

ACADEMIC YEAR 2014-2015



**Instruction Manual for Grantees of the  
Faculty Development: Integrated Technology into  
Nursing Education and Practice**

**Semi Annual Performance Report 2**

## 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 **ITNEP** grant program:
  - o **To provide support to nursing collaboratives for faculty development in the use of information and other technologies in order to expand the capacity of collegiate schools of nursing to educate students for 21st century health care practice.**
2. Data submitted by grantees of the program must cover all activities that took place between **January 01, 2015 - June 30, 2015** (referred to as **Semi Annual Performance Report 2**)
3. **The PRGCA is due no later than July 31, 2015.** 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 / 877-464-4722 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 semiannual collection of performance measures across all grants and cooperative agreements funded through the Health Resources and Services Administration's Bureau of Health Workforces (BHW) (OMB # **0915-0061**; Expiration Date: **05/31/2016**). 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 semiannual 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 with a link labeled "View Prior Period Data" at the top left, enclosed in a red rectangular box. Below this link is a message: "Fields with \* are required". Underneath is a blue header bar with the text "Add Training Program" and a red asterisk. Below the header bar is a label "Select Type of Training Program Offered" followed by a dropdown menu currently showing "Select One". A small instruction in parentheses below the label reads: "(Click the 'Load Program Details' button after selecting your training program)".

**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	Setup Form	Setup Forms	Faculty Development
2	Performance Data Form	Individual Characteristics-INDGEN Subforms	IND-GEN
3	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-1a
4	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-1b
5	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-2a
6	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-2b
7	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-4a
8	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-4b

## Faculty Development – Setup

### Selecting Faculty Development Activities

[View Prior Period Data](#)

Faculty Development Activities	Select
Structured Faculty Development Training Program	<input type="checkbox"/>
Faculty Development Activity	<input checked="" type="checkbox"/>
Faculty Instruction	<input type="checkbox"/>
No faculty-related activities conducted	<input type="checkbox"/>

**Figure 3. Selecting Faculty Development Activities**

The Faculty Development Setup form will configure all subforms specific to faculty development activities. To complete the Faculty Development Setup form, select the type(s) of faculty development activities coordinated or supported through the grant during the semiannual reporting period by choosing **all that apply** under Block 1.



**Warning:** The option for "Structured Faculty Development Program" will be automatically selected if you have previously reported one or more training programs on the FD-1a subform. If this option is selected, then no other actions are needed in this subform; however, you must provide an update on the status of each structured faculty development program on the FD-1a subform. If Faculty development activity were previously selected, it will be checked, however if not activity in this reporting period it can be unchecked and FD-2 subforms will not be activated. In addition, if instructional activities were reported previously, then the option for "Faculty Instruction" will be automatically selected. If this option is selected, then no other actions are needed in this subform; however, you must provide an update on the status of each instructional activity previously reported on the FD-4a subform.



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



*Reference:* Refer to the glossary for a definition of each type of faculty development activity.



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

## Individual-level Data—INDGEN Subforms

### INDGEN - Introduction



Warning: The INDGEN subforms have been enhanced from the most recent reporting period to reduce overall burden. Please read these instructions carefully.

1. You must complete an IND-GEN subform for each faculty who received a BHW-funded financial award during the semiannual reporting period.
2. In addition, semiannual updates are required for faculty who were previously reported on IND-GEN and were not marked as having completed or attrited from the ITNEP program.
3. For prior records, the BPMH system will prepopulate certain blocks in the IND-GEN subform with data submitted in previous reporting periods for each faculty member. These fields will appear shaded in gray and will not be editable.
4. **Please note that all other fields must be updated on a semiannual basis until each faculty completes or permanently leaves the ITNEP program.**
5. The IND-GEN subform will automatically calculate and display read-only columns labeled “Academic Year Total” and "Cumulative BHW Financial Award Total."
  - The Academic Year Total will sum the amounts entered for both reporting period across a given academic year.
  - The Cumulative BHW Financial Award Total will sum all amounts entered for this individual in the BMPH system since the beginning of AY 2012-2013.

Reporting Period when Individual Completed/Graduated from the Training Program	Reporting Period When Record will be Transferred to INDGEN-GPC <i>(No action needed)</i>	Reporting Period When Record will be Transferred to INDGEN-PY <i>(For updating 1-year employment status)</i>
Academic Year A, Reporting Period #1	Academic Year A, Reporting Period #2	Academic Year B, Reporting Period #1
Academic Year A, Reporting Period #2	Academic Year B, Reporting Period #1	Academic Year B, Reporting Period #2

**Figure 4. Example of records transferred between IND-GEN**

## IND-GEN: Individual Characteristics

### IND-GEN - Setup

To provide individual-level data about faculty who received BHW-funded financial awards during the semiannual reporting period or to provide updates about faculty previously reported on IND-GEN, 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 5. 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
1					

Figure 6. IND-GEN - Entering Trainee Unique ID

**Trainee Unique ID:** To begin completing the INDGEN form, enter a seven (7) alphanumeric unique identifier for each faculty in the textbox under 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 semiannual updates and 1-year follow-up data for each individual.



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

**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
1			<input type="text" value="Select one"/>		
2			Faculty		
3					

**Figure 7. IND-GEN - Selecting Individual's Training or Awardee Category**

**Select Individual's Training or Awardee Category:** Select each faculty’s training category by clicking on the drop-down menu under Block 2 and choosing one of the following options:

- Faculty



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

**IND-GEN - Selecting Individual's Enrollment/Employment 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
		▼	
		Select one	
		Full-time	
		Part-time	
		Both Full-time and Part-time	
		On leave of absence	

**Figure 8. IND-GEN - Selecting Individual's Enrollment/Employment Status**

**Select Individual's Enrollment / Employment Status:** Select each faculty's employment status in the program by clicking on the drop-down menu under 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

Individual's Enrollment / Employment Status	Select Individual's Sex	Select Individual's Age Group	Select Individual's Ethnicity
(4) Block 3	(5) Block 4	(6) Block 5	(7) Block 6
	Select one <input type="button" value="v"/>		
	Select one		
	Male		
	Female		
	Not Reported		

Figure 9. IND-GEN - Selecting Individual's Sex

**Select Individual's Sex:** Select each faculty's biological sex by clicking on the drop-down menu under Block 4 and choosing one of the following options:

- Female
- Male
- Not Reported



*Note: This Block will prepopulate for prior records with data submitted in previous reporting periods. If "Not Reported" was selected for a record during a previous reporting period, you must provide the appropriate updated information in order to successfully submit your PRGCA.*

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

Select Individual's Sex	Select Individual's Age	Select Individual's Ethnicity	Select Individual's Race
(5) Block 4	(6) Block 5	(7) Block 6	(8) Block 7
	<div style="border: 1px solid gray; padding: 5px;">                     Select one                      12                      13                      14                      15                      16                      17                      18                      19                      20                      21                      22                      23                      24                      25                      26                      27                      28                      29                      30                 </div>		

**Figure 10. IND-GEN - Selecting Individual's Age**

**Select Individual's Age:** Enter each faculty's age at the end of the semiannual reporting period in the textbox under Block 5.

- 12
- 13
- 14
- 15
- 16
- 17
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- 58
- 61
- 64
- 67
- 70
- 73
- Not Reported
- 47
- 50
- 53
- 56
- 59
- 62
- 65
- 68
- 71
- 74



*Note: In previous reporting periods, age was measured using a set of ranges. Moving forward, you will be required to enter each individual's age at the end of each semiannual reporting period.*

## IND-GEN - Selecting Individual's Ethnicity

Select Individual's Ethnicity	Select Individual's Race
(7) Block 6	(8) Block 7
<input type="text" value="Select one"/> Hispanic/Latino Non-Hispanic/Non-Latino	

Figure 11. IND-GEN - Selecting Individual's Ethnicity

**Select Individual's Ethnicity:** Select each faculty's ethnicity by clicking on the drop-down menu under Block 6 and choosing one of the following options:

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



*Note: This Block will prepopulate for prior records with data submitted in previous reporting periods. If "Not Reported" was selected for a record during a previous reporting period, you must provide the appropriate updated information in order to successfully submit your PRGCA.*

### 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 Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African-American <input type="checkbox"/> Native Hawaiian or Other Pacific <input type="checkbox"/> White <input type="checkbox"/> Not Reported	

**Figure 12. IND-GEN - Selecting Individual's Race**

**Select Individual's Race:** Select each faculty's race by clicking on the drop-down menu under Block 7 and choosing all that apply from the following options:

- 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.



*Note: This Block will prepopulate for prior records with data submitted in previous reporting periods. If "Not Reported" was selected for a record during a previous reporting period, you must provide the appropriate updated information in order to successfully submit your PRGCA.*

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

Trainee Unique ID	Select Individual's Race	Select Whether Individual is from a Rural Residential Background	Select Whether Individual is from a Disadvantaged Background
(2) Block 1	(8) Block 7	(9) Block 8	(10) Block 9
		▼	
		Select one	
		Yes	
		No	
		Not Reported	

**Figure 13. IND-GEN - Selecting if Individual is from a Rural Residential Background**

**Select Whether Individual is from a Rural Residential Background:** For all records (new and prior), select whether each faculty member is from a rural residential background by clicking on the drop-down menu under Column 9 (Block 8) and choosing **one** of the following options:

- Yes
- No
- Not Reported



*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 Rural Residential Background	Select Whether Individual is from a Disadvantaged Background	Select Individual's Veteran Status
(2) Block 1	(9) Block 8	(10) Block 9	(11) Block 10
		<div style="border: 1px solid black; padding: 2px;">                     Select one                      Yes                      No                      Not Reported                 </div>	

**Figure 14. IND-GEN - Selecting if Individual is from a Disadvantaged Background**

**Select Whether Individual is from a Disadvantaged Background:** Select whether each faculty is from a disadvantaged background by clicking on the drop-down menu under Block 9 and choosing one of the following options:

- Yes
- No
- Not Reported



*Note: This Block will prepopulate for prior records with data submitted in previous reporting periods. If "Not Reported" was selected for a record during a previous reporting period, you must provide the appropriate updated information in order to successfully submit your PRGCA.*



*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	Select Whether Individual Received BHP Financial Award?
(2) Block 1	(10) Block 9	(11) Block 10	(12) Block 11
		<div style="border: 1px solid black; padding: 2px;">           Select one            Active Duty Military            Reservist            Veteran - Prior Service            Veteran - Retired            Individual is not a Veteran            Not Reported         </div>	

**Figure 15. IND-GEN - Selecting Individual's Veteran Status**

**Select Individual's Veteran Status:** Select each faculty's veteran status by clicking on the drop-down menu under 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



*Note: This Block will prepopulate for prior records with data submitted in previous reporting periods. If "Not Reported" was selected for a record during a previous reporting period, you must provide the appropriate updated information in order to successfully submit your PRGCA.*



*Reference: Refer to the glossary for a definition of the various types of veteran statuses.*

## 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 (2) Block 1	Select Whether Individual Received BHW Financial Award? (12) Block 11	Enter Individual's Financial Award Amount (BHW funds only)			
		Stipend (13) Block 11	Current Reporting Period Total (21a) Block 11	Academic Year Total (21b) Block 11	Cumulative BHW Financial Award Total (21c) Block 11
	▼		0	0	0
	Select one		0	0	0
	Yes		0	0	0
	No		0	0	0

**Figure 16. 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 during the semiannual reporting period by clicking on the drop-down menu under Block 11 and choosing one of the following options:

- Yes
- No

**Enter Individual's Financial Award Amount (BHW funds only): Stipend:** If a faculty received a BHW-funded financial award, enter the total amount of BHW dollars provided during the semiannual reporting period in the textbox under the column labeled "Stipend". The total amount reported should account for all BHW dollars including those applied to tuition, fees, and reasonable living expenses, as allowed by federal statutes and regulations.

**If a faculty did not receive a BHW-funded financial award,** enter "0" in the textbox under the column labeled "Stipend".

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

Type of Training Program	Trainee Unique ID	Select Whether Individual Left the Program Before Completion	Select Whether Individual Graduated/Completed the Program
(1)	(2) Block 1	(36) Block 21	(37) Block 22
		<input type="text" value="Select one"/>	
		Yes	
		No	

**Figure 17. IND-GEN - Selecting Whether Individual Left the Program Before Completion**

**Select Whether Individual Left the Program Before Completion:** Select whether each faculty permanently left the ITNEP program before completion during the semiannual reporting period by clicking on the drop-down menu under 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	Option(s)
(36) Block 21	(37) Block 22	
	<input type="text"/>	
	Select one	
	Yes	
	No	

**Figure 18. IND-GEN - Entering Graduation/Completion Information**

**Select Whether Individual Graduated/Completed the Program:** Select whether each faculty completed the ITNEP program during the semiannual reporting period by clicking on the drop-down menu under Block 22 and choosing **one** of the following options:

- Yes
- No



**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

**Notice to Grantees about Forms Pertaining to Faculty Development Fellow-Faculty Development forms are designed to capture training and development information about Fellows, Faculty, and Community Providers supported by the Physician Faculty Development Grant.**

The FD-1a and FD-1b subforms have been enhanced to prepopulate specific information about the names and characteristics of structured faculty development programs that have offered in previous reporting periods. **Please read the following instructions carefully to ensure the FD-1a and FD-1b subforms are completed accurately.**

**For structured faculty development programs reported previously:**

- The BPMH system will prepopulate the certain Blocks in the FD-1a subform.

**For instructional activities reported previously:**

- The BPMH system will prepopulate certain blocks in the FD-4a subform.
- You must select whether an instructional activity reported previously was offered during the semiannual reporting period.
- **If an instructional activity reported previously was also offered during the semiannual reporting period**, all other Blocks in the FD-4a subform must be completed.
- **If an instructional activity reported previously was not offered during the semiannual reporting period**, complete only Block 1a in the FD-4a subform.



**Warning: Complete the FD-1a Setup form only if grant funds were used to support structured faculty development programs other than those previously reported and still ongoing. To provide updates for these programs, go to FD-1a Step 2. Once a program has been completed, it will need to be re-entered as a new record if the program is run again with a new cohort.**

## 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.

Fields with \* are required

\* Add Structured Faculty Development Program

Program Name

Add Record

Figure 19. FD-1a - Adding Structured Faculty Development Programs

**Program Name:** To begin completing the FD-1a subform for new records, enter the name of each structured faculty development program coordinated and/or supported through the grant during the semiannual reporting period.

Next, click the "Add Record" button to save your entry. **Repeat this process to enter each fellow/faculty development program that was coordinated and/or supported through the grant during the semiannual reporting period.**



**Warning:** Complete the FD-1a Setup form only if grant funds were used to support structured faculty development programs other than those previously reported. You do not need to reenter information about structured faculty development programs previously reported. To provide updates for these programs, skip to the next step.



*Note: If an entry needs to be deleted for any reason, simply click on "Delete" under the column labeled "Options".*

*Example: The John Doe School of Nursing 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 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 Select Type of Degree Offered (3) Block 2a
1	New Record FD form	<div style="border: 1px solid gray; padding: 2px;">                     Select one                      Select one                      Ongoing                      Complete                 </div>	Select one	Select one
<b>Comments</b>				

Figure 20. FD-1a - Selecting Program Status

**Select Program Status in the Current Reporting Period:** For all records, select the status of each structured faculty development program at the end of the semiannual reporting period by clicking on the drop-down menu under Block 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 semiannual reporting period other than those previously reported, skip to the Final Steps for this subform.



Note:

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

## 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.

Select Program Status in the Current Reporting Period (1a)	Select Whether this was a Degree Bearing Program (2) Block 2	For Degree-bearing Programs	
		Select Type of Degree Offered (3) Block 2a	Select Primary Focus Area (4) Block 2b
Select one	Select one Select one Yes No	Select one	Select one

**Figure 21. FD-1a - Entering Program Information for Degree/Non-Degree Programs**

**Select Whether this was a Degree Bearing Program:** To complete Block 2 for new records, select whether each fellow or faculty development training program that was supported through the grant during the 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: If "Yes" was selected for Block 2:**

- Select the type of degree that participants will earn when completing each program by clicking on the drop-down menu under Block 2a and choosing one of the below listed options.

**If "No" was selected in Block 2:**

- Select "N/A" in Block 2a.

- BS
- Diploma
- DNSc
- Master's Degree Not Otherwise Specified
- MS
- MSN/MHA
- PhD

- BSN
- DNAP
- Doctoral Degree Not Otherwise Specified
- MBA
- MSN
- MSN/MPH
- Post-Masters Certificate

- Certificate
- DNP
- EdD
- MPH
- MSN/MBA
- No Degree Earned
- N/A

**For Degree-bearing Programs: Select Primary Focus Area: If "Yes" was selected for Block 2:**

**If a fellow or faculty development program will culminate in awarding participants with an academic degree in dentistry, education, or public health, select the degree's focus area by clicking on the drop-down menu under Block 2b and choosing **one** of the below listed options.**

**If "No" was selected in Block 2:**

Select "N/A" in Block 2b.

- Nursing - Clinical Research
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - NP - Women's health
- Nursing - Nurse Educator
- Nursing - Nursing Assistant
- Other - Midwife
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - Leadership
- Nursing - NP - Adult
- Nursing - NP - Child/Adolescent Psychiatric/Mental Health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Other advanced nurse specialty
- Nursing - Nurse Administrator
- Nursing - Nurse Midwife
- Nursing - Nursing Informatics
- Other Focus Area
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - Education
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Pediatrics
- Nursing - Nurse Anesthetist
- Nursing - Nurse Researchers/Scientists
- Nursing - Public Health Nurse
- N/A

**For Non-Degree Bearing Program, Enter Length of Training Program in Clock Hours: If "Yes" was selected for Block 2:**

- Enter "0" in Block 3.  
**If "No" was selected in Block 2:**
- Enter the length of each program in clock hours in the textbox under Block 3.



*Note: These Blocks will be prepopulated for prior records based on data submitted in previous reporting periods.*

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

For Non-Degree Bearing Program, Enter Length of Training Program in Clock Hours (5) Block 3	Enter the % of Time Spent Developing Competencies for the Following Roles				Enter # of Faculty Who Completed the Program (10) Block 6
	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"/>	<input type="text"/>	<input type="text"/>

**Figure 22. 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 fellow/faculty development program developing competencies associated with Clinician (Column #6) role.

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

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

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



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



*Note: These Blocks will prepopulate for prior records with data submitted in previous reporting periods.*

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

Enter the % of Time Spent Developing Competencies for the Following Roles				Enter # of Faculty Who Completed the Program (10) Block 6	Select whether any Faculty Received any type of BHPF-funded Financial Award during the Training Program (11) Block 7
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"/>	<input style="border: 2px solid red;" type="text"/>	Select one

**Figure 23. FD-1a - Entering # of Faculty Who Completed the Program**

**Enter # of Faculty Who Completed the Program:** For structured training programs marked as "Complete" in Block 1a, enter the number of faculty, fellows, and community providers who completed each program during the semiannual reporting period in the textbox under Block 6.



*Note: If a structured faculty development program was marked as "Ongoing" in Block 1a, enter "0" in the textbox under 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 24. 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:** To complete the FD-1a subform **for new records**, select whether any fellow, faculty or community provider who participated in a training program received any type of BHW-funded financial award by clicking on the drop-down menu under Block 7 and choosing from the following options:

- Yes
- No



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



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



**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 - Adding Profession and Discipline for Structured Programs



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

**Figure 25. FD-1b - Adding Profession and Discipline for Structured Programs**

**Program Name:** To add information about the profession and discipline of fellows, faculty and community providers who participated in each program during the semiannual reporting period, select a program name by clicking on the drop-down menu next to "Program Name" and choosing **one** of the available options.

**Profession and Discipline of Faculty Trained:** Next, select the profession(s) and discipline(s) of all fellows, faculty, and community providers who participated in each faculty development program during the semiannual reporting period by choosing **all that apply** from the below listed options. Click on the "Add Record" button to save your entry. **Repeat this process to capture the profession and discipline of all fellows, faculty members and community providers who participated in each faculty development program during the semiannual reporting period.**

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

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- Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Allergy and Immunology
- Medicine - Dermatology
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Pediatrics
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - NP - Acute care adult gerontology
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - Alternative/Complementary Nursing
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - Nurse administrator
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery
- Medicine - Preventive Medicine/Aerospace Medicine
- Medicine - Preventive Medicine/Occupational Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - 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

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- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Other
- Nursing - Registered Nurse
- Other - Chiropractor
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Midwife
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Unknown
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention
- Nursing - Nurse informaticist
- Nursing - Other (e.g., CNA, PCA)
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife (non - nurse)
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Respiratory Therapy
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Management
- Public Health - Other
- Nursing - Nurse midwife
- Nursing - Public health nurse
- Other - Allied Health
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Nutritionist
- Other - Optometry
- Other - Podiatry
- Other - Speech Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Infectious Disease Control
- Public Health - Social & Behavioral Sciences



*Note: Information regarding the names of faculty development programs will prepopulate with the information that was entered and saved in the FD-1a subform.*

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

Profession and Discipline of Faculty Trained (2) Block 4	Enter # Trained in this Profession and Discipline (3) Block 4
Behavioral Health - Clinical Social Work	<input type="text"/>

Figure 26. FD-1b - Entering # Trained in the Profession and Discipline

**Enter # Trained in this Profession and Discipline:** To complete the FD-1b subform, please click on the drop-down menu under Block 4 and choose a profession and discipline.

Next, enter the number of fellows, faculty, or community providers in that profession and discipline who participated in each structured faculty development program during the semiannual reporting period in the textbox beside the drop-down menu. **Repeat this step as many times as necessary to capture the profession and discipline of all fellows, faculty and community providers who participated in each 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-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.

Fields with \* are required

\* Add Faculty Development Activities

Activity Name

Add Record

**Figure 27. FD-2a - Entering Faculty Development Activities**

#### Activity Name:

- To begin completing the FD-2a subform, enter the name of each fellow/faculty development activity coordinated and/or supported through the grant during the semiannual reporting period.
- Click on the "Add Record" button to save your entry. **Repeat this process to enter each fellow/faculty development activity coordinated and/or supported through the grant during the semiannual reporting period.**

*Example: The John Doe School of Nursing 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	FD-2a form	Select one	Select one	Select one

**Comments**

Go to Previous Page

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

**Figure 28. FD-2a - Selecting Type of Faculty Development Activity Offered**

**Select Type of Faculty Development Activity Offered:** To begin completing the FD-2a subform, select the type of faculty development activity supported and/or coordinated through the grant during the reporting period by clicking on the drop-down menu under 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: If "Academic Course for Continuing Education" or "Training/Workshop for Continuing Education" was selected under Block 8,** select whether these are accredited for continuing education credit by clicking on the drop-down menu under 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: If "Academic Course for Continuing Education" or "Training/Workshop for Continuing Education" was selected under 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 Block 8b and choosing one of the following options:

- Yes
- No
- N/A



*Note: If any other option was selected under Block 8, select "N/A" under Block 8a.*



*Note: If any other option was selected under Block 8, select "N/A" under Block 8b.*

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

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 Whether Activity is Accredited for Continuing Education Credit (3) Block 8a	Select Whether Attendance was to Acquire or Maintain Professional Certification (4) Block 8b		
Select one ▼	Select one ▼	<input type="text"/>	Select one ▼

Figure 29. 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 in the textbox under 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. Example: a 15-minute course would entered as  $15/60 = .25$ .*

## FD-2a - Selecting Delivery Mode

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	Option(s)
<input type="text"/>	<input type="text" value="Select one"/>	<input type="text" value=""/>	Delete
	<ul style="list-style-type: none"><li>Select one</li><li>Classroom-based</li><li>Distance learning (Online, Webinar)</li><li>Hybrid</li><li>Clinical Rotation</li></ul>		
		<input type="button" value="Save"/>	<input type="button" value="Save and Validate"/>

Figure 30. FD-2a - Selecting Delivery Mode

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

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

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

Select Delivery Mode Used to Offer Training Activity (6) Block 10	Select the Faculty Role(s) Addressed at Training Activity (7) Block 11	Option(s)
<input type="text" value="Select one"/>	<input type="checkbox"/> Administrator <input type="checkbox"/> Clinician <input type="checkbox"/> Educator <input type="checkbox"/> Researcher	<input type="text" value="Delete"/>
<input type="button" value="Save"/>		<input type="button" value="Save and Validate"/>

Figure 31. FD-2a - Selecting Faculty Role(s)

**Select the Faculty Role(s) Addressed at Training Activity:** To complete the FD-2a subform, select the fellow/faculty role(s) addressed in each activity by clicking on the drop-down menu under 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.

Fields with \* are required

\* Add Activity Name and Discipline

Activity Name

Figure 32. FD-2b - Adding Profession and Discipline for Activities

**Activity Name:** To add information about the profession(s) and discipline(s) of faculty who participated in each activity during the semiannual reporting period, select an activity by clicking on the drop-down menu next to "Activity Name" and choosing **one** of the available options:

**Profession and Discipline of Faculty Trained:** Select the profession(s) and discipline(s) of all faculty who participated in each activity by choosing **all that apply** from the below listed options.

Click on the "Add Record" button to save your entry. **Repeat this process to capture the professions and disciplines of all fellows, faculty members and community providers who participated in each faculty development activity during the semiannual reporting period.**

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

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- Immunology
- Medicine - Dermatology
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Pediatrics
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - 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 - Registered Nurse
- Other - Chiropractor
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - Alternative/Complementary Nursing
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - 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 - Other (e.g., CNA, PCA)
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife (non - nurse)
- Other - Office/Support Staff
- 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/Aerospace Medicine
- Medicine - Preventive Medicine/Occupational Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - 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 - Public health nurse
- Other - Allied Health
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Nutritionist
- Other - Optometry

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- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Midwife
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Unknown
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention

- Other - Physical Therapy
- Other - Respiratory Therapy
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Management
- Public Health - Other

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- Other - Podiatry
- Other - Speech Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Infectious Disease Control
- Public Health - Social & Behavioral Sciences

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

★ Add Activity Name and Discipline

Activity Name

Select Profession and Discipline of Faculty Trained

No.	Activity Name (1)	Profession and Discipline (2)	Enter #
		Block 12	

Comments

No records to display.

Figure 33. FD-2b - Entering # Trained in the Profession and Discipline

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

- To complete the FD-2b subform, click on the drop-down menu under Block 12 and choose a profession and discipline.
- Next, enter the number of faculty and/or community providers in that profession and discipline who participated in each activity during the semiannual reporting period in the textbox beside the drop-down menu. **Repeat this step as many times as necessary to capture the number of fellows, faculty members and community providers who participated in each activity during the semiannual 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:** Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Fields with \* are required

\* Add Courses/Workshops

Enter the Name of the Course or Workshop Offered by the Faculty

Add Record

Figure 34. 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 faculty during the semiannual reporting period in the textbox next to "Enter the Name of the Course or Workshop Offered by the Faculty".
- Next, click on the "Add Record" button to save your entry. **Repeat this process to capture all instructional activities offered by fellows, faculty, or community providers who received a BHW-funded financial award during the semiannual reporting period.**



**Warning:** Only complete the Setup for new instructional activities offered by faculty. The FD-4a subform will prepopulate the name of instructional activities previously reported. If no new instructional activities were offered other than those previously reported, skip to the next page.

### 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	FD-4a form	<input type="text" value="Select one"/> Select one Yes No	<input type="text" value="Select one"/>
<b>Comments</b>				

Figure 35. 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 faculty during the semiannual reporting period by clicking on the drop-down menu under Block 1a and choosing **one** of the following options:

- Yes
- No



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



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

### FD-4a - Selecting Content Area

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
Yes	Select one	2	2

Figure 36. FD-4a - Selecting Content Area

**Select the Content Area Of the Course or Workshop:** Select the content area of each instructional activity offered by faculty during the semiannual reporting period by clicking on the drop-down menu under 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
- 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
- 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

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- Epidemiology
- Evidence - Based Practices
- Experiences
- 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
- Evidence Based Medicine
- Extended care
- Food borne Disease
- 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
- Financial planning and management (including budgeting)
- Genetics
- 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

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- Project management
- Public health policy development
- Quality improvement and patient safety
- Research
- Sexual health
- Social marketing
- Suicide
- Teledentistry
- Tertiary care
- Transitional care
- Urban health
- Veterans Health
- Women's health
- Workforce development

- Rehabilitation
- Rural Health
- Sexually transmitted infections
- Stroke
- Survey design
- Telehealth
- Tobacco cessation
- Trauma
- Urgent care
- Violence
- Women's health issues
- Wound care

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- Secondary care Technology
- Skills - based training (including coalition building)
- Substance Abuse
- Sustainability
- Telemedicine/telehealth
- Training
- Tuberculosis
- Veteran Related
- Virtual simulation
- Worker and patient safety



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

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

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
Select one ▾	<input type="text"/>	<input type="text"/>	Select one ▾

Figure 37. 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 fellows and faculty during the semiannual reporting period in the textbox under 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 entered as  $15/60 = .25$ ).*



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

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

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
Select one ▾	<input type="text"/>	<input type="text"/>	Select one ▾

Figure 38. 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 faculty during the semiannual reporting period in the textbox under Block 20.



*Note: For instructional activities offered via distance learning, enter 999.*

## 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	Option(s)
<input type="text"/>	<input type="text"/>	Select one	<input type="button" value="Delete"/>
		Select one	
		Classroom-based	
		Distance learning (Online, Webinar)	
		Hybrid	
		<input type="button" value="Save"/>	<input type="button" value="Save and Validate"/>

Figure 39. FD-4a - Selecting Delivery Mode

**Select the Delivery Mode Used to Offer the Course or Workshop:** To complete the FD-4a subform, select the delivery mode used by faculty to offer each instructional activity offered during the semiannual reporting period by clicking on the drop-down menu under Block 22 and choosing **one** of the following options:

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



**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-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.

**Add Profession/Discipline**

Name of the Course or Workshop Offered by the Faculty: Select One

Profession and Discipline of Individuals Trained

Add Record

No.	Name of the Course or Workshop Offered by the Faculty	Profession and Discipline of Individuals Trained
(1)	Block 17	

Comments

**Figure 40. FD-4b - Adding Profession and Discipline for Faculty Instructional Activities**

**Name of the Course or Workshop Offered by the Faculty:** To add information about the profession and discipline of individuals trained through each instructional activity offered by fellows and faculty during the semiannual reporting period, select an instructional activity by clicking on the drop-down menu next to "Name of the Course of Workshop Offered by the Faculty" and choosing **one** of the available options.

**Profession and Discipline of Individuals Trained:** Next, select profession(s) and discipline(s) of all individuals trained in each instructional activity offered by fellows and faculty during the semiannual 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 as necessary to identify the profession and discipline of all individuals trained in each instructional activity offered by fellows and faculty during the semiannual reporting period.**

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- Behavioral Health - Clinical Provider - Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopedic 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 - Family
- Nursing - NP - Pediatrics
- Nursing - Nurse administrator
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Dental Assistant
- Dentistry - General 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
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- 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 - Emergency care
- Nursing - NP - Neonatal
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Nurse practitioner
- Nursing - Registered Nurse
- Other - Midwife
- Other - Podiatry
- Public Health - Biostatistics
- Public Health - Epidemiology

Health Resources and Services Administration  
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- Nursing - Nurse informaticist
- Nursing - Other
- Nursing - Researcher/Scientist
- Other - Optometry
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Management
- Public Health - Other
- Student - CNS - Adult gerontology
- Student - CNS - Neonatal
- Student - CNS - Women's health
- Student - Dental Hygiene
- Student - Graduate - Nursing Doctorate
- Student - Graduate - Other Behavioral Health
- Student - Graduate - Social Work
- Student - Medical School
- Student - NP - Acute care pediatric
- Student - NP - Adult Psychiatric/Mental health
- Student - NP - Family
- Student - NP - Neonatal
- Student - NP - Women's health
- Student - Post - high school / Pre - college
- Student - Undergraduate - Public Health
- Nursing - NP - Geropsychiatric
- Nursing - NP - Psychiatric/Mental health
- Nursing - Nurse anesthetist
- Nursing - Nurse midwife
- Nursing - Public health nurse
- Other - Community Health Worker
- Other - Pharmacy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Infectious Disease Control
- Public Health - Social & Behavioral Sciences
- Student - CNS - Family
- Student - CNS - Pediatrics
- Student - Dental
- Student - Dental School
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Home Health Aide
- Student - Midwife
- Student - NP - Adult
- Student - NP - Child/Adolescent Psychiatric/Mental Health
- Student - NP - Family Psychiatric/Mental Health
- Student - NP - Other advanced nurse specialists
- Student - Nurse Midwife
- Student - Registered nurse (RN)
- Public Health - Injury Control & Prevention
- Student - Alternative/Complementary Nursing
- Student - CNS - Geropsychiatric
- Student - CNS - Psychiatric/Mental health
- Student - Dental Assistant
- Student - Diploma/Certificate
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - NP - Acute care adult gerontology
- Student - NP - Adult gerontology
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Pediatrics
- Student - Physician Assistant
- Student - Undergraduate - Other

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

Profession and Discipline of Individuals Trained (2) Block 21	Enter # Trained in this Profession and Discipline (3) Block 21
Student - CNS - Adult gerontology	<input data-bbox="1268 423 1598 493" type="text"/>

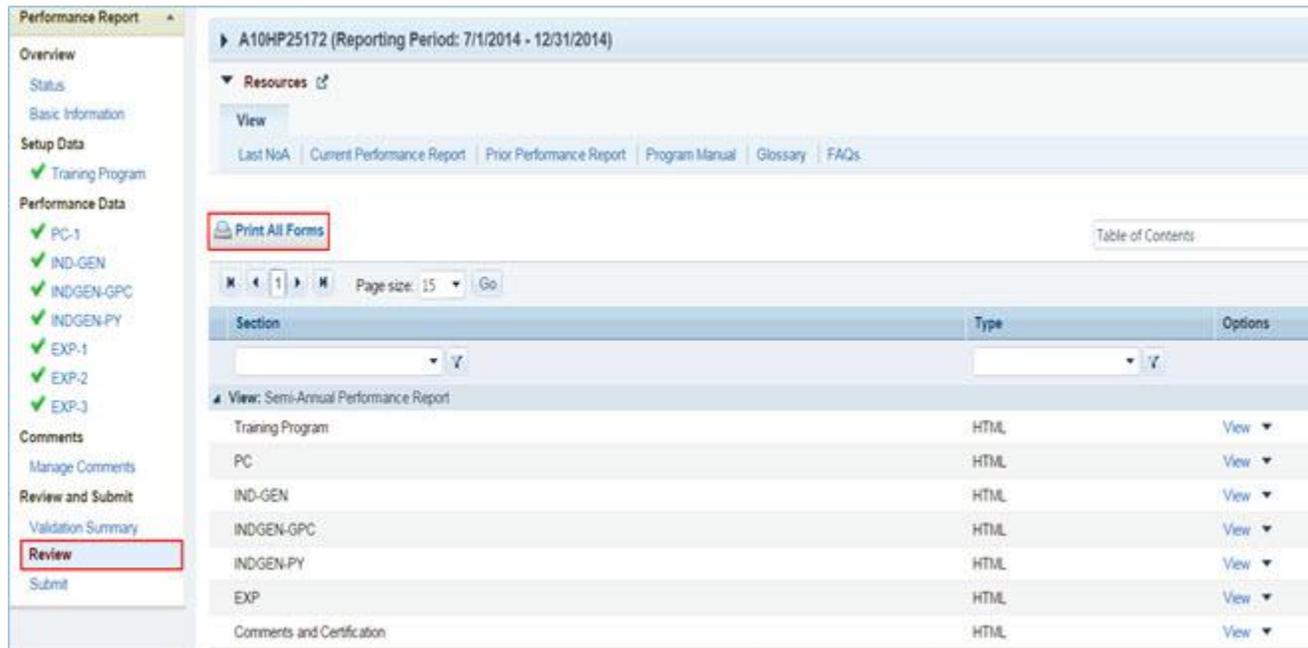
Figure 41. FD-4b - Entering # Trained in the Profession and Discipline

**Enter # Trained in this Profession and Discipline:** To complete the FD-4b subform, enter the number of individuals trained in each profession and discipline that appears under the column labeled "Profession and Discipline of Individuals Trained".



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

## Printing Your Performance Report

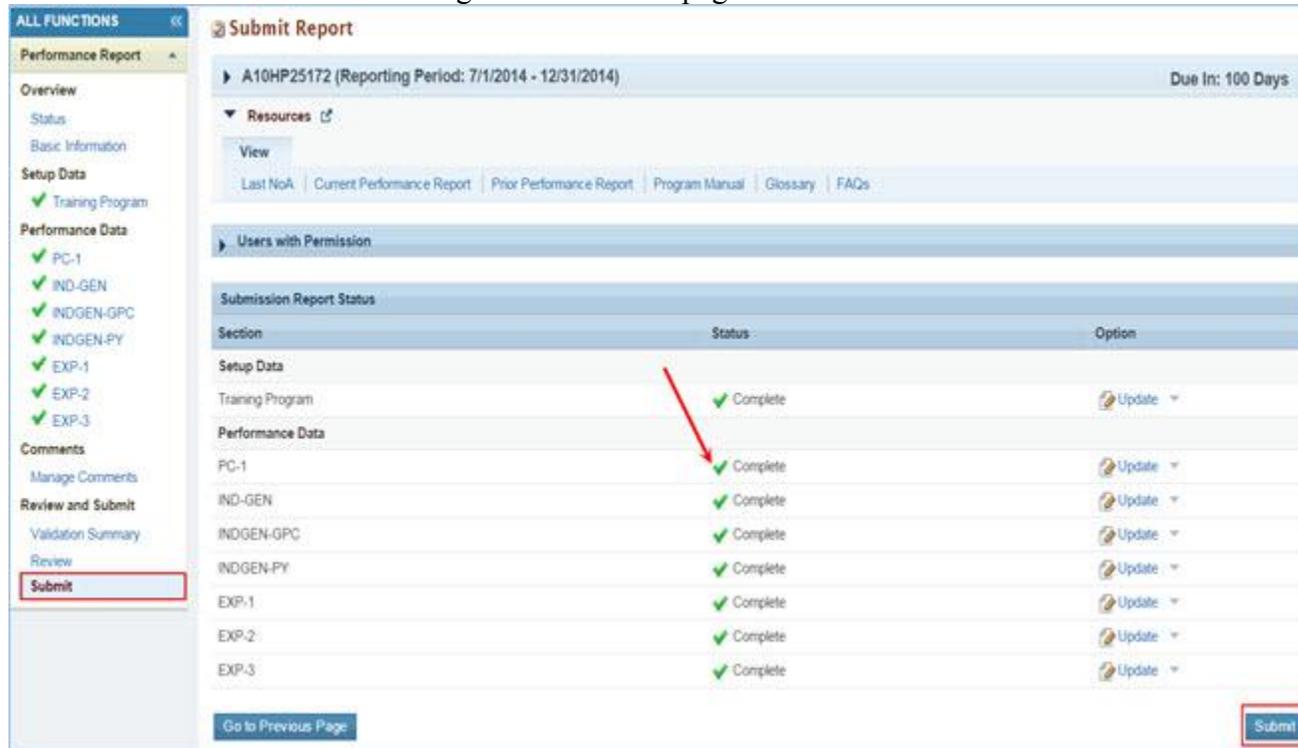


**Figure 42. Screenshot of Printing Your Performance Report**

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

## Submitting Your Performance Report

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



The screenshot displays the 'Submit Report' interface. On the left is a navigation menu with categories like 'Performance Report', 'Setup Data', 'Performance Data', 'Comments', and 'Review and Submit'. The 'Submit' link is highlighted. The main content area shows a report for 'A10HP25172 (Reporting Period: 7/1/2014 - 12/31/2014)' with 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 43. 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 Pearson, Tamara certify that I am authorized to submit this report to HRSA for grant A104HP25172.

Please check the box to electronically sign the Report.

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

**Figure 44. 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	UB64HP20202
Submission Tracking Number	BPMFRUB600029227

[Return to List](#)

**Figure 45. 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 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 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.

**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 **July 31, 2015** 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 **January 01, 2015 - June 30, 2015**.

#### **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 semiannual and 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 semiannual 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-GPC 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-GPC/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 both semiannual amounts within the same academic year. This means that during data entry for the first semiannual period, the automatically calculated totals for the current reporting period and academic year total will be the same. When you enter, save, and validate the funding amount for the second semiannual period, the academic year total will automatically recalculate and will sum the two semiannual amounts.

**Q24: How is the cumulative funding total calculated?**

A24: The cumulative funding total is automatically re-calculated each semiannual period in EHB. This is the total of each semiannual 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. The INDGEN-PY form will automatically pre-populate with the individual records that appeared in the INDGEN-GPC form in the previous reporting period.

***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?**

A31: 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.