEN-PY, EXP-1, EXP-2, and EXP-3), Comments, Manage Comments, Review and Submit (with 'Review' highlighted), and Validation Summary. The main content area shows a 'Resources' section with a 'View' button and links for Last NoA, Current Performance Report, Prior Performance Report, Program Manual, Glossary, and FAQs. Below this is a 'Print All Forms' button (highlighted with a red box) and a 'Table of Contents' link. A pagination bar shows 'Page size: 15' and a 'Go' button. A table lists the report sections:

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 55. 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', 'Overview', 'Setup Data', 'Performance Data', 'Comments', and 'Review and Submit'. The 'Submit' link is highlighted in the 'Review and Submit' section. The main content area shows a 'Submit Report' header with a reporting period of 7/1/2014 - 12/31/2014 and a 'Due In: 100 Days' indicator. Below this is 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 located at the bottom right of the page.

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 56. 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 57. 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 58. 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.