Instruction Manual for Grantees of the
Graduate Psychology Education

Annual Performance Report
Welcome

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

1. All required performance measures are linked to the following legislative purpose(s) of the GPE grant program:
   - Faculty development
   - Curricula & Instructional Design / Program Enhancement
   - Practica
   - Internships
   - Post-doctoral fellowships

2. Data submitted by grantees of the program must cover all activities that took place between July 01, 2018 - June 30, 2019 (Referred to as Annual Performance Report).

3. The PRGCA is due no later than July 31, 2019. 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 PRGCAs submitted by grantees. In the case that revisions are needed, you will be granted the ability to re-enter 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.

5. We appreciate your feedback and assistance during this process. If you have any questions or require further assistance in completing your PRGCA, please visit the grants homepage or contact the HRSA Contact Center. All requests for technical assistance will be coordinated through the Call Center and responded to promptly: Call Center Phone Number: 877-G04-HRSA (877-464-4772) or Call Center Online Assistance Form: click here.
Getting Started

The Office of Management and Budget (OMB) has issued a 3-year approval for the annual collection of performance measures across all grants and cooperative agreements funded through the Health Resources and Services Administration's Bureau of Health Workforces (BHW) (OMB # 0915-0061; Expiration Date: 03/31/2022). 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 that 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 column or subform in the BPMH system.

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

Due to the nature of annual reporting, the BPMH system has been recently enhanced to prepopulate specific columns 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.

![Figure 1. Screenshot of View Prior Period Data Link](image)
Getting Started - How Performance Measure Data Fields Are Identified in the Forms

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.

1. **Column Numbers**: 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.

2. **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.

![Figure 2. Example of Performance Measures Data Table](image-url)
Getting Started: Browser Settings

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

1. 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.
2. 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](#).
3. 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.
4. 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.
5. 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](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:
   1. View Prior Period Data- Previously submitted PRGCA data are available in read-only mode
   2. Glossary- Current definitions of key terms
   3. Instruction Manual- Electronic copy of this program manual (can also be found on the HRSA.gov website)
5. **Video Recordings**:  
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)
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. **Government Project Officers**: Contact your Government Project Officer if you need further assistance on the content of your report.
10. **HRSA Call Center**: If you need additional assistance, contact the HRSA Call Center. 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: **Call Center Phone Number: 877-Go4-HRSA/877-464-4772** or Call Center Online Assistance Form [click here](#).
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.

<table>
<thead>
<tr>
<th>Order</th>
<th>Type of Form</th>
<th>Parent Form</th>
<th>Form ID</th>
<th>Applicable Grant Purpose(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Setup Form</td>
<td>SetupForms</td>
<td>Grant Purpose</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Setup Form</td>
<td>SetupForms</td>
<td>Training Program</td>
<td>GPE-3,GPE-4,GPE-5</td>
</tr>
<tr>
<td>3</td>
<td>Setup Form</td>
<td>SetupForms</td>
<td>Faculty Development</td>
<td>GPE-1</td>
</tr>
<tr>
<td>4</td>
<td>Performance Data Form</td>
<td>ProgramCharacteristics-PCS</td>
<td>PC-4</td>
<td>GPE-4</td>
</tr>
<tr>
<td>5</td>
<td>Performance Data Form</td>
<td>ProgramCharacteristics-PCS</td>
<td>PC-6</td>
<td>GPE-5</td>
</tr>
<tr>
<td>6</td>
<td>Performance Data Form</td>
<td>ProgramCharacteristics-PCS</td>
<td>PC-7</td>
<td>GPE-3</td>
</tr>
<tr>
<td>7</td>
<td>Performance Data Form</td>
<td>ProgramCharacteristics-PCS</td>
<td>PC-9</td>
<td>GPE-3,GPE-4,GPE-5</td>
</tr>
<tr>
<td>8</td>
<td>Performance Data Form</td>
<td>IndividualCharacteristics-INDGEN</td>
<td>IND-GEN</td>
<td>GPE-3,GPE-4,GPE-5</td>
</tr>
<tr>
<td>Order</td>
<td>Type of Form</td>
<td>Parent Form</td>
<td>Form ID</td>
<td>Applicable Grant Purpose(s)</td>
</tr>
<tr>
<td>-------</td>
<td>------------------------------</td>
<td>--------------------------------------------------</td>
<td>---------</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>10</td>
<td>Performance Data Form</td>
<td>ExperientialCharacteristics-EXPSubforms</td>
<td>EXP-1</td>
<td>GPE-3,GPE-4,GPE-5</td>
</tr>
<tr>
<td>11</td>
<td>Performance Data Form</td>
<td>ExperientialCharacteristics-EXPSubforms</td>
<td>EXP-2</td>
<td>GPE-3,GPE-4,GPE-5</td>
</tr>
<tr>
<td>12</td>
<td>Performance Data Form</td>
<td>CourseDevelopmentandEnhancement-CDESubforms</td>
<td>CDE-1</td>
<td>GPE-2</td>
</tr>
<tr>
<td>13</td>
<td>Performance Data Form</td>
<td>CourseDevelopmentandEnhancement-CDESubforms</td>
<td>CDE-2</td>
<td>GPE-2</td>
</tr>
<tr>
<td>14</td>
<td>Performance Data Form</td>
<td>FacultyDevelopmentInstructionandRecruitment-FDSubforms</td>
<td>FD-1a</td>
<td>GPE-1</td>
</tr>
<tr>
<td>15</td>
<td>Performance Data Form</td>
<td>FacultyDevelopmentInstructionandRecruitment-FDSubforms</td>
<td>FD-1b</td>
<td>GPE-1</td>
</tr>
<tr>
<td>16</td>
<td>Performance Data Form</td>
<td>FacultyDevelopmentInstructionandRecruitment-FDSubforms</td>
<td>FD-2a</td>
<td>GPE-1</td>
</tr>
<tr>
<td>17</td>
<td>Performance Data Form</td>
<td>FacultyDevelopmentInstructionandRecruitment-FDSubforms</td>
<td>FD-2b</td>
<td>GPE-1,GPE-3</td>
</tr>
<tr>
<td>18</td>
<td>Performance Data Form</td>
<td>ContinuingEducationActivities-CESubforms</td>
<td>CE-1</td>
<td>GPE-1,GPE-2</td>
</tr>
<tr>
<td>19</td>
<td>Performance Data Form</td>
<td>ContinuingEducationActivities-CESubforms</td>
<td>CE-2</td>
<td>GPE-1,GPE-2</td>
</tr>
</tbody>
</table>
Setup Forms
Setup Forms - Introduction
Grant Purpose - Setup
Selecting Grant Purpose(s)

**Purpose:** To configure the BPMH system, please complete the Grant Purpose Setup form by selecting the specific type(s) of activities that were supported with grant funds during the reporting period (July 01, 2018 - June 30, 2019).

<table>
<thead>
<tr>
<th>Grant Purpose</th>
<th>Select</th>
</tr>
</thead>
<tbody>
<tr>
<td>GPE-1: Faculty development</td>
<td></td>
</tr>
<tr>
<td>GPE-2: Curricula &amp; Instructional Design / Program Enhancement</td>
<td></td>
</tr>
<tr>
<td>GPE-3: Practica</td>
<td></td>
</tr>
<tr>
<td>GPE-4: Internships</td>
<td></td>
</tr>
<tr>
<td>GPE-5: Post-doctorate fellowships</td>
<td></td>
</tr>
</tbody>
</table>

Figure 3. Selecting Grant Purpose(s)

**GPE-1: Faculty development:**

**GPE-2: Curricula & Instructional Design / Program Enhancement:**

**GPE-3: Practica:**

**GPE-4: Internships :**

**GPE-5: Post-doctorate fellowships:**

⚠️ **Warning:** Selections made in this form will affect the types of subforms and/or drop-down menu options that will appear throughout
Warning: Some options in the Grant Purpose form will be preselected based on information provided in a previous reporting period. Unselecting a grant purpose will cause related forms and data to be deleted. If you need to unselect a grant purpose, contact your project officer first to ensure you do not unnecessarily lose any data.

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

**Purpose:** The Training Program Setup form will configure all subsequent subforms specific to internships, practica and fellowships (depending on your grant).

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**Add Training Program**

<table>
<thead>
<tr>
<th>Select Type of Training Program Offered</th>
<th>Load Program Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Click the ‘Load Program Details' button after selecting your training program)</td>
<td></td>
</tr>
</tbody>
</table>

*Add Record*

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

**Select Type of Training Program Offered:** Select the type of training program supported through the grant during the current annual reporting period by clicking on the drop-down menu next to “Select Type of Training Program Offered” and choosing one of the following options:

- Fellowship program
- Internship Program
- Practicum/Field Placement program
Figure 5. Training Program Setup - Loading Program Details

Click on the “Load Program Details” button. This will activate additional drop-down menus specific to the type of training program selected.
Training Program Setup - Adding Fellowship Program

*Add Training Program*

<table>
<thead>
<tr>
<th>For a Fellowship, Residency, Practicum/Field Placement, Internship or 1-year Retraining Program, Select the Primary Discipline of Individuals Trained</th>
</tr>
</thead>
<tbody>
<tr>
<td>Add Record</td>
</tr>
</tbody>
</table>

Figure 6. Training Program Setup - Adding Fellowship Program

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

- Select the primary profession and discipline of individuals in the fellowship program by clicking on the drop-down menu and choosing below listed options.
- Next, click on the "Add Record" button to save your entry.
- Repeat this process to capture the primary profession and discipline of each new fellowship program supported with grant funds during the annual reporting period.

- Behavioral Health - Clinical Psychology
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Psychology
- Behavioral Health - Pastoral/Spiritual Care
- Behavioral Health - Clinical Social Work
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling
- Behavioral Health - Psychology
For a Fellowship, Residency, Practicum/Field Placement, Internship or 1-year Retraining Program, Select the Primary Discipline of Individuals Trained:

- Select the primary profession and discipline of individuals in the practicum/field placement by clicking on the drop-down menu and choosing one of the following options:
- Next, click on the "Add Record" button to save your entry.
- Repeat this process as necessary to add all new practicum/field placement programs supported by the grant during the current annual reporting period.

- Student - Graduate - Psychology
### Training Program Setup - Adding Internship Program

<table>
<thead>
<tr>
<th>Add Training Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>For a Fellowship, Residency, Practicum/Field Placement, Internship or 1-year Retraining Program, Select the Primary Discipline of Individuals Trained</td>
</tr>
</tbody>
</table>

**Figure 8. Training Program Setup - Adding Internship Program**

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

- Select the primary profession and discipline of individuals in the internship by clicking on the drop-down menu and choosing below listed options.
- Next, click on the "Add Record" button to save your entry.
- Repeat this process to capture the primary profession and discipline of each new internship programs supported with grant funds during the annual reporting period.

- Student - Graduate - Psychology
Training Program Setup - Selecting Training Activity Status

Select Training Activity Status in the Current Reporting Period: Select the status of each internship, practicum/field placement, or fellowship program at the end of the current annual (New and Prior) reporting period i.e., June 30, 2019 by choosing one of the options below:

- Active
- Inactive

Note: Active programs - A training program that was offered during the current annual reporting period. If you are reporting any activity for a program, please select active.

Note: Inactive programs - A training program that was NOT offered during the current annual reporting period. Selecting ‘Inactive’ indicates that the training program is completed, you are no longer administering it, and you have no active INDGEN records or faculty development programs. You will not report on any aspect of an inactive program, and all records associated with the program (i.e., EXP records and CDE records) will be made inactive.

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

**Faculty Development – Setup**

**Selecting Faculty Development Activities**

The Faculty Development Setup form will configure all subforms specific to faculty development.

![Faculty Development Activities](image)

**Figure 10. Selecting Faculty Development Activities**

Select the **type(s) of faculty development activities** supported with grant funds during the current annual reporting period. Options on the Faculty Setup form will be automatically pre-selected if you have previously reported one or more training programs or activities through the FD-1a or FD-2a subforms.

**Structured Faculty Development Training Program:**

**Faculty Development Activity:**

**Warning:**

- You may uncheck “Faculty Development Activity” (i.e., Unstructured Faculty Development) if you have nothing to report.
- You may uncheck “Structured Faculty Development Training Program” only if you have no ongoing training programs.

**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.
Program Characteristics—PC Subforms
PC Subforms - Introduction
PC-4: Program Characteristics – Internship Programs

PC-4 - Selecting Type(s) of Partners/Consortia

<table>
<thead>
<tr>
<th>Select Type(s) of Partners/Consortia Used to Offer this Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>(3) Block 2</td>
</tr>
</tbody>
</table>

Figure 11. PC-4 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia Used to Offer this Training: Complete Column 3 (Block 2) by selecting all of the type(s) of partnerships or consortia used or established for the purpose of offering each internship program during the current reporting period. Choose all that apply from the following options:

- Academic department - outside the institution
- Alzheimer’s Association/Chapters
- Area Agencies on Aging
- Community Mental Health Center
- Federal Government - Veterans Affairs
- Federal Government - Department of Defense/Military
- Federal Government - NIH
- Federal Government - SAMHSA
- Geriatric ambulatory care and comprehensive units
- Health department - Local
- Health disparities research center
- Hospice
- Long-term care facility
- Nonprofit organization (non - faith based)
- Academic department - within the institution
- Alzheimer’s Disease Resource Centers
- Community - based health center (e.g.; free clinic)
- Day and home care programs (i.e. Home Health)
- Federal Government - AHRQ
- Federal Government - FDA
- Federal Government - Other HHS Agency/Office
- Federal Government -Other
- Geriatric Behavioral or Mental Health Units
- Health department - State
- Health insurance/Healthcare Provider Group (e.g.; PPO/HMO)
- Hospital
- No partners/consortia used
- Nurse managed health clinic
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Health Center (CHC)
- Educational institution (Grades K - 12)
- Federal Government - CDC
- Federal Government - IHS
- Federal Government - Other HRSA Program
- FQHC or look-alike
- Geriatric consultation services
- Health department - Tribal
- Health policy center
- Local Government
- Nonprofit organization (faith - based)
Warning: You may not select "No partners/consortia used" in combination with any other option.
Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Enter Total # Enrolled (whether funded by BHW or not): Total: In Column 4 (Block 3), enter the total number of students who participated in each internship program during the current reporting period. Count all students who participated in the internship program, regardless of whether or not the student directly received a BHW-funded financial award (i.e., stipend).

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

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

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

Note: Students who permanently left their internship before completion (i.e. attrition) will be counted separately in Column 9 (Block 9).
Reference: Refer to the glossary for definitions of disadvantaged background and underrepresented minority.

Example: The John Doe School of Psychology had 18 graduate-level psychology students participate in internships during the current annual reporting period. Among the 18 graduate-level psychology students who participated, 9 were underrepresented minorities. In addition, 3 students were from disadvantaged backgrounds, but were not under-represented minorities.

- In Column 4 (Block 3), the reporting official would enter 18.
- In Column 5 (Block 3a), the reporting official would enter 9.
- In Column 6 (Block 3b), the reporting official would enter 3.
Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

![Warning]

**Enter Total # Graduated/Completed (whether funded by BHW or not): Total:** In Column 7 (Block 8), enter the total number of students who completed all internship requirements during the current reporting period. Count all students who completed the internship program, regardless of whether or not the student directly received a BHW-funded financial award (i.e., stipend).

**Enter Total # Graduated/Completed (whether funded by BHW or not): URM:** In Column 8 (Block 8a), enter the number of students who completed all internship requirements during the current reporting period and were underrepresented minorities.

**Note:** Block 8 is a subset of Block 3; Block 8a is a subset of Block 8.

**Note:** Students who permanently left their internship before completion (i.e. attrition) will be counted separately in Column 9 (Block 9).

**Reference:** Refer to the glossary for definitions of disadvantaged background and underrepresented minority.
Example: The John Doe School of Psychology had 18 graduate-level psychology students participate in internships during the current reporting period. Among the graduate-level psychology students who participated in internships, 3 completed all internship requirements. Of those who completed internships, none were underrepresented minorities.

- In Column 7 (Block 8), the reporting official would enter 3.
- In Column 8 (Block 8a), the reporting official would enter 0.
Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

| Total # Who left the Program Before Completion (whether funded by BHW or not) |
|-------------------------------|-------------------------------|
| **Total**                     | **URM**                      |
| (9) Block 9                   | (10) Block 9a                |

Figure 14. PC-4 - Entering Attrition Information

Enter Total # Who left the Program Before Completion (whether funded by BHW or not): Total: In Column 9 (Block 9), enter the total number of students who permanently left their internships before completion during the current reporting period. Count all students who permanently left their internship regardless of whether or not the student directly received a BHW-funded financial award (i.e., stipend).

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

Note: Block 9a is a subset of Block 9. The total entered in Block 9 is exclusive of the total number of enrollees (Block 3).

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

Example: The John Doe School of Psychology had 18 graduate-level psychology students participate in internships during the current reporting period. Among the graduate-level psychology students who participated in internships, 2 left the internship program before completion. Neither student was an underrepresented minority.
• In Column 9 (Block 9), the reporting official would enter 2.
• In Column 10 (Block 9a), the reporting official would enter 0.

To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.
PC-6: Program Characteristics – Fellowship Programs

PC-6 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia Used to Offer this Training: Complete Column 3 (Block 2) by selecting all of the type(s) of partnerships or consortia used or established for the purpose of offering each post-doctoral fellowship program during the current reporting period.

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

- Other
- Professional Associations
- State Government

- Physical therapy/Rehabilitation center
- Quality improvement organization
- Tribal Government

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

Warning: You may not select "No partners/consortia used" in combination with any other option.
PC-6 - Entering Enrollment Information

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

Enter Total # Enrolled (whether funded by BHW or not)

<table>
<thead>
<tr>
<th>Total</th>
<th>URM</th>
<th>Disadvantaged Background and not URM</th>
</tr>
</thead>
<tbody>
<tr>
<td>(4)</td>
<td>(5)</td>
<td>(6)</td>
</tr>
<tr>
<td>Block 3</td>
<td>Block 3a</td>
<td>Block 3b</td>
</tr>
</tbody>
</table>

Figure 16. PC-6 - Entering Enrollment Information

Enter Total # Enrolled (whether funded by BHW or not): Total: In Column 4 (Block 3), enter the total number of post-doctoral fellows who participated in each fellowship program during the current reporting period. Count all post-doctoral fellows who participated in the fellowship program, regardless of whether or not the post-doctoral fellow directly received a BHW-funded financial award (i.e., stipend).

Enter Total # Enrolled (whether funded by BHW or not): URM: In Column 5 (Block 3a), enter the number of post-doctoral fellows who participated in the fellowship program during the current reporting period and were underrepresented minorities.

Enter Total # Enrolled (whether funded by BHW or not): Disadvantaged Background and not URM: In Column 6 (Block 3b), enter the number of post-doctoral fellows from disadvantaged backgrounds who participated in the fellowship program during the current reporting period but were not underrepresented minorities.

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

Note: Post-doctoral fellows who permanently left their fellowship before completion (i.e. attrition) will be counted separately in Column 9 (Block 9).
Reference: Refer to the glossary for a definition of disadvantaged background and underrepresented minority.

Example: The John Doe School of Psychology had 18 post-doctoral fellows participate in fellowships during the current reporting period. Among the 18 post-doctoral fellows who participated, 9 were underrepresented minorities. In addition, 3 post-doctoral fellows were from disadvantaged backgrounds, but were not underrepresented minorities.

- In Column 4 (Block 3), the reporting official would enter 18.
- In Column 5 (Block 3a), the reporting official would enter 9.
- In Column 6 (Block 3b), the reporting official would enter 3.
Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

<table>
<thead>
<tr>
<th>Enter Total # Graduated/Completed (whether funded by BHW or not)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
</tr>
<tr>
<td>(7) Block 8</td>
</tr>
</tbody>
</table>

**Figure 17. PC-6 - Entering Graduate Information**

**Enter Total # Graduated/Completed (whether funded by BHW or not): Total:** In Column 7 (Block 8), enter the total number of post-doctoral fellows who completed all fellowship requirements during the current reporting period. Count all post-doctoral fellows who completed the fellowship program, regardless of whether or not the post-doctoral fellow directly received a BHW-funded financial award (i.e., stipend).

**Enter Total # Graduated/Completed (whether funded by BHW or not): URM:** In Column 8 (Block 8a), enter the number of post-doctoral fellows who completed all fellowship requirements during the current reporting period and were underrepresented minorities.

- **Note:** Block 8 is a subset of Block 3; Block 8a is a subset of Block 8.
- **Note:** Post-doctoral fellows who permanently left their fellowship before completion (i.e. attrition) will be counted separately in Column 9 (Block 9).

*Reference:* Refer to the glossary for definitions of disadvantaged background and underrepresented minority.
Example: The John Doe School of Psychology had 18 post-doctoral fellows participate in fellowships during the current reporting period. Among the post-doctoral fellows who participated in fellowships, 3 completed all fellowship requirements. Of those who completed fellowships, none were underrepresented minorities.

- In Column 7 (Block 8), the reporting official would enter 3.
- In Column 8 (Block 8a), the reporting official would enter 0.
### PC-6 - Entering Attrition Information

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

<table>
<thead>
<tr>
<th>Enter Total # Who left the Program Before Completion (whether funded by BHW or not)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Block 9</td>
</tr>
</tbody>
</table>

![Figure 18. PC-6 - Entering Attrition Information](image)

**Enter Total # Who left the Program Before Completion (whether funded by BHW or not): Total:** In Column 9 (Block 9), enter the total number of post-doctoral fellows who permanently left their fellowship before completion during the current reporting period. Count all post-doctoral fellows who permanently left their fellowships regardless of whether or not the post-doctoral fellow directly received a BHW-funded financial award (i.e., stipend).

**Enter Total # Who left the Program Before Completion (whether funded by BHW or not): URM:** In Column 10 (Block 9a), enter the number of post-doctoral fellows who permanently left their fellowships before completion during the current reporting period and were underrepresented minorities.

**Note:** Block 9a is a subset of Block 9. The total entered in Block 9 is exclusive of the total number of enrollees (Block 3).

*Reference: Refer to the glossary for definitions of disadvantaged background and underrepresented minority.*
Example: The John Doe School of Psychology had 18 post-doctoral fellows participate in fellowships during the current reporting period. Among the post-doctoral fellows who participated in fellowships, 2 left the fellowship program before completion. Neither fellow was an underrepresented minority.

- In Column 9 (Block 9), the reporting official would enter 2.
- In Column 10 (Block 9a), the reporting official would enter 0.

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

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

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

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

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

- Other
- Professional Associations
- State Government

- Physical therapy/Rehabilitation center
- Quality improvement organization
- Tribal Government

Warning: You may not select "No partners/consortia used" in combination with any other option.
Enter Total # Enrolled (whether funded by BHW or not): Total: In Column 4 (Block 3), enter the total number of students who participated in each practicum/field placement program during the current reporting period. Count all students who participated in the practicum/field placement program, regardless of whether or not the student directly received a BHW-funded financial award (i.e., stipend).

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

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

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

Note: Students who permanently left their practicum/field placement before completion (i.e. attrition) will be counted separately in Column 9 (Block 9).
Reference: Refer to the glossary for definitions of disadvantaged background and underrepresented minority.

Example: The John Doe School of Social work had 18 graduate-level social work students participate in practicum/field placement programs during the current reporting period. Among the 18 graduate-level social work students who participated, 9 students were underrepresented minorities. In addition, 3 students were from disadvantaged backgrounds, but were not under-represented minorities.

- In Column 4 (Block 3), the reporting official would enter 18.
- In Column 5 (Block 3a), the reporting official would enter 9.
- In Column 6 (Block 3b), the reporting official would enter 3.
Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

<table>
<thead>
<tr>
<th>Enter Total # Graduated/Completed (whether funded by BHW or not)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>-------------------</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Block 8</td>
</tr>
</tbody>
</table>

Figure 21. PC-7 - Entering Graduate Information

Enter Total # Graduated/Completed (whether funded by BHW or not): Total: In Column 7 (Block 8), enter the total number of students who completed all practicum/field placement requirements during the current reporting period. Count all students who completed the practicum/field placement program, regardless of whether or not the student directly received a BHW-funded financial award (i.e., stipend).

Enter Total # Graduated/Completed (whether funded by BHW or not): URM: In Column 8 (Block 8a), enter the number of students who completed all practicum/field placement requirements during the current reporting period and were underrepresented minorities.

Note: Block 8 is a subset of Block 3; Block 8a is a subset of Block 8.

Note: Students who permanently left their practicum/field placement before completion (i.e. attrition) will be counted separately in Column 9 (Block 9).

Reference: Refer to the glossary for definitions of disadvantaged background and underrepresented minority.
Example: The John Doe School of Social Work had 18 graduate-level social work students participate in practicum/field placement programs during the current reporting period. Among the graduate-level social work students who participated in practicum/field placements, 3 completed all practicum/field placement requirements. Of those who completed practicum/field placements, none were underrepresented minorities.

- In Column 7 (Block 8), the reporting official would enter 3.
- In Column 8 (Block 8a), the reporting official would enter 0.
**PC-7 - Entering Attrition Information**

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

<table>
<thead>
<tr>
<th>Enter Total # Who left the Program Before Completion (whether funded by BHW or not)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
</tr>
<tr>
<td>URM</td>
</tr>
<tr>
<td>(9) Block 9</td>
</tr>
<tr>
<td>(10) Block 9a</td>
</tr>
</tbody>
</table>

**Enter Total # Who left the Program Before Completion (whether funded by BHW or not): Total:** In Column 9 (Block 9), enter the total number of students who permanently left their practicum/field placement programs before completion during the current reporting period. Count all students who permanently left their practicum/field placement regardless of whether or not the student directly received a BHW-funded financial award (i.e., stipend).

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

*Note: Block 9a is a subset of Block 9. The total entered in Block 9 is exclusive of the total number of enrollees (Block 3).*

*Reference: Refer to the glossary for definitions of disadvantaged background and underrepresented minority.*
Example: The John Doe School of Social Work had 18 graduate-level social work students participate in practicum/field placements during the current reporting period. Among the graduate-level social work students who participated in practicum/field placements, 2 left the practicum/field placement program before completion. Neither student was an underrepresented minority.

- In Column 9 (Block 9), the reporting official would enter 2.
- In Column 10 (Block 9a), the reporting official would enter 0.

To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.
PC-9: Program Characteristics –Positions Description

PC-9 - Selecting Type of Training Program

**Type of Training Program:** Select a training program by clicking on the drop-down menu next to "Select Training Program" and choosing one of the available options. (The options available under "Type of Training Program" will prepopulate with information that was entered and saved in the Training Program Setup Form.)
Training Year: Select the types of training years that apply to the residency program supported through the grant by clicking on the drop-down menu next to "Select Training Year" and choosing all that apply from the available options. Click on the "Add Record" button to save your entry. Repeat this process as necessary to capture training years associated with each residency program supported through the grant.

- Graduate Year 1
- Graduate Year 2
- Graduate Year 3
- Graduate Year 4
- Graduate Year 5
PC-9 - Entering Total # of Positions Filled

Enter Total # of Positions Filled

Figure 25. PC-9 - Entering Total # of Positions Filled

Enter Total # of Positions Filled: Enter the total number of positions filled in the textbox in Column 5 (Block 6) for each training year.
**PC-9 - Entering Total # of Positions Expanded using BHW Funds**

<table>
<thead>
<tr>
<th>Enter Total # of Positions Expanded using BHW Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>(6)</td>
</tr>
<tr>
<td>Block 7</td>
</tr>
</tbody>
</table>

Figure 26. PC-9 - Entering Total # of Positions Expanded using BHW Funds

**Enter Total # of Positions Expanded using BHW Funds**: Enter the total number of positions expanded by training year during the current reporting period.

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

INDGEN - Introduction

Notice to Grantees about Individual-level Data:

- You must complete an INDGEN record for each individual who received a BHW-funded financial award during the annual reporting period. In addition, annual updates are required for individuals who were previously reported on INDGEN and were not marked as having graduated, completed or attrited from their training program by **July 01, 2018 - June 30, 2019**.

- For prior records, the BPMH system will prepopulate certain blocks in the INDGEN subform with data submitted in previous reporting periods for each individual. All other fields must be updated on an annual basis until the individual graduates from, completes, or permanently leaves their training program.

- The INDGEN subform will automatically calculate and display read-only columns labeled "Academic Year Total" and "Cumulative BHW Financial Award Total."
1. The Academic Year Total will display the amount entered for a given academic year.

2. The Cumulative BHW Financial Award Total will sum all amounts entered for this individual in the BMPH system.

- Individuals who were reported as having graduated from or completed their training program in the previous reporting period will automatically be transferred from INDGEN to the INDGEN-PY subform after one (1) full calendar year has passed from the moment of graduation/completion. At that point, 1-year post-graduation/completion employment status data must be provided for each individual.
Note:  To view data submitted in previous reporting period, click on the "View Prior Period Data" link on top of the form.
**IND-GEN: Individual Characteristics**

**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.

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

- **Yes** (complete IND-GEN)
- **No** (click Save and Validate button to proceed to the next form)

---

**Figure 27. IND-GEN - Setup**

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

---

⚠️ **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.
Warning: Prior records cannot be deleted.
Type of Training Program: Select each individual's training program by clicking on the drop-down menu under the column labeled "Type of Training Program" and choosing one of the available options. The options available in this menu will prepopulate with programs entered and saved in the Training Program Setup Form.

Note: The option for "Other" that is available in the drop-down menu under the column labeled "Type of Training Program" should only be selected for faculty who received a BHW-funded financial award during the annual reporting period for participating in faculty development activities or for faculty and students who received a BHW-funded stipend for participating in a faculty-student research project.
**IND-GEN - Entering Trainee Unique ID**

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

**Warning:** It is the responsibility of each grantee to keep a log of all unique IDs used, as these will be required to provide annual updates for each individual and one-year follow-up data for students and post-doctoral fellows.
IND-GEN - Selecting Individual's Training or Awardee Category

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

- Enrollee (campus-based only)
- Enrollee (distance learning only)
- Enrollee (hybrid)
- Faculty
- Fellow

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

💡 Note: For students (enrollees), select type of trainee based on the delivery mode used to offer the training program associated with each individual.
**IND-GEN - Selecting Individual's Enrollment/Employment Status**

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

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

*Note: For students, select enrollment status based on the individual's participation in their degree program.*
IND-GEN - Selecting Individual's Gender

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

- Female
- Male
- Not Reported

Note: 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 - Entering Year of Birth**

**Figure 33. IND-GEN - Entering Year of Birth**

**Enter Year of Birth**: Enter each individual’s year of birth at the end of the current annual reporting period (i.e., as of **June 30, 2019**) in the textbox under Column 6a.

- 1917
- 1918
- 1919
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- 1979
Health Resources and Services Administration
Bureau of Health Workforce

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- 2009
- 2010
- 2011
- 2012
- 2013
- 2014
- 2015
- 2016
- 2017
- Not Reported

Note: 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 Ethnicity

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

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

*Note: 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

Select Individual's Race: Select each individual’s race by clicking on the drop-down menu in Column 8 (Block 7) and choosing all that apply from the following options. You may select more than one (1) option for individuals of multiple races:

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

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

Note: 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**

<table>
<thead>
<tr>
<th>Select Whether Individual is from a Rural Residential Background</th>
</tr>
</thead>
<tbody>
<tr>
<td>(9)</td>
</tr>
<tr>
<td>Block 8</td>
</tr>
</tbody>
</table>

**Figure 36. IND-GEN - Selecting if Individual is from a Rural Residential Background**

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

- Yes
- No
- Not Reported

**Reference:** Refer to the glossary for a definition of rural setting.
IND-GEN - Selecting if Individual is from a Disadvantaged Background

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

- Yes
- No
- Not Reported

**Note**: 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

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

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

Note: 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.

<table>
<thead>
<tr>
<th>Select Whether Individual Received BHW Financial Award?</th>
<th>Enter Individual's Financial Award Amount (BHW funds only)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(12) Block 11</td>
<td>Stipend</td>
</tr>
<tr>
<td>(13) Block 11</td>
<td></td>
</tr>
</tbody>
</table>

**Figure 39. IND-GEN - Entering BHW-Funded Financial Award Information**

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

- Yes
- No

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

- If the individual did receive a BHW-funded financial award, select “Yes” in Column 12 (Block 11) and enter the total amount of BHW dollars provided during the current annual reporting period in the textbox in Column 13.
- If the individual did not receive a BHW-funded financial award, select “No” in Column 12 (Block 11) and enter "0" in the textbox in Column 13.
Note: The amount reported under the column labeled "Stipend" should be the total monies from the grant provided to an individual during the current annual reporting period for the purposes of participating in the training program that was selected under the column labeled "Type of Training Program." 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. Do not include dollars that came from other sources of funding. If an individual participated in more than one (1) program and received stipends for each program, multiple entries on IND-GEN are required to capture participation and stipend amounts for each program separately.
IND-GEN - Entering # of Academic Years the Individual has Received BHW Funding

Enter # of Academic Years the Individual has Received BHW Funding

Figure 40. IND-GEN - Entering # of Academic Years the Individual has Received BHW Funding

Enter # of Academic Years the Individual has Received BHW Funding: Select the cumulative number of academic years that each student has received a BHW-funded financial award by clicking on the drop-down menu under Column 22 and choosing one of the following options:

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

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

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

Note: If an individual received a BHW-funded financial award for the first time during the current annual reporting period, select "1" under Column 22 (Block 12).
IND-GEN - Selecting Individual's Academic or Training Year

Select Individual's Academic or Training Year: Select each student's current training year by clicking on the drop-down menu under Block 15 and choosing one of the following options:

- Faculty
- Fellowship Year 2
- Graduate Year 2
- Graduate Year 4
- Graduate Year 6
- N/A
- Fellowship Year 1
- Graduate Year 1
- Graduate Year 3
- Graduate Year 5
- Graduate Year 7

Note: For faculty or preceptors, select N/A.
Graduate Psychology Education

IND-GEN - Selecting any HHS Priority Topic Area on which an Individual Received Training

Select any HHS Priority Topic Area on which an Individual Received Training: Use the dropdown menu in Column 26b to select all that apply from the list of topic areas on which the individual was trained.

- Individual participated on a health care team delivering integrated behavioral health services in primary care
- Individual received a SAMHSA waiver to prescribe medication assisted treatment (MAT)
- Individual received training in opioid use treatment
- Individual received training in telehealth
- Individual received training on integrated behavioral health in primary care
- Individual received training in medication assisted treatment (MAT) for SUD/OUD
- Individual received training in substance use treatment
- None of the above
Figure 43. IND-GEN - Selecting Individual's Primary Discipline

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

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery
- 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
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Behavioral Health - Psychology
- 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/Internal Medicine
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Aerospace Medicine
Graduate Psychology Education

- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Pediatrics
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women’s health
- Nursing - Home Health Aide
- Nursing - NP - Adult Gerontology
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse administrator
- Nursing - Nurse educator
- Nursing - Other (e.g. CNA PCA)
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - Alternative/Complementary Nursing
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - CNS - Women’s health and pediatrics
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Psychiatric/Mental health
- Nursing - Nurse anesthetist
- Nursing - Nurse informaticist
- Nursing - Public health nurse
- Other - Allied Health
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Lay and Family Caregiver
- Other - Nutritionist
- Other - Optometry
- Other - Podiatry
- Other - Speech Therapy
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention

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- Medicine - Preventive Medicine/Occupational Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Community health nursing
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult gerontology
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - NP - Women’s health
- Nursing - Nurse Assistant/Patient Care Associate (PCA)
- Nursing - Nurse midwife
- Nursing - Registered Nurse
- Other - Chiropractor
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Medical Assistant
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Management
- Public Health - Social & Behavioral Sciences
Graduate Psychology Education

- Other - Home Health Aide
- Other - Midwife (non-nurse)
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Respiratory Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Infectious Disease Control
- Student - Graduate - Psychology
IND-GEN - Entering Training Information in a Primary Care Setting

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

![Table](image)

**Training in a Primary Care Setting:**

- **Select Whether Individual Received Training:**
  - Yes
  - No
  - N/A

- **Enter # of Contact Hours:**
  - If the individual did receive clinical or experiential training in a primary care setting, enter the total number of hours spent in this type of setting during the current reporting period in the textbox under Column 29 (Block 17a).
  - If the individual did NOT receive clinical or experiential training in a primary care setting, leave the textbox blank under Column 29 (Block 17a).
Warning: For faculty members, select "N/A" in the drop-down menu in Column 28 (Block 17) and leave the textbox blank under Column 29 (Block 17a).
Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

![Figure 45. IND-GEN - Entering Training Information in a Medically Underserved Community](training_table.png)

Training in a Medically Underserved Community: Select Whether Individual Received Training: If the individual received clinical or experiential training in a MUC, enter the total number of hours spent in this type of setting during the current reporting period in the textbox in Column 31 (Block 18a).

- Yes
- No
- N/A

Training in a Medically Underserved Community: Enter # of Contact Hours: If the individual received clinical or experiential training in a MUC, enter the total number of hours spent in this type of setting during the current reporting period in the textbox in Column 31 (Block 18a).

If the individual did not receive clinical or experiential training in a MUC, leave the textbox in Column 31 (Block 18a) blank.

Warning: For faculty members, select "N/A" in the drop-down menu in Column 31 (Block 18) and leave the textbox blank under Column 32 (Block 18a).
Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Training in a Rural Area: Select Whether Individual Received Training:

- If the individual received clinical or experiential training in a rural area, enter the total number of hours spent in this type of setting during the current reporting period in the textbox.
- If the individual did not receive clinical or experiential training in a rural area, leave the textbox blank.

- Yes
- No
- N/A

Training in a Rural Area: Enter # of Contact Hours:

- If the individual received clinical or experiential training in a rural area, enter the total number of hours spent in this type of setting during the current reporting period in the textbox.
- If the individual did not receive clinical or experiential training in a rural area, leave the textbox blank.
Warning: For faculty members, select "N/A" in the drop-down menu in Column 33 (Block 19) and leave the textbox blank under Column 34 (Block 19a).
IND-GEN - Selecting Whether Individual Left the Program Before Completion

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

- Yes
- No
Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

<table>
<thead>
<tr>
<th>Select Whether Individual Graduated/Completed the Program</th>
<th>Select Individual's Post-Graduation/Completion Intentions</th>
</tr>
</thead>
<tbody>
<tr>
<td>(37) Block 22</td>
<td>(39) Block 22b</td>
</tr>
</tbody>
</table>

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

- Yes
- No

Select Individual's Post-Graduation/Completion Intentions:

- If an individual did complete their training program during the current reporting period, select “Yes” in Column 37 (Block 22) and select the individual’s training or employment intentions at the time of completion by clicking on the drop-down menu in Column 39 (Block 22b) and choosing all that apply from the below listed options.
- If an individual did not complete their training program during the current reporting period select “No” in Column 37 (Block 22) and select “N/A” in Column 39 (Block 22b).

- Individual intends to become employed or pursue further training in a medically underserved community
- Individual intends to become employed or pursue further training in a rural setting
- Individual intends to become employed or pursue further training in a primary care setting
- None of the above
- N/A
Health Resources and Services Administration
Bureau of Health Workforce

- Not Reported

Warning: None of the above, Not reported, and N/A cannot be selected in combination with any other option.

Note: For faculty members, select "N/A" in the drop-down menu under Block 22b.

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

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

<table>
<thead>
<tr>
<th>Select whether status/employment data are available for the individual 1-year post graduation/completion</th>
<th>Select Individual's Current Training/Employment Status</th>
<th>Select Whether Your Organization Hired this Individual</th>
<th>Select Whether a Partner Organization Hired this Individual</th>
<th>Select Employment Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>(13) Block 23</td>
<td>(14) Block 23a</td>
<td>(16)</td>
<td>(17)</td>
<td>(18)</td>
</tr>
</tbody>
</table>

**Figure 49. INDGEN-PY - Entering Employment Data 1-year Post Graduation/Completion**

Select whether status/employment data are available for the individual 1-year post graduation/completion: Select whether current training/employment data are available for each individual who received a BHW-funded financial award and completed their training program one year prior to this reporting period by clicking on the drop-down menu in Column 13 (Block 23) and choosing one of the following options:

- Yes
- No

Select Individual's Current Training/Employment Status:

Select the individual’s current training/employment status by clicking on the drop-down menu in Column 14 choosing one of the options below. If employment data are not available for the individual, select “N/A.”

- Individual is currently employed or is pursuing further training in a medically underserved community
- Individual is currently employed or is pursuing further training in a rural setting
- Individual is currently working in a facility that provides substance use treatment services
- Individual is currently employed or is pursuing further training in a primary care setting
- Individual is currently providing treatment or wrap-around services to individuals with substance use disorders
- Individual is serving individuals with OUD/SUD
Select Whether Your Organization Hired this Individual:

Select whether your organization hired this individual following training program completion by clicking on the drop-down menu under Column 16 and choosing one of the options below. If employment data are not available for the individual, select “N/A.”

- No
- Yes
- N/A

Select Whether a Partner Organization Hired this Individual:

Select whether a partner organization hired this individual following training program completion by clicking on the drop-down menu under Column 17 and choosing one of the options below. If employment data are not available for the individual, select “N/A.”

- Yes
- No
- N/A

Select Employment Location:

Select the type of employment location where the individual was hired following training program completion by clicking on the drop-down menu under Column 18 and choosing one of the options below. If employment data are not available for the individual, select “N/A.”

- Academic Institution
- Critical Access Hospital
- Other Clinical Training Site
- Area Health Education Center
- FQHC or Look-Alike
- Rural Health Clinic
Warning: “None of the above” and “N/A” cannot be selected in combination with any other option.

Note: One-year post-completion employment data are not required for faculty.

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

EXP - Introduction

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

- The EXP-1 form collects information about the different clinical sites used to provide your trainees with experiential training.
- The EXP-2 subform collects information about the profession and discipline of individuals trained at each site used during the current reporting period.

2. Order of Forms:

- The EXP forms MUST be completed in order, otherwise drop-down menus will not populate correctly.
- You must complete and click ‘Save and Validate’ in EXP-1 before proceeding to EXP-2.

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

- The BPMH system will prepopulate saved information for each previously-used site (i.e., prior record) in the EXP-1 data table.
- You must indicate whether each previously-used site was used again during the current reporting period.

⚠️ Warning: Complete the EXP forms only for sites used to train individuals who appear on the INDGEN subform.
EXP-1: Training Site Setup

EXP-1 - Entering Site Name

Site Name:

Enter the name of any new sites used to train individuals during the current reporting period in the row labeled, “Enter the Site’s Name.” Next, click the “Add Record” button. New sites will be listed at the bottom of the data table, beneath all previously used sites (i.e., prior records). Repeat this process as necessary to enter the names of each NEW site used during the current reporting period.

Note: There is an option to delete both new and prior records on EXP-1. This option should only be used if the clinical sites will not be used in the future, or were erroneously entered. The delete option is not reversible (i.e. if the site was erroneously deleted, it will need to be re-entered again).
EXP-1 - Selecting Whether the Site was Used in the Current Period

Select Whether the Site was Used in the Current Reporting Period: Select whether each site was used during the reporting period by clicking on the drop-down menu in Column 2 and choosing one of the following options:

- Yes
- No

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

Note: If the clinical site was used in the current reporting period, then you must enter or update information for all subsequent columns in that row. If the clinical site was NOT used in the current reporting period, then the remaining columns are not required.

Note: If a clinical site was NOT used in the current reporting period, then it will not appear on EXP-2 as a dropdown option in Column 1.
Select Type of Site Used: Select the type of sites used to train individuals during the current reporting period by clicking on the drop-down menu under Block 1a and choosing from one of the following options.

- Academic institution
- Aerospace operations setting
- Assisted Living Community
- Community - based care programs for elderly mentally challenged individuals
- Day and home care programs (e.g. Home Health)
- Dentist Office
- Dental Services
- Geriatric ambulatory care and comprehensive units
- Hospice
- Independent Living Facility
- Local Government Office or Agency
- Mobile Clinic/Site
- National health association or affiliate
- Nursing Home
- Hospital - non profit
- Physician Office
- Senior Centers
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community care programs for elderly mentally challenged individuals
- Community Mental Health Center
- Critical Access Hospital
- Emergency Room
- Federal Government Office or Agency
- Geriatric Behavioral or Mental Health Units
- Hospital
- Indian Health Service (IHS) site
- Local health department
- Nurse Managed Health Clinics
- Hospital - community
- Hospital - for profit
- Acute care services
- Community - based organization
- Community Health Center (CHC)
- Community Behavioral Health Center
- Extended care facilities
- Federal and State Bureau of Prisons
- FQHC or look - alike
- Geriatric consultation services
- International nonprofit/nongovernmental organization
- Long - term Care Facility
- National health association
- Hospital - academic center
- Hospital - federal
- Other
- Other Oral Health Facility
- Program of All Inclusive Care for the Elderly
- Specialty clinics (e.g. mental health practice rehabilitation substance abuse clinic)
- State Health Department
Graduate Psychology Education

Note: If you select "Other" in Column 3, provide an explanation in the comments field and reference the site name.
Select Type of Setting Where the Site was Located: Select whether each site used to train individuals during the current reporting period was located in designated settings by clicking on the drop-down menu under Block 2 and choosing all that apply from the following options.

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

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

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

Note: To determine whether a site is located in a rural area, please visit HRSA’s Office of Rural Health Policy at http://datawarehouse.hrsa.gov/RuralAdvisor/ruralhealthadvisor.aspx
Select Type(s) of Partners/Consortia used to Offer Training at this Site

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

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

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

Note: If you select "Other" in Column 5, provide an explanation in the comments field and reference the site name.
**EXP-1 - Selecting Type(s) of Vulnerable Population**

<table>
<thead>
<tr>
<th>Select Type(s) of Vulnerable Population Served at this Site</th>
</tr>
</thead>
<tbody>
<tr>
<td>(7)</td>
</tr>
</tbody>
</table>

**Figure 55. EXP-1 - Selecting Type(s) of Vulnerable Population**

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

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

**Warning**: You may not select "None of the above" in combination with any other option.
**EXP-1 - Entering Site's geographical Data**

State:

City:

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

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

*Note: Four-digit zip code extension information can be accessed at [https://tools.usps.com/go/ZipLookupAction_input](https://tools.usps.com/go/ZipLookupAction_input). Do not enter invalid responses or placeholder entries. If you need assistance when entering the address information for your training sites, contact your Government Project Officer for guidance. Upon saving and validating the EXP-1 form, the city and state information will auto-populate.*
**EXP-1 - Selecting Whether the Training Site Implements Interprofessional Education and/or Practice**

<table>
<thead>
<tr>
<th>Select whether the training site implements interprofessional education and/or practice</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>(13)</td>
</tr>
</tbody>
</table>

**Figure 57. EXP-1 - Selecting Whether the Training Site Implements Interprofessional Education and/or Practice**

Select whether the training site implements interprofessional education and/or practice:

- Yes
- No
EXP-1 - Selecting any HHS Priorities Addressed at this Site

Select any HHS Priorities Addressed at this Site:
Using the dropdown menu in Column 14, select all that apply from the list of HHS priorities that were addressed at this site.

- This site offers integrated behavioral health services in a primary care setting
- This site offers opioid use treatment services
- This site offers telehealth services
- This site offers medication assisted treatment (MAT) for OUD
- This site offers substance use treatment services
- None of the above

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.
**EXP-2: Experiential Characteristics - Trainees by Profession/Discipline**

**EXP-2 - Selecting Training Program and Site Name**

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

<table>
<thead>
<tr>
<th>Type of Training Program</th>
<th>Site Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>(2) Block 1</td>
</tr>
</tbody>
</table>

### Figure 59. EXP-2 - Selecting Training Program and Site Name

**Type of Training Program:** Select a training program by clicking on the drop-down menu in Column 1 and choosing a practicum/field placement program. The options available will be programs marked as "Active" on the Training Program Setup Form.

**Site Name:**

Pair the selected training program with a training site by clicking on the drop-down menu in Column 2 (Block 1) and choosing one a site name. The options available will be sites that were marked as "Used" in the current reporting period on EXP-1.
Select Profession and Discipline of Individuals Trained:

Select the profession/discipline of individuals trained for each training program/site combination by clicking on the drop-down menu in Column 3. Be sure to select the disciplines of your principal trainees as well as any “other interprofessional” trainees who participated in team-based care at the clinical site. Repeat as necessary to identify all profession/discipline of all individuals trained at each site.

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- 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
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Behavioral Health - Psychology
- 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
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling
- Student - Diploma/Certificate
- 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 - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery
### Graduate Psychology Education

- Medicine - Other
- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Public health nurse
- Other - Audiology
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Midwife (non-nurse)
- Other - Optometry
- Other - Podiatry
- Other - Registered Dietician
- Other - Speech Therapy
- Physician Assistant
- Student - Physician Assistant
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Registered Nurse
- Other - Chiropractic
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Other - Unknown
• Public Health - Environmental Health
• Public Health - Health Policy & Management
• Public Health - Nutrition
• Student - CNS - Adult gerontology
• Student - CNS - Neonatal
• Student - CNS - Women’s health
• Student - Dental School
• Student - Graduate - Other
• Student - Graduate - Public Health
• Student - Home Health Aide
• Student - Medical School
• Student - NP - Adult gerontology
• Student - NP - Emergency care
• Student - NP - Geropsychiatric
• Student - NP - Pediatrics
• Student - Physical Therapy
• Student - Registered Nurse - BSN

• Public Health - Biostatistics
• Public Health - Epidemiology
• Public Health - Infectious Disease Control
• Public Health - Social & Behavioral Sciences
• Student - CNS - Family
• Student - CNS - Pediatrics
• Student - Dental Assistant
• Student - Graduate - Nursing Doctorate
• Student - Graduate - Other Behavioral Health
• Student - Graduate - Social Work
• Student - Law School
• Student - NP - Acute care adult gerontology
• Student - NP - Adult Psychiatric/Mental health
• Student - NP - Family
• Student - NP - Neonatal
• Student - NP - Women’s health
• Student - Post - high school / Pre-college
• Student - Undergraduate - Other

Note: Principal trainees are those who were directly or indirectly supported through your grant. For your grant program, these are the individuals reported on the INDGEN form. “Other Interprofessional” trainees are those individuals who trained at the same site on an interdisciplinary team with your principal trainees, but who did not received support from or have an association with your HRSA grant.

Note: Do not select professions/disciplines for faculty, site staff, or other non-trainees.
**EXP-2 - Entering # Trained in the Profession and Discipline**

<table>
<thead>
<tr>
<th></th>
<th>Enter # Trained in this Profession and Discipline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(4) Block 3</td>
</tr>
</tbody>
</table>

**Figure 61. EXP-2 - Entering # Trained in the Profession and Discipline**

**Enter # Trained in this Profession and Discipline:** For each row, enter the number of "Principal" trainees in the profession and discipline listed.

*Note: Principal trainees are those who were directly or indirectly supported through your grant. For your grant program, these are the individuals reported on the INDGEN form.*

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

*Note: Do not count faculty, site staff, or other non-trainees.*
**EXP-2 - Entering # of Other Interprofessional trainees who participated in team-based care**

Enter # of Other Trainees in this Profession and Discipline Who Participated in Interprofessional Team-based care

(5)
Block 8

Figure 62. EXP-2 - Entering # of Other Interprofessional trainees who participated in team-based care

**Enter # of Other Trainees in this Profession and Discipline Who Participated in Interprofessional Team-based care:** For each row, enter the number of all "Other Interprofessional" trainees in each profession and discipline listed.

- **Note:** Counts provided should be based on individuals NOT reported on INDGEN.

- **Note:** “Other Interprofessional” trainees are those individuals who trained at the same site on an interdisciplinary team with your principal trainees, but who did not receive support from or have an association with your HRSA grant.

- **Note:** Do not enter counts for faculty, site staff, or other non-trainees.
**Example 1. Principal Trainees ONLY (no interprofessional trainees):** In Example 1, students from the Psychology internship program did not participate in interprofessional experiences, so only principal trainees are being reported. The principal Psychology internship students trained at 3 different clinical training sites.

- At Site 1, there were 24 principal Psychology interns and no “other interprofessional” trainees (see row 1).
- At Site 2, there were 10 principal Psychology interns and no “other interprofessional” trainees (see row 2).
- At Site 3, there were 4 principal Psychology interns and no “other interprofessional” trainees (see row 3).
### EXP-2 - Adding Individuals Trained Example 2

<table>
<thead>
<tr>
<th>Type of Training Program</th>
<th>Site Name</th>
<th>Select Profession and Discipline of Individuals Trained</th>
<th>Enter # Trained in this Profession and Discipline</th>
<th>Enter # of Other Trainees in this Profession and Discipline Who Participated in Interprofessional Team-based care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internship</td>
<td>Student - Graduate - Psychology</td>
<td>Site 1</td>
<td>Student - Graduate - Psychology</td>
<td>24</td>
</tr>
<tr>
<td>Internship</td>
<td>Student - Graduate - Psychology</td>
<td>Site 1</td>
<td>Student - Medical School</td>
<td>0</td>
</tr>
<tr>
<td>Internship</td>
<td>Student - Graduate - Psychology</td>
<td>Site 1</td>
<td>Medicine - Psychiatry</td>
<td>0</td>
</tr>
<tr>
<td>Internship</td>
<td>Student - Graduate - Psychology</td>
<td>Site 2</td>
<td>Student - Graduate - Psychology</td>
<td>15</td>
</tr>
<tr>
<td>Internship</td>
<td>Student - Graduate - Psychology</td>
<td>Site 2</td>
<td>Student - Pharmacy School</td>
<td>0</td>
</tr>
</tbody>
</table>

#### Figure 64. EXP-2 - Adding Individuals Trained Example 2

**Example 2. Principal AND Interprofessional Trainees:** In Example 2, students from the Psychology internship program participated in interprofessional training experiences alongside other trainees.

- At Site 1, 24 principal Psychology interns trained alongside “other interprofessional” trainees: 2 medical students and 3 Psychiatry residents who were not associated with the HRSA grant (see rows 1-3).

- At Site 2, 15 principal Psychology interns trained alongside “other interprofessional” trainees: 4 pharmacy students who were not associated with the HRSA grant (see rows 4 and 5).
EXP-2 - Adding Individuals Trained Example 3

<table>
<thead>
<tr>
<th>Type of Training Program</th>
<th>Site Name</th>
<th>Select Profession and Discipline of Individuals Trained</th>
<th>Enter # Trained in this Profession and Discipline</th>
<th>Enter # of Other Trainees in this Profession and Discipline Who Participated in Interprofessional Team-based care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internship</td>
<td>Site 1</td>
<td>Student - Graduate - Psychology</td>
<td>24</td>
<td>10</td>
</tr>
<tr>
<td>Internship</td>
<td>Site 1</td>
<td>Medicine - Psychiatry</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Internship</td>
<td>Site 2</td>
<td>Student - Graduate - Psychology</td>
<td>10</td>
<td>22</td>
</tr>
<tr>
<td>Internship</td>
<td>Site 2</td>
<td>Student – Medical School</td>
<td>0</td>
<td>5</td>
</tr>
</tbody>
</table>

Figure 65. EXP-2 - Adding Individuals Trained Example 3

**Example 3. Principal AND Interprofessional Trainees:** In Example 3, students from the Psychology internship program participated in interprofessional training experiences alongside other trainees, including other Psychology interns who were not associated with the HRSA grant.

- At Site 1, 24 principal Psychology interns trained alongside “other interprofessional” trainees: 2 Psychiatry residents and 10 other Psychology interns who were not associated with the HRSA grant (see rows 1 and 2).

- At Site 2, 10 principal Psychology interns trained alongside “other interprofessional” trainees: 5 medical students and 22 other Psychology interns who were not associated with the HRSA grant (see rows 3 and 4).
Select Type of Site Used: Following the selection of a training site in EXP-1, the associated type of site will be automatically populated when the save and validate button is selected.

- Academic institution
- Aerospace operations setting
- Assisted Living Community
- Community-based care programs for elderly mentally challenged individuals
- Day and home care programs (e.g. Home Health)
- Dentist Office
- Dental Services
- Geriatric ambulatory care and comprehensive units
- Hospice
- Independent Living Facility
- Local Government Office or Agency
- Mobile Clinic/Site
- National health association or affiliate
- Nursing Home
- Hospital - non profit
- Physician Office
- Senior Centers
- Rural Health Clinic
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community care programs for elderly mentally challenged individuals
- Community Mental Health Center
- Critical Access Hospital
- Emergency Room
- Federal Government Office or Agency
- Geriatric Behavioral or Mental Health Units
- Hospital
- Indian Health Service (IHS) site
- Local health department
- Nurse Managed Health Clinics
- Hospital - community
- Hospital - for profit
- Other community health center (e.g.; free clinic)
- Acute care services
- Community - based organization
- Community Health Center (CHC)
- Community Behavioral Health Center
- Extended care facilities
- Federal and State Bureau of Prisons
- FQHC or look - alike
- Geriatric consultation services
- International nonprofit/nongovernmental organization
- Long - term Care Facility
- National health association
- Hospital - academic center
- Hospital - federal
- Other
- Other Oral Health Facility
- Program of All Inclusive Care for the Elderly
- Specialty clinics (e.g. mental health practice rehabilitation substance abuse clinic)
- State Health Department
Graduate Psychology Education

Health Resources and Services Administration
Bureau of Health Workforce

- Surgery Clinic
- Tribal Organization

- School-based clinic
- Residential Living Facility
- State Government Office or Agency
- Veterans Affairs Healthcare (e.g. VA Hospital or clinic)
- Veterans Affairs Hospital or clinic

- Tribal Health Department

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

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

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

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

CDE - Introduction

**Purpose of CDE forms:** The CDE forms are used to collect information about curriculum development and enhancement activities, including development status, delivery mode, course topic, etc. for courses offered during the current reporting period.

- CDE-1: Collects information about newly developed or enhanced courses offered during the current reporting period.
- CDE-2: Collects the number of individuals who participated in the CDE courses and training activities (grouped by course and primary discipline).

**Order of Forms:**

- The CDE forms MUST be completed in order, otherwise drop-down menus will not populate correctly.
- You must complete and click ‘Save and Validate’ in CDE-1 before proceeding to CDE-2.

**Pre-population of Prior Records:**

- The BPMH system will prepopulate saved information for each previously offered courses (i.e. “Prior Records”) in the CDE-1 data table.
- For “Prior Records” you must indicate whether the course was offered during the current reporting period.

**Creation of New Records:**

- The BPMH system will allow you to enter information for newly offered courses or training activities (i.e., “New Record”) in the CDE-1 data table. “New Records” will populate below all “Prior Records”
- For “New Records” you must indicate whether the course was offered during the current reporting period.
Detailed guidance on how to make the correct selections for the CDE forms be found below.

⚠️ Warning: CDE-1 must be completed and validated prior to beginning CDE-2. If you reach the CDE-2 form, and no drop-down selections appear, you have not validated both CDE-1 subform.
CDE-1: Course Development and Enhancement - Course Information
CDE-1 - Setup

To provide data about courses and other training activities that have been developed or enhanced through the grant or to provide updates about previously reported activities (those that have not yet been implemented), click "Yes" to the initial setup question. Clicking "Yes" will activate the form that will allow you to begin data entry.

| Have you used BHW resources or received in-kind support to develop or enhance a course or other training activity associated with the grant? | Yes (complete CDE-1 and CDE-2) No (Click Save and Validate to proceed to the next form) |

Figure 68. CDE-1 - Setup

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

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

⚠️ Warning: CDE-1 must be completed and validated prior to beginning CDE-2. If you reach the CDE-2 form, and no drop-down selections appear, you have not validated the CDE-1 subform.
CDE-1 - Entering the Name of Course/Training Activity

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

Name of Course or Training Activity:

Enter the name of each course or training activity that was developed or enhanced through the grant at any point during the entire project period. All previously reported courses will be saved in the data table from your past performance reports and labeled as “Prior Records.” To report on a NEW course, enter the course name in the “Add Course” box at the top of your screen. Click ‘Add Record’ after each entry and the new courses will appear at the bottom of the data table below, in column 1. Repeat this process to enter each course or training activity that was developed or enhanced through the grant separately.

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

<table>
<thead>
<tr>
<th>Select Type of Course or Training Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>(2) Block 2</td>
</tr>
</tbody>
</table>

Figure 70. CDE-1 - Selecting Type of Course or Training Activity

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

- Academic course
- Continuing Education courses
- Field placement/practicum
- Training/Workshop for health professions students fellows or residents
- Clinical rotation
- Faculty development programs or activities
- Grand rounds
CDE-1 - Selecting whether Course was Newly Developed or Enhanced

<table>
<thead>
<tr>
<th>Select whether Course or Training Activity was Newly Developed or Enhanced</th>
</tr>
</thead>
<tbody>
<tr>
<td>(3) Block 3</td>
</tr>
</tbody>
</table>

![Figure 71. CDE-1 - Selecting whether Course was Newly Developed or Enhanced](image)

**Select whether Course or Training Activity was Newly Developed or Enhanced:** Select whether each course or training activity identified in Column 1 (Block 1) was newly developed or enhanced by clicking on the drop-down menu in Column 3 (Block 3) and choosing one of the following options:

- Enhanced
- Newly developed

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

**Note:** Select 'Enhanced' for courses or training activities that were in existence prior to the grant and were modified or restructured through the grant.
Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Select Status of Development or Enhancements:

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

- Developed not yet implemented
- Implemented
- Under development

Figure 72. CDE-1 - Entering Development/Enhancement Status
Select Delivery Mode Used to Offer this Course or Training Activity: Select the primary mode used to deliver each course or training activity that was developed or enhanced through the grant by clicking on the drop-down menu in Column 8 (Block 6) and choosing one of the following options:

- Classroom-based
- Clinical Rotation
- Hybrid
- Distance learning (Online Webinar)
- Experiential/Field-based
- Simulation-based Training
Select Primary Topic Area: elect the primary topic area for each course or training activity that was developed or enhanced by clicking on the drop-down menu under Column 11 and choosing one of the following options:

- Behavioral Health - Primary Care Integration
- Behavioral Health - Suicide
- Chronic Disease - Alzheimer/Dementia
- Clinical Training - Community-Based Collaboration
- Clinical Training - Healthcare delivery systems
- Clinical Training - Public Health
- Clinical Training - Skills - Communications Skills
- Clinical Training - Technology - Other
- Infectious Disease - HIV/AIDS
- Population - Maternal Child Health
- Population - Veterans Health
- Setting - Medically-Underserved Communities
- Setting - Other
- Behavioral Health - Substance Abuse - General
- Behavioral Health - Treatment
- Chronic Disease - Management
- Clinical Training - Cultural Competency/Health Disparities
- Clinical Training - Interprofessional education/team-based training
- Clinical Training - Quality Improvement/Patient Safety
- Clinical Training - Skills - Leadership and Management
- Clinical Training - Telehealth
- Infectious Disease - Other
- Population - Minority Health
- Population - Womens Health
- Setting - Primary Care
- Other-Topic Not Listed
- Behavioral Health - Substance Abuse - Opioids
- Behavioral Health - Other
- Chronic Disease - Other
- Clinical Training - Evidence-based Practice
- Clinical Training - Oral Health
- Clinical Training - Research
- Clinical Training - Technology - Simulation-based training
- Clinical Training - Unspecified
- Population - Geriatric Health
- Population - Rural Health
- Population - Other
- Setting - Rural
Note: Clinical Training-Public health incorporates the following topic areas: health promotion and disease prevention, health policy/advocacy, emergency preparedness and response, environmental health, nutrition, epidemiology, data collection and analysis etc. Clinical Training - Technology - Other incorporates the following topic areas: telemedicine, informatics, electronic medical records etc.

Note: You may only choose one selection for primary topic area.
Select Whether the Course or Training Activity was Offered in the Current Reporting Period:

Select whether the course or training activity that was developed or enhanced has been offered, re-offered or not offered in the current reporting period by clicking on the drop-down menu under Column 12. Listed below is guidance on which option to select.

- For “Prior Records”, courses that have been ‘Implemented’ the available options will include:
  - Not offered in the current reporting period; or
  - Re-offered in the current reporting period

- For “Prior Records”, courses that have been ‘Developed not yet implemented’ or ‘Under development’ the available options will include:
  - Not offered in the current reporting period; or
  - Offered in the current reporting period. Select “offered” if this is the first time the course has been implemented.

- For “New Records”, courses that have been ‘Implemented’, the available option will be:
  - Offered in the current reporting period.
For “New Records”, courses that are ‘Developed not yet implemented’ or ‘Under development’, the available option will be:

- Not offered in the current reporting period.

- Offered
- Not Offered
- Re-offered

**Note:** Information on courses that were ‘Offered’ or ‘Re-offered’ will carry over onto CDE-2 form.

To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.
CDE-2: Course Development and Enhancement - Trainees by Profession/Discipline
CDE-2 - Adding Courses and Profession/Disciplines

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

<table>
<thead>
<tr>
<th>Name of Course or Training Activity</th>
<th>Profession and Discipline of Individuals Trained</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Block 1</td>
<td>(2) Block 7</td>
</tr>
</tbody>
</table>

**Name of Course or Training Activity:**

Begin by selecting the name of the course or training activity from the dropdown menu at the top of the screen. Available course names will prepopulate from the CDE-1 form. Only the names of courses that were marked as "Offered" or “Re-offered” from CDE-1 form will appear as options in the drop-down menu.

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

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Behavioral Health - Psychology
- Dentistry - Endodontic Dentistry
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry
Graduate Psychology Education

- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Medicine - Allergy and Immunology
- Medicine - Dermatology
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Plastic Surgery
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Community health nursing
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult gerontology
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse administrator
- Nursing - Nurse midwife
- Nursing - Registered Nurse
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Medical Assistant
- Other - Office/Support Staff
- Other - Unknown

- Dentistry - Orthodontic Dentistry
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery - Integrated
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Psychiatric/Mental health

- Dentistry - Radiology Dentistry
- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - Alternative/Complementary Nursing
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - CNS - Women's health and pediatrics
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - NP - Women's health
- Nursing - Nurse informaticist
- Nursing - Public health nurse
- Other - Chiropractor
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Nutritionist
- Other - Respiratory Therapy
- Nursing - Nurse Assistant/Patient Care Associate (PCA)
- Student - 9 - 12 (secondary)
Health Resources and Services Administration
Bureau of Health Workforce

Graduate Psychology Education

- Student - Certified Nursing Assistant
- Student - Alternative/Complementary Nursing
- Student - CNS - Family
- Student - CNS - Pediatrics
- Student - CNS - Women's health and pediatrics
- Student - Dental Hygiene
- Student - Graduate - Allied Health
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Graduate - Social Work
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - Midwife (non - nurse)
- Student - NP - Adult
- Student - NP - Child/Adolescent Psychiatric/Mental Health
- Student - NP - Family Psychiatric/Mental Health
- Student - NP - Other advanced nurse specialists
- Student - NP - Women's health
- Student - Nurse Educator
- Student - Nursing Informatics
- Student - Pharmacy School
- Other - Home Health Aide
- Student - Registered nurse (RN)
- Student - Speech Therapy
- Student - Undergraduate - Other
- Student - Undergraduate - Radiological Technician
- Nursing - Nurse educator
- Nursing - Other (e.g. CNA PCA)
- Nursing - Researcher/Scientist
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Midwife (non - nurse)
- Other - Profession Not Listed
- Other - Allied Health
- Student - Chiropractic School
- Student - CNL - Generalist
- Student - CNS - Geropsychiatric
- Student - CNS - Psychiatric/Mental health
- Student - Community Health Nursing
- Student - Dental School
- Student - Graduate - Clinical Laboratory Services
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Home Health Aide
- Student - Medical Assistant
- Student - NP - Acute care adult gerontology
- Student - NP - Adult gerontology
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Pediatrics
- Student - Nurse Administrator
- Student - Nurse Midwife

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- Student - CNS - Adult gerontology
- Student - CNS - Neonatal
- Student - CNS - Women's health
- Student - Dental Assistant
- Student - Diploma/Certificate
- Student - Graduate - Nursing Doctorate
- Student - Graduate - Other Behavioral Health
- Student - Graduate - Radiological Assistant
- Student - K - 8 (primary)
- Student - Medical School
- Student - NP - Acute care pediatric
- Student - NP - Adult Psychiatric/Mental health
- Student - NP - Family
- Student - NP - Neonatal
- Student - NP - Psychiatric/Mental health
- Student - Nurse Anesthetist
- Student - Nurse Researchers/Scientists
- Student - Optometry
- Student - Physician Assistant
- Student - Public Health Nurse
- Student - Rehabilitation Therapy
- Student - Undergraduate - Clinical Laboratory Services
- Student - Undergraduate - Radiological Assistant
- Student - Podiatry School
• Student - Occupational Therapy
• Student - Physical Therapy
• Student - Post - high school / Pre - college
• Student - Registered Nurse - BSN
• Student - Undergraduate - Allied Health
• Student - Undergraduate - Public Health
• Student - Unknown

Note: Only the names of courses/training activities that were marked as "Offered" or "Re-offered" in the CDE-1 form will appear as options in the drop-down menu.
CDE-2 - Entering # Trained in the Profession and Discipline

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

Enter # Trained in this Profession and Discipline

(3)
Block 7

Figure 77. CDE-2 - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline:

For each course, enter the number of participants from the professions/disciplines you have indicated under Column 3 (Block 7). Repeat this process to capture the profession and discipline of all individuals trained in each course or training activity during the current reporting period.

Once you have completed Columns 1 through 3 for all rows, click ‘Save and Validate’ to automatically populate Columns 4 through 9 with responses from CDE-1.
CDE-2 - Selecting Type of Course or Training Activity

Select Type of Course or Training Activity:

Column 4 (Block 2), Type of Course or Training Activity will automatically populate with response from CDE-1 form.

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

Figure 78. CDE-2 - Selecting Type of Course or Training Activity
Select whether Course or Training Activity was Newly Developed or Enhanced:

Column 5 (Block 3), selection of whether the Course or Training Activity was Newly Developed or Enhanced will automatically populate with response from CDE-1 form.

- Enhanced
- Newly developed

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

Note: Select 'Enhanced' for courses or training activities that were in existence prior to the grant and were modified or restructured through the grant.
Select Delivery Mode Used to Offer this Course or Training Activity:

Column 7 (Block 6), Delivery mode will automatically populate with response from CDE-1 form.

- Classroom-based
- Clinical Rotation
- Hybrid
- Distance learning (Online Webinar)
- Experiential/Field-based
- Simulation-based Training

Figure 80. CDE-2 - Selecting Delivery Mode
Select Primary Topic Area: Column 8, Primary Topic Area will automatically populate with response from CDE-1 form.

- Behavioral Health - Primary Care Integration
- Behavioral Health - Suicide
- Chronic Disease - Alzheimer/Dementia
- Clinical Training - Community-Based Collaboration
- Clinical Training - Healthcare delivery systems
- Clinical Training - Public Health
- Clinical Training - Skills - Communications Skills
- Clinical Training - Technology - Other
- Infectious Disease - HIV/AIDS
- Population - Maternal Child Health
- Population - Veterans Health
- Setting - Medically-Underserved Communities
- Setting - Other
- Behavioral Health - Substance Abuse - General
- Behavioral Health - Treatment
- Chronic Disease - Management
- Clinical Training - Cultural Competency/Health Disparities
- Clinical Training - Interprofessional education/team-based training
- Clinical Training - Quality Improvement/Patient Safety
- Clinical Training - Skills - Leadership and Management
- Clinical Training - Telehealth
- Infectious Disease - Other
- Population - Minority Health
- Population - Womens Health
- Setting - Primary Care
- Other-Topic Not Listed
- Behavioral Health - Substance Abuse - Opioids
- Behavioral Health - Other
- Chronic Disease - Other
- Clinical Training - Evidence-based Practice
- Clinical Training - Oral Health
- Clinical Training - Research
- Clinical Training - Technology - Simulation-based training
- Clinical Training - Unspecified
- Population - Geriatric Health
- Population - Rural Health
- Population - Other
- Setting - Rural
Select Whether the Course or Training Activity was Offered in the Current Reporting Period:

Column 9, selection of whether the course was offered will automatically populate with response from CDE-1 form.

- Offered
- Not Offered
- Re-offered

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

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.

⚠️ 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: The FD-2a and FD-2b subforms will only appear if "Unstructured 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.

Program Name:

- Enter the name of each NEW faculty development program coordinated and/or supported through the grant during the annual reporting period
- Select “Add Record”.
- Repeat this process as necessary.

Warning: If a previously completed program (prior record) is being offered again with a new cohort, it will need to be re-created as a new record.
Select Program Status in the Current Reporting Period: Select the status of each faculty development program at the end of the current reporting period by clicking on the drop-down menu under Block 1a and choosing one of the following options:

- Complete
- Ongoing

Note: **Ongoing Programs**: A faculty development program that did not conclude by **June 30, 2019**

Note: **Completed Programs**: A faculty development program that concluded at some point during the current reporting period (i.e. **July 01, 2018 - June 30, 2019**).
**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.

<table>
<thead>
<tr>
<th>Select Whether this was a Degree Bearing Program</th>
<th>For Degree-bearing Programs</th>
<th>For Non-Degree Bearing Program, Enter Length of Training Program in Clock Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>(2) Block 2</td>
<td>(3) Block 2a</td>
<td>(5) Block 3</td>
</tr>
<tr>
<td></td>
<td>(4) Block 2b</td>
<td></td>
</tr>
</tbody>
</table>

**Figure 85. FD-1a - Entering Program Information for Degree/Non-Degree Programs**

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

- Yes
- No

**For Degree-bearing Programs: Select Type of Degree Offered:**

- 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.

- AA
- Bachelor's Degree Not Otherwise Specified
- Certificate
- AS
- BPH
- BSN
- BA
- BS
- BSW
For Degree-bearing Programs: Select Primary Focus Area:

- If you selected “No” in Column 2 (Block 2), select “N/A” in Column 4 (Block 2b).
- If you selected “Yes” in Column 2 (Block 2), select the primary focus area of the degree-bearing faculty development program by clicking on the drop-down menu in Column 4 (Block 2b) and choosing one of the options below:

Dentistry - Dental Assistant
Dentistry - Endodontic Dentistry
Dentistry - Oral Surgery Dentistry
Dentistry - Pathology Dentistry
Dentistry - Prosthodontic Dentistry
Nursing - BS/BSN Completion
Nursing - CNS - Geropsychiatric
Dentistry - Dental Hygiene
Dentistry - General Dentistry
Dentistry - Orthodontic Dentistry
Dentistry - Pediatric Dentistry
Dentistry - Public Health Dentistry
Nursing - CNS - Adult gerontology
Nursing - CNS - Neonatal
Dentistry - Dental Hygiene/Public Health
Dentistry - General Dentistry/Public Health
Dentistry - Other
Dentistry - Periodontic Dentistry
Dentistry - Radiology Dentistry
Nursing - CNS - Family
Nursing - CNS - Pediatrics
<table>
<thead>
<tr>
<th>Discipline</th>
<th>Specialization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing</td>
<td>CNS - Psychiatric/Mental health</td>
</tr>
<tr>
<td></td>
<td>NP - Acute care adult gerontology</td>
</tr>
<tr>
<td></td>
<td>NP - Adult gerontology</td>
</tr>
<tr>
<td></td>
<td>NP - Emergency care</td>
</tr>
<tr>
<td></td>
<td>NP - Geropsychiatric</td>
</tr>
<tr>
<td></td>
<td>NP - Pediatrics</td>
</tr>
<tr>
<td></td>
<td>Nurse Anesthetist</td>
</tr>
<tr>
<td></td>
<td>Researchers/Scientists</td>
</tr>
<tr>
<td></td>
<td>Pre-licensure</td>
</tr>
<tr>
<td>Public Health</td>
<td>Biostatistics</td>
</tr>
<tr>
<td></td>
<td>Epidemiology</td>
</tr>
<tr>
<td></td>
<td>Injury Control &amp; Prevention</td>
</tr>
<tr>
<td></td>
<td>Social &amp; Behavioral Sciences</td>
</tr>
<tr>
<td></td>
<td>CNS - Women’s health</td>
</tr>
<tr>
<td></td>
<td>NP - Acute care pediatric</td>
</tr>
<tr>
<td></td>
<td>NP - Adult Psychiatric/Mental health</td>
</tr>
<tr>
<td></td>
<td>NP - Family</td>
</tr>
<tr>
<td></td>
<td>NP - Neonatal</td>
</tr>
<tr>
<td></td>
<td>NP - Women’s health</td>
</tr>
<tr>
<td></td>
<td>Nurse Educator</td>
</tr>
<tr>
<td></td>
<td>Nursing Assistant</td>
</tr>
<tr>
<td></td>
<td>Public Health Nurse</td>
</tr>
<tr>
<td></td>
<td>Disease Prevention &amp; Health Promotion</td>
</tr>
<tr>
<td></td>
<td>Health Policy &amp; Management</td>
</tr>
<tr>
<td></td>
<td>Maternal and Child Health</td>
</tr>
<tr>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Home Health Aide</td>
</tr>
<tr>
<td></td>
<td>NP - Adult</td>
</tr>
<tr>
<td></td>
<td>NP - Child/Adolescent Psychiatric/Mental Health</td>
</tr>
<tr>
<td></td>
<td>NP - Family Psychiatric/Mental Health</td>
</tr>
<tr>
<td></td>
<td>NP - Other advanced nurse specialty</td>
</tr>
<tr>
<td></td>
<td>Nurse Administrator</td>
</tr>
<tr>
<td></td>
<td>Nurse Midwife</td>
</tr>
<tr>
<td></td>
<td>Nursing Informatics</td>
</tr>
<tr>
<td></td>
<td>Other - Midwife</td>
</tr>
<tr>
<td></td>
<td>Environmental Health</td>
</tr>
<tr>
<td></td>
<td>Infectious Disease Control</td>
</tr>
<tr>
<td></td>
<td>Nutrition</td>
</tr>
</tbody>
</table>

**For Non-Degree Bearing Program, Enter Length of Training Program in Clock Hours:**

- If you selected “No” in Column 2 (Block 2), enter the length of each non-degree bearing faculty development program in clock hours in the textbox in Column 5 (Block 3).
- If you selected “Yes” in Column 2 (Block 2), enter a zero (“0”) in Column 5, (Block 3).
FD-1a - Entering % of Time Spent Developing Competencies in Different Roles

<table>
<thead>
<tr>
<th>Clinician</th>
<th>Administrator</th>
<th>Educator</th>
<th>Researcher</th>
</tr>
</thead>
<tbody>
<tr>
<td>(6) Block 5</td>
<td>(7) Block 5</td>
<td>(8) Block 5</td>
<td>(9) Block 5</td>
</tr>
</tbody>
</table>

Figure 86. 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 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 in each 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 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 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%.
FD-1a - Entering # of Faculty Who Completed the Program

Enter # of Faculty Who Completed the Program:

- **Completed Programs**: Enter the number of faculty who completed each program during the annual reporting period in the textbox under Block 6.
- **Ongoing Programs**: Enter a zero (“0”) in the textbox in Column 10 (Block 6).
Select whether any Faculty Received any type of BHW-Funded Financial Award during the Training Program

<table>
<thead>
<tr>
<th>(11)</th>
<th>Block 7</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Figure 88. FD-1a - Selecting whether Faculty Received BHW-Funded Financial Award

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

- Yes
- No

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

To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.
FD-1b: Faculty Development - Faculty Trained By Profession/Discipline

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

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

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Profession and Discipline of Faculty Trained</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>(2) Block 4</td>
</tr>
</tbody>
</table>

![Figure 89. FD-1b - Adding Profession and Discipline for Structured Programs](image)

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

**Profession and Discipline of Faculty Trained:**

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

- Behavioral Health - Clinical Psychology
- Behavioral Health - Other Psychology
- Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling
- Dentistry - General Dentistry
- Dentistry - Dental Hygiene
- Behavioral Health - Clinical Social Work
- Behavioral Health - Marriage and Family Therapy
- Dentistry - Endodontic Dentistry
- Dentistry - Dental Assistant
- Behavioral Health - Counseling Psychology
- Behavioral Health - Pastoral/Spiritual Care
- Behavioral Health - Psychology
- Dentistry - Oral Surgery Dentistry
Health Resources and Services Administration
Bureau of Health Workforce

Graduate Psychology Education

- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Medicine - Emergency Medicine
- Medicine - General Preventive Medicine
- Nursing - NP - Family
- Nursing - Registered Nurse
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Home Health Aide
- Medicine - Colon and Rectal Surgery
- Medicine - Dermatology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Occupational Medicine
- Medicine - Neurological Surgery
- Nursing - CNS - Adult gerontology
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Medicine - Plastic Surgery
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family Psychiatric/Mental Health
- Medicine - Radiation Oncology
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery
- Medicine - Urology
- Nursing - Alternative/Complementary Nursing
- Other - Facility Administrator
- Nursing - CNS - Pediatrics
- Nursing - CNS - Women’s health and pediatrics
- Other - Respiratory Therapy
- Nursing - NP - Psychiatric/Mental health
- Dentistry - Orthodontic Dentistry
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Nursing - CNS - Psychiatric/Mental health
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Other - Community Health Worker
- Medicine - Aerospace Medicine
- Medicine - Medical Genetics
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Profession Not Listed
- Medicine - Preventive Medicine/Family Medicine
- Nursing - CNL - Generalist
- Nursing - CNS - Family
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Nursing - NP - Acute care adult gerontology
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Aerospace Medicine
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Nurse informant
Health Resources and Services Administration
Bureau of Health Workforce

- Nursing - Other (e.g. CNA PCA)
- Other - Midwife (non-nurse)
- Medicine - Vascular Surgery - Integrated
- Other - Allied Health
- Nursing - CNS - Neonatal
- Other - Health Informatics/Health Information Technology
- Nursing - Community health nursing
- Nursing - NP - Neonatal
- Nursing - Nurse Assistant/Patient Care Associate (PCA)
- Nursing - Public health nurse
- Other - Nutritionist

Annual Performance Report
Academic Year 2018-2019

- Nursing - Researcher/Scientist
- Other - Chiropractor
- Other - First Responder/EMT
- Other - Medical Assistant
- Nursing - NP - Acute care pediatric
- Nursing - NP - Pediatrics
- Nursing - Nurse midwife
- Other - Lay and Family Caregiver
- Other - Veterinary Medicine
FD-1b - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline

(3)
Block 4

Figure 90. FD-1b - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline: Enter the number of faculty members in each profession/discipline who participated in the faculty development program during the current reporting period in the textbox in Column 3 (Block 4).

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

Activity Name:

- Enter the name of each new faculty development activity coordinated and/or supported through the grant during the current reporting period in Column 1 (Block 1).
- Select “Add Record”
- Repeat this process as necessary.

<table>
<thead>
<tr>
<th>Activity Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
</tr>
</tbody>
</table>

Figure 91. FD-2a - Entering Faculty Development 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.

<table>
<thead>
<tr>
<th>Select Type of Faculty Development Activity Offered</th>
<th>For Courses or Workshops</th>
<th>Select Whether Activity is Accredited for Continuing Education Credit</th>
<th>Select Whether Attendance was to Acquire or Maintain Professional Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td>(2) Block 8</td>
<td>(3) Block 8a</td>
<td></td>
<td>(4) Block 8b</td>
</tr>
</tbody>
</table>

**Figure 92. FD-2a - Selecting Type of Faculty Development Activity Offered**

**Select Type of Faculty Development Activity Offered:** Select the type of faculty development activity supported and/or coordinated through the grant during the 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
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**

**Enter Duration of Training Activity in Clock Hours**

(5)  
Block 9

[Figure 93. 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.
Select Delivery Mode Used to Offer Training Activity

(6)
Block 10

Figure 94. FD-2a - Selecting Delivery Mode

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

- Classroom-based
- Clinical Rotation
- Real-time/Live distance learning
- Archived/Self-paced distance learning
- Hybrid
- Other
FD-2a - Selecting Faculty Role(s)

Select the Faculty Role(s) Addressed at Training Activity: Select the 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.

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

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 as necessary.

- Behavioral Health - Clinical Psychology
- Behavioral Health - Other Psychology
- Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling
- Dentistry - General Dentistry
- Dentistry - Dental Hygiene
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Behavioral Health - Clinical Social Work
- Behavioral Health - Marriage and Family Therapy
- Dentistry - Endodontic Dentistry
- Dentistry - Dental Assistant
- Dentistry - Orthodontic Dentistry
- Dentistry - Pediatric Dentistry
- Behavioral Health - Counseling Psychology
- Behavioral Health - Pastoral/Spiritual Care
- Behavioral Health - Psychology
- Dentistry - Oral Surgery Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry
Graduate Psychology Education

- Medicine - Emergency Medicine
- Medicine - General Preventive Medicine
- Nursing - NP - Family
- Nursing - Registered Nurse
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Home Health Aide
- Medicine - Colon and Rectal Surgery
- Medicine - Dermatology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Occupational Medicine
- Medicine - Neurological Surgery
- Nursing - CNS - Adult gerontology
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Medicine - Plastic Surgery
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family Psychiatric/Mental Health
- Medicine - Radiation Oncology
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery
- Medicine - Urology
- Nursing - Alternative/Complementary Nursing
- Other - Facility Administrator
- Nursing - CNS - Pediatrics
- Nursing - CNS - Women’s health and pediatrics
- Other - Respiratory Therapy
- Nursing - NP - Psychiatric/Mental health
- Nursing - Other (e.g. CNA PCA)

- Dentistry - Public Health Dentistry
- Nursing - CNS - Psychiatric/Mental health
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Other - Community Health Worker
- Medicine - Aerospace Medicine
- Medicine - Medical Genetics
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Profession Not Listed
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Public Health
- Nursing - CNL - Generalist
- Nursing - CNS - Family
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Nursing - NP - Acute care adult gerontology
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Aerospace Medicine
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Nurse informaticist
- Medicine - Vascular Surgery - Integrated
- Other - Allied Health

- Dentistry - Radiology Dentistry
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Family Medicine
- Medicine - Psychiatry
- Medicine - Allergy and Immunology
- Medicine - Anesthesiology
- Medicine - Obstetrics and Gynecology
- Medicine - Occupational Medicine
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Nuclear Medicine
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Women's health
- Nursing - Home Health Aide
- Nursing - NP - Adult
- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Medicine - Preventive Medicine/Pediatrics
- Nursing - Nurse administrator
- Medicine - Surgery - General
- Medicine - Thoracic Surgery - Integrated
- Nursing - Researcher/Scientist
- Other - Chiropractor
| Other - Midwife (non - nurse) | Nursing - CNS - Neonatal |
| Other - Health Informatics/Health Information Technology | Nursing - Community health nursing |
| Nursing - NP - Neonatal | Nursing - Nurse Assistant/Patient Care Associate (PCA) |
| Nursing - NP - Pediatrics | Nursing - Nurse midwife |
| Other - Lay and Family Caregiver | Other - Veterinary Medicine |
| Other - First Responder/EMT | Other - Medical Assistant |
| Nursing - NP - Acute care pediatric | Nursing - NP - Pediatrics |
| Nursing - Nurse midwife | Other - Lay and Family Caregiver |
| Other - Veterinary Medicine | |
FD-2b - Entering # Trained in the Profession and Discipline

Enter # Trained in the Profession and Discipline

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(3)</td>
</tr>
<tr>
<td>Block 12</td>
</tr>
</tbody>
</table>

Figure 97. FD-2b - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline: For each faculty development activity, enter the number of faculty members in each profession/discipline who participated in the program in the textbox in Column 3 (Block 12).

💡 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.
Continuing Education Activities—CE Subforms

CE - Introduction

1. Purpose: The CE subforms are used to characterize continuing education course characteristics and trainees.
   - The CE-1 form captures information about the continuing education courses and training activities offered in the current reporting period.
   - The CE-2 subform collects information about the professions and disciplines of individuals trained in the offered CE courses or training activities.

2. Order of Subforms:
   - CE subforms MUST be completed in order, otherwise drop-down menus will not prepopulate correctly.
   - You must complete and ‘Save and Validate’ CE-1 first before proceeding to CE-2.

3. Pre-population of Prior Records (CE Courses) reported previously:
   - THE BPMH SYSTEM WILL NO LONGER PREPOPULATE DATA INTO THE CE-1 SUBFORM.
   - Each reporting period, the CE-1 form will initially appear blank.
   - The ONLY courses or activities to be entered are those that were offered during the current reporting period.
   - To view data submitted in the previous reporting period, click on the "View Prior Data" link.
CE-1: Continuing Education - Course Characteristics and Content

CE-1 - Setup

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

![Figure 98. CE-1 - Setup](image)
**Course Title**: Enter the name of each NEW course offered during the current reporting period by typing the name in the textbox in Column 1 (Block 1).

**Note**: Course titles are limited to 200 characters.
CE-1 - Selecting Whether Course is Approved for Continuing Education Credit

Select Whether Course is Approved for Continuing Education Credit

Figure 100. CE-1 - Selecting Whether Course is Approved for Continuing Education Credit

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

- Yes
- No

Reference: Refer to the glossary for a definition of continuing education course accreditation.
## CE-1 - Entering Course Duration

<table>
<thead>
<tr>
<th>Enter the Duration of the Course in Clock Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>(3) Block 3</td>
</tr>
</tbody>
</table>

**Figure 101. CE-1 - Entering Course Duration**

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

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

*Note: For instructional activities offered via distance learning, enter the intended duration of each activity in Column 3 (Block 3).*
CE-1 - Entering # of Times Course was Offered

Figure 102. CE-1 - Entering # of Times Course was Offered

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

Note: For instructional activities offered via distance learning on an ongoing basis, enter 999.
Select Delivery Mode Used to Offer Course: Select the primary delivery mode used to offer each course during the annual reporting period by clicking on the drop-down menu in Column 5 (Block 5) and choosing one of the following options:

- Archived/Self-paced Distance Learning
- Classroom-based
- Hybrid
- Real-time/Live distance learning
CE-1 - Selecting Type(s) of Partnership(s)

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

- Academic department - outside the institution
- Alzheimer’s Disease Resource Centers
- Community - based health center (e.g.; free clinic)
- Day and home care programs (i.e. Home Health)
- Federal Government - AHRQ
- Federal Government - IHS
- Federal Government - Other HHS Agency/Office
- Federal Government - Veterans Affairs
- Geriatric Behavioral or Mental Health Units
- Health department - State
- Health insurance/Healthcare Provider Group (e.g.; PPO/HMO)
- Hospital
- No partners/consortia used
- Nurse Managed Health Clinics
- Private/For - profit organization
- Senior Center
- Academic department - within the institution
- Ambulatory practice sites
- Community Health Center (CHC)
- Educational institution (Grades K - 12)
- Federal Government - CDC
- Federal Government - NIH
- Federal Government - Other HRSA Program
- FQHC or look-alike
- Geriatric consultation services
- Health department - Tribal
- Health policy center
- Local Government
- Nonprofit organization (faith - based)
- Nursing Home
- Alzheimer’s Association/Chapters
- Area Agencies on Aging
- Community Mental Health Center
- Federal Government - ACL
- Federal Government - FDA
- Federal Government - Other
- Federal Government - SAMHSA
- Geriatric ambulatory care and comprehensive units
- Health department - Local
- Health disparities research center
- Hospice
- Long - Term Care Facility
- Nonprofit organization (non - faith based)
- Other
- Quality improvement organization
Health Resources and Services Administration
Bureau of Health Workforce

- Veterans Affairs Healthcare (e.g. VA hospital)
- Professional Associations
- State Governmental Programs
- Tribal Organization

Warning: You may not select "No partners/consortia used" in combination with any other option.
## CE-1 - Entering Employment Location Data for Individuals Trained

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

<table>
<thead>
<tr>
<th>Select Whether Employment Location Data are Available for Individuals Trained</th>
<th>Enter # of Individuals Trained by Employment Location (not mutually exclusive)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Primary Care Setting</td>
</tr>
<tr>
<td>(8) Block 9</td>
<td>(9) Block 9a</td>
</tr>
</tbody>
</table>

**Figure 105. CE-1 - Entering Employment Location Data for Individuals Trained**

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

- Yes
- No

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

- If Yes, In Column 9 (Block 9a), enter the number of individuals who are employed in a primary care setting
- If No, Then Type “N/A” for Columns 9, 10, and 11 (Blocks 9a, 9b, and 9c).

Enter # of Individuals Trained by Employment Location (not mutually exclusive): Medically Underserved Community:
If Yes, In Column 10 (Block 9b), enter the number of individuals who are employed in a medically-underserved community
If No, Then Type “N/A” for Columns 9, 10, and 11 (Blocks 9a, 9b, and 9c).

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

If Yes, In Column 11 (Block 9c), enter the number of individuals who are employed in a primary care setting
If No, Then Type “N/A” for Columns 9, 10, and 11 (Blocks 9a, 9b, and 9c).

Note: Individuals can be counted multiple times if their place of employment is located in more than one type of designated setting. As a result, counts provided under Blocks 9a, 9b and 9c are not meant to be mutually exclusive.
CE-1 - Selecting Primary Topic Area

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

<table>
<thead>
<tr>
<th>Topic Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioral Health - Primary Care Integration</td>
</tr>
<tr>
<td>Behavioral Health - Suicide</td>
</tr>
<tr>
<td>Chronic Disease - Alzheimer/Dementia</td>
</tr>
<tr>
<td>Clinical Training - Community-Based Collaboration</td>
</tr>
<tr>
<td>Clinical Training - Healthcare delivery systems</td>
</tr>
<tr>
<td>Clinical Training - Public Health</td>
</tr>
<tr>
<td>Clinical Training - Skills - Communications Skills</td>
</tr>
<tr>
<td>Clinical Training - Technology - Other</td>
</tr>
<tr>
<td>Infectious Disease - HIV/AIDS</td>
</tr>
<tr>
<td>Population - Maternal Child Health</td>
</tr>
<tr>
<td>Population - Veterans Health</td>
</tr>
<tr>
<td>Setting - Medically-Underserved Communities</td>
</tr>
<tr>
<td>Behavioral Health - Substance Abuse - General</td>
</tr>
<tr>
<td>Behavioral Health - Treatment</td>
</tr>
<tr>
<td>Chronic Disease - Management</td>
</tr>
<tr>
<td>Clinical Training - Cultural Competency/Health Disparities</td>
</tr>
<tr>
<td>Clinical Training - Interprofessional education/team-based training</td>
</tr>
<tr>
<td>Clinical Training - Quality Improvement/Patient Safety</td>
</tr>
<tr>
<td>Clinical Training - Skills - Leadership and Management</td>
</tr>
<tr>
<td>Clinical Training - Telehealth</td>
</tr>
<tr>
<td>Infectious Disease - Other</td>
</tr>
<tr>
<td>Population - Minority Health</td>
</tr>
<tr>
<td>Population - Womens Health</td>
</tr>
<tr>
<td>Setting - Primary Care</td>
</tr>
<tr>
<td>Other-Topic Not Listed</td>
</tr>
<tr>
<td>Behavioral Health - Substance Abuse - Opioids</td>
</tr>
<tr>
<td>Behavioral Health - Other</td>
</tr>
<tr>
<td>Chronic Disease - Other</td>
</tr>
<tr>
<td>Clinical Training - Evidence-based Practice</td>
</tr>
<tr>
<td>Clinical Training - Oral Health</td>
</tr>
<tr>
<td>Clinical Training - Research</td>
</tr>
<tr>
<td>Clinical Training - Technology - Simulation-based training</td>
</tr>
<tr>
<td>Clinical Training - Unspecified</td>
</tr>
<tr>
<td>Population - Geriatric Health</td>
</tr>
<tr>
<td>Population - Rural Health</td>
</tr>
<tr>
<td>Population - Other</td>
</tr>
<tr>
<td>Setting - Rural</td>
</tr>
</tbody>
</table>
Note: Clinical Training-Public health incorporates the following topic areas: health promotion and disease prevention, health policy/advocacy, emergency preparedness and response, environmental health, nutrition, epidemiology, data collection and analysis etc. Clinical Training - Technology - Other incorporates the following topic areas: telemedicine, informatics, electronic medical records etc.

To Complete the Form: Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.
# CE-2: Continuing Education - Individuals Trained by Profession/Discipline

## CE-2 - Selecting Profession and Discipline of Individuals Trained

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Select Profession and Discipline of Individuals Trained</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Block 1</td>
<td>(2) Block 8</td>
</tr>
</tbody>
</table>

![Figure 107. CE-2 - Selecting Profession and Discipline of Individuals Trained](image-url)

**Course Title:** Select the title of the course by clicking on the drop-down menu under Block 1 and choosing one of the available options.

**Select Profession and Discipline of Individuals Trained:** Select the profession and discipline of individuals trained at each site during the annual reporting period by clicking on the drop-down menu in Column 2 (Block 8) and choosing one of the following options:

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Medical Interpreter
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Allergy and Immunology
- Medicine - Dermatology
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
Graduate Psychology Education

- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Public health nurse
- Other - Audiology
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Midwife (non-nurse)
- Other - Optometry
- Other - Podiatry
- Other - Registered Dietician

- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult
- Nursing - NP - Child/Adolescent Psychiatric/Mental Health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse anesthetist
- Nursing - Nurse midwife
- Nursing - Registered Nurse
- Other - Chiropractic
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Other - Unknown
- Public Health - Biostatistics

- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Other
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Radiologic technology
- Other - Speech Pathology
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Administration
- Public Health - Injury Control & Prevention
- Public Health - Social & Behavioral Sciences
Graduate Psychology Education

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

- Public Health - Epidemiology
- Public Health - Infectious Disease Control
- Public Health - Other
CE-2 - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline

(3)
Block 8

Figure 108. CE-2 - Entering # Trained in the Profession and Discipline

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

💡 **To Complete the Form:** Click on the “Save and Validate” button located on the bottom right corner of your screen. If no errors are found, click on the "Submit" button in the left hand side of the EHB to begin the submission process of your PRGCA.
Printing Your Performance Report

- 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.
- Next, click the ‘Print All Forms’ button below the Resources section of the Review Page.

Figure 109. Screenshot of Printing Your Performance Report
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.

Figure 110. 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](image)

**Figure 111. Screenshot of the Submit Report - Confirm Page**
Appendix A: Glossary

https://bhw.hrsa.gov/grants/resourcecenter/glossary
Appendix B: FAQs

General FAQs

When is the due date for the performance report?
Performance reports are due by July 31, 2019 for all programs. No extensions will be granted beyond this date. Failure to submit a performance report by the due date may place your grant in a non-compliant status.

What dates does the performance report cover?
The performance report submitted by grantees should cover all activities conducted through the grant during the current reporting period July 01, 2018 - June 30, 2019.

Is it possible to change data entered incorrectly in a prior reporting period?
No. Data entered in a previous reporting period cannot be edited. It is important that grantees provide accurate data during each reporting period.

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

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

Are reports from prior years stored in the EHBs?
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.

Will the information we are submitting in this reporting period be automatically used to populate the forms in the future?
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 his/her specific training program or permanently leaves before completion.

Does this report allow us to submit any attachments?
No, you cannot add attachments to the performance report.

When specific data, such as "N/A" is required after completing a cell, can those cells populate automatically?
No, grantees are required to enter all data themselves due to Section 508 requirements.
FAQs about Technical Support & Assistance

Who do we contact if we need technical assistance entering data in EHB?
Grantees should contact HRSA’s Call Center for any questions related to the performance report. The Call Center can be reached via phone at 1-877-464-4772.

FAQs about the Training Program Setup forms

The wrong program name was entered last year. Going forward, should we list the correct name?
If the grantee changes the program name, all the previous years’ data will be reset (everything entered in the past will not reappear this year). The best course of action is to make a note in the comments field and leave the program name as-is.

FAQs about the Program Characteristics (PC) forms

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

What are the status options for the different types of programs?
Structured and Unstructured Training programs use program status options “Ongoing” or “Complete.” All other training programs (degree/certificate, internships, fellowships, 1-year retraining, practica/field placements, residencies) use the status options “Active” or “Inactive.”

In the PC forms, do we count all trainees in our program, regardless of the year of study; do we include full-time/part-time trainees, etc.?
Yes, as long as trainees are enrolled or participating in the training program identified in Column 1.

Are we required to report on trainees at our institution beyond those who are participating in HRSA-funded programs?
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

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?
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.
Which address should we use to determine whether an individual is from a rural residential background?
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

Where do we get the Trainee Unique ID?
Grantees are responsible for developing a unique ID for each individual for whom an INDGEN entry is required. Grantees must keep a log of these unique IDs in order to provide follow-up data through the BPMH system.

What are the characters of the 7-digit unique ID?
Each unique ID must be made up of 7 alphanumeric characters. Do not include any personally identifiable information in the ID (name, birthdate, SSN, etc.).

Are INDGEN records from the last reporting period stored in the EHB?
Yes; they will appear in the INDGEN table as ‘Prior Records’ until (a) the individual is marked as a graduate/program completer, or (b) the individual permanently discontinues participation in the training program.

Last year we created unique IDs 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?
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 more than once.

What if an individual already listed on INDGEN did not receive a financial award during the reporting period?
If an individual from a prior record did not receive a financial award during the current reporting period, please indicate this under Column 12. The record will remain on INDGEN until this individual is marked as a graduate/program completer or permanently leaves the training program prior to completion.

Is reporting the underrepresented Asian distinction no longer included?
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.

Can we use our institution’s definitions/standards for disadvantaged background?
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.
Do we report full time faculty who receive salary support for teaching or administrative responsibilities?
If the faculty member is already accounted for in the grant’s personnel log, then do include this individual on the INDGEN table. If the faculty member who received financial support is not listed in the grant personnel log, then he/she should be reported on INDGEN.

Do conference registration fees count as financial support?
Yes, but only for non-project staff.

How do we find out an individual’s family income?
The institution’s financial aid office should have that information, as part of the required application for financial aid.

For veteran status, are we asking only for the trainee’s status, or the trainee’s family status (e.g. dependent of veteran, spouse of veteran, etc.)?
Only the trainee’s status should be reported.

How is the academic year funding total calculated?
Once you have validated the form, the academic year total is automatically calculated in EHB as the sum of funding during the academic year.

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

Can I cut and paste rows in the INDGEN table?
The cut and paste capability is currently set up at the row level, rather than individual data elements. After a row of data has been copied and pasted, edits will need to be made to individual cells using the dropdowns. Please note that the system does not accept data that has been cut and pasted from sources outside the report itself.

Do we include faculty or preceptors on this form?
If direct funds were given to the individuals AND the individuals were not already included in the grant application, then yes, include them on INDGEN. Otherwise, do not include them.

In INDGEN Column 13, Stipend, should we include salaries?
The individual’s salary (unless it’s paid by the grant) should not be included. However, the BHW funding should be included.

On the prior report we indicated that a trainee graduated when he had not. Because of that, he is not showing up on the current report. Can he be moved back to the INDGEN form?
If the individual moves to the INDGEN-PY form you can locate the record of the mislabeled graduate. Scroll all the way to the right, and use the link called “Move to INDGEN”, which will allow you to reset that record back to the INDGEN table for continued reporting.

I submitted a report last year using the 'not reported' option for trainee demographics. Why am I getting an error this year?
FAQs about the INDGEN-PY form

How do I use the INDGEN-PY form?
One year after an INDGEN record is marked as a graduate/program completer, you will be asked to provide an update on the individual’s employment/enrollment status.

FAQs about the Experiential Training (EXP) forms

Which training sites do I need to report on this form? Is it all of the sites our program uses?
Grantees should report only on sites used to provide training to students, trainees, or faculty supported by the grant during the current reporting period.

Our hospital provides multiple training sites for our trainees. Do I list the hospital or the specific clinics and offices within the hospital?
You should list the specific clinics and offices within the hospital that provide training to supported trainees.

Do I need to list a site more than once on EXP-2?
For sites that provide training to students, trainees, and faculty from different training programs, the site should be listed on the form for each training program the grant sponsors.

How can I report interprofessional team-based care at the training sites?
Interprofessional team-based care reporting is a three-step process on the EXP-2 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 that 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 participated at the site, alongside the principal trainees, but who were not enrolled in the HRSA-sponsored program.

What training sites do I report on EXP if I don’t have directly-funded individuals in INDGEN?
You should report all training sites used to train individuals touched by your grant funding. If no individuals are reported in INDGEN, consider those you reported on the LR-1 form.

The values I added in EXP-1 aren’t prepopulating in EXP-2. Why can I only see my active prior records?
You must select each program-site combination using the drop down menus in columns 1 and 2. The values you added in EXP-1 will load in the dropdown menu in EXP-2 column 2.

Why do I need to enter the zip code of my training sites?
The zip codes allow HRSA to identify sites that are in rural areas, medically underserved communities, and health professions shortage areas. Because the designation of each location may change over time, the zip code allows HRSA to adjust the way it labels a site.
Where can I find the 4-digit zip code extension?
You can locate your site's 4-digit zip code extension by visiting the US Postal Service website:
https://tools.usps.com/go/ZipLookupAction_input

FAQs about the Curriculum Development and Enhancement (CDE) forms

What if courses are created using a variety of funding sources?
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.

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

In the CDE-1 table, I have entered a course that has been implemented, but when I try to select the site where the course was taught, I receive an error message that based on my responses for columns 2 and 4, this site is not allowed. Shall I use N/A as the site?
If it is an academic course or training/workshop for health professions students, fellows, or residents, then N/A will need to be used.

Can I delete a course from last year?
You will not be able to delete a previously used course. You may indicate that the course from last year was not used again this year.

FAQs about the Faculty Development (FD) forms

What is the difference between a structured faculty development program and an unstructured faculty development activity?
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. What are the definitions for the roles of educator and administrator?
The educator role deals with instruction and training, course preparation, grading, and generally involves imparting knowledge or skills to others. Administrative responsibilities are support functions, such as committee work.

FAQs about the Continuing Education (CE) forms

For CE-2, do we report on all attendees or only those directly funded by a BHW-funded program for this reporting period?
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.
In creating and enhancing courses for continuing education, what should the site be?
Enter N/A for these courses.

When should I use the ‘Other’ option for type of continuing education?

The ‘Other’ option is available if there was a CE activity that the grantee does not identify as an unstructured training or structured CE course. We anticipate that few (if any) grantees will need to use this option.