

ACADEMIC YEAR 2018-2019



**Instruction Manual for Grantees of the
Geriatrics Workforce Enhancement
Program(GWEP)**

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 **GWEP** grant program:

The purpose of this cooperative agreement program is to develop a health care workforce that maximizes patient and family engagement and improves health outcomes for older adults by integrating geriatrics with primary care.

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.

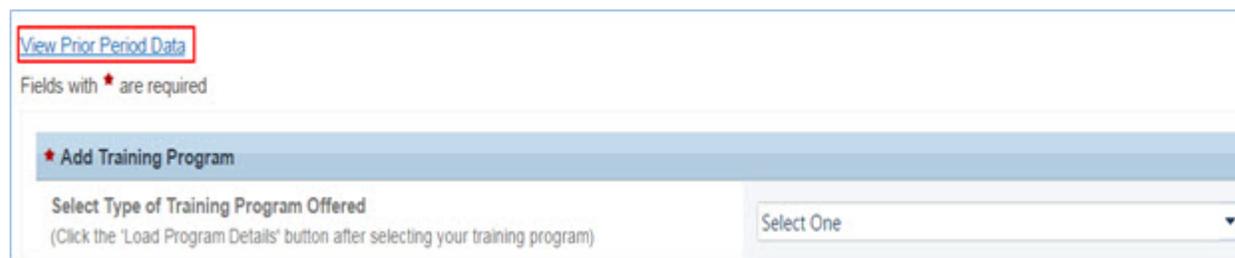
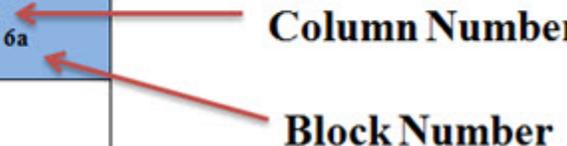


Figure 1. Screenshot of View Prior Period Data Link

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

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



Column Number
Block Number

Figure 2. Example of Performance Measures Data Table

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

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.

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> 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:**
 1. Videos with general information about how to enter data in the BPMH system are available at <https://help.hrsa.gov/display/public/EHBSKBFG/BPMH+Videos>.
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.

Order	Type of Form	Parent Form	Form ID
1	Setup Form	SetupForms	Training Program
2	Setup Form	SetupForms	Faculty Development
3	Performance Data Form	ProgramCharacteristics-PCSubforms	PC-1
4	Performance Data Form	ProgramCharacteristics-PCSubforms	PC-6
5	Performance Data Form	ProgramCharacteristics-PCSubforms	PC-7
6	Performance Data Form	LegislativeRequirementsDemographicVariables-LRandDVSubforms	LR-1a
7	Performance Data Form	LegislativeRequirementsDemographicVariables-LRandDVSubforms	LR-2
8	Performance Data Form	LegislativeRequirementsDemographicVariables-LRandDVSubforms	DV-1
9	Performance Data Form	LegislativeRequirementsDemographicVariables-LRandDVSubforms	DV-2

Order	Type of Form	Parent Form	Form ID
10	Performance Data Form	LegislativeRequirementsDemographicVariables-LRandDVSubforms	DV-3
11	Performance Data Form	IndividualCharacteristics-INDGENSubforms	IND-GEN
12	Performance Data Form	IndividualCharacteristics-INDGENSubforms	INDGEN-PY
13	Performance Data Form	ExperientialCharacteristics-EXPSubforms	EXP-1
14	Performance Data Form	ExperientialCharacteristics-EXPSubforms	EXP-2
15	Performance Data Form	CourseDevelopmentandEnhancement-CDESubforms	CDE-1
16	Performance Data Form	CourseDevelopmentandEnhancement-CDESubforms	CDE-2
17	Performance Data Form	FacultyDevelopmentInstructionandRecruitment-FDSubforms	FD-1a
18	Performance Data Form	FacultyDevelopmentInstructionandRecruitment-FDSubforms	FD-1b
19	Performance Data Form	FacultyDevelopmentInstructionandRecruitment-FDSubforms	FD-2a
20	Performance Data Form	FacultyDevelopmentInstructionandRecruitment-FDSubforms	FD-2b
21	Performance Data Form	FacultyDevelopmentInstructionandRecruitment-FDSubforms	FD-4a
22	Performance Data Form	FacultyDevelopmentInstructionandRecruitment-FDSubforms	FD-4b
23	Performance Data Form	ContinuingEducationActivities-CESubforms	CE-1
24	Performance Data Form	ContinuingEducationActivities-CESubforms	CE-2

Order	Type of Form	Parent Form	Form ID

Training Program - Setup

Training Program Setup - Selecting Type of Training Program

Purpose: The Training Program Setup form will configure all subsequent subforms based on the training programs that were used in the current reporting period.

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

Figure 3. Training Program Setup - Selecting Type of Training Program

Select Type of Training Program Offered: For each training program, select the type of training program offered through the grant during the current reporting period by clicking on the drop-down menu next to “Select Type of Training Program Offered” and choose from following options:

- Degree/Diploma/Certificate Academic Training Program (Degree/Diploma)
- Fellowship program
- Practicum/Field Placement program

Training Program Setup - Adding Degree/Diploma Program



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

*Add Training Program	
For a Degree/Diploma/Certificate Program, Select Type of Degree Offered	
For a Degree/Diploma/Certificate Program, Select Primary Focus Area	
Select Delivery Mode Used to Offer Program	
Add Record	

Figure 4. Training Program Setup - Adding Degree/Diploma Program

For a Degree/Diploma/Certificate Program, Select Type of Degree Offered: Select the type of degree program offered during the reporting period by clicking on the drop-down menu next and choosing **one** of the following options:

- BS
- MA
- Certificate - CNA
- Certificate - ENT
- Certificate - Pharmacy Aid
- MSW
- NP
- BSN
- Certificate - CHW
- Certificate - CNM
- Certificate - Interprofessional
- MS
- PharmD
- PHN
- DNP
- MD
- Certificate - CNS
- Certificate - Other
- MSN
- PhD
- PMHN

For a Degree/Diploma/Certificate Program, Select Primary Focus Area: Select the primary focus area of the degree program offered during the reporting period by clicking on the drop-down menu and choosing **one** of the following options:

- Student - Medical School
- Medicine - Other
- Student - Certificate - ENT
- Student - CNS - Adult gerontology
- Student - CNS - Palliative Care
- Student - Graduate - Nursing Doctorate
- Student - Pharmacy School
- Student - Certificate - CHW
- Student - Certificate - Other
- Student - CNS - Family health
- Student - CNS - Psychiatric/Mental health
- Medicine - Family Medicine
- Student - Certificate - CNA
- Student - Certificate - Pharmacy Aid
- Student - CNS - Geropsychiatric
- Student - CNS - Women's health

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- Student - NP - Acute care adult gerontology
- Student - NP - Adult Psychiatric/Mental health
- Student - NP - Family Psychiatric/Mental Health
- Student - NP - Other advanced nurse specialists
- Student - Nurse Administrator
- Student - Nurse Midwife

- Student - Graduate - Nursing Masters
- Student - NP - Adult
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Palliative Care
- Student - Nurse Anesthetist
- Student - Nurse Researchers/Scientists

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- Student - Midwife (non-nurse)
- Student - NP - Adult gerontology
- Student - NP - Family
- Student - NP - Medical Ethics
- Student - NP - Women's health
- Student - Nurse Educator
- Student - Nursing Informatics

Select Delivery Mode Used to Offer Program:

- Select the primary delivery mode used to offer the degree program during the reporting period by clicking on the drop-down menu and choosing one of the options below:
 - Click on the "Add Record" button to save your entry.
 - Repeat this process to capture each degree program supported with grant funds during the reporting period.
- Campus-based program
 - Distance learning program
 - Hybrid program

Training Program Setup - Adding Fellowship Program

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

Figure 5. 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 fellows by clicking on the drop-down menu and choosing one of the options below:
- Click on the "Add Record" button.
- Repeat as necessary to ensure that all new fellowship training programs are present.

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Oral Surgery Dentistry
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Medical Genetics
- Medicine - Other
- Medicine - Preventive Medicine/Internal Medicine
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Prosthodontic Dentistry
- Medicine - Emergency Medicine
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Obstetrics and Gynecology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Occupational Medicine
- Medicine - Ethics
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling
- Dentistry - General Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Occupational Medicine
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Palliative Care

- Medicine - Psychiatry

Training Program Setup - Adding Residency Program

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

Figure 6. Training Program Setup - Adding Residency Program

For a Fellowship, Residency, Practicum/Field Placement, Internship or 1-year Retraining Program, Select the Primary Discipline of Individuals Trained: To complete your entry, select the primary profession and discipline of individuals who participated in a residency program (depending on your grant) by clicking on the drop-down menu next to the "For a Fellowship, Residency, Practicum/Field Placement, Internship or 1-year. Retraining Program, Select the Primary Discipline of Individuals Trained" and choosing **one** of the options listed below. Next, click on the "Add Record" button to save your entry.

Training Program Setup - Adding Field Placement/Practicum Program

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

Figure 7. Training Program Setup - Adding Field Placement/Practicum 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 who participated in a field placement program by clicking on the drop-down menu and choosing one of the options listed below. Click on the "Add Record" button to save your entry.

- Medicine - Family Medicine
- Other - Allied Health
- Other - Registered Dietician
- Student - Community health nursing
- Student - Graduate - Social Work
- Student - NP - Adult
- Student - NP - Family
- Student - NP - Women's health
- Student - Nurse Educator
- Student - Physician Assistant
- Student - Midwife (non-nurse)
- Student - Other - Allied Health
- Student - Other - Registered Dietician
- Medicine - Internal Medicine
- Other - Physical Therapy
- Other - Respiratory Therapy
- Student - Graduate - Nursing Doctorate
- Student - Medical School
- Student - NP - Adult gerontology
- Student - NP - Family Psychiatric/Mental Health
- Student - Nurse Administrator
- Student - Nurse midwife
- Student - Public Health Nurse
- Student - NP - Medical Ethics
- Student - Other - Physical Therapy
- Student - Other - Respiratory Therapy
- Medicine - Other
- Other - Radiologic Technology
- Other - Speech Therapy
- Student - Graduate - Nursing Masters
- Student - NP - Acute care adult gerontology
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - Nurse Anesthetist
- Student - Nursing Informatics
- Student - Chiropractic
- Student - NP - Palliative Care
- Student - Other - Radiologic Technology
- Student - Other - Speech Therapy



Note: The Other-Other option should only be used by grantees without an active training program.

Training Program Setup - Selecting Training Activity Status

Select Training Activity Status in the Current Reporting Period
(2)

Figure 8. Training Program Setup - Selecting Training Activity Status

Select Training Activity Status in the Current Reporting Period: Select the status of each training program at the end of the current annual reporting period (i.e., **June 30, 2019**) by choosing one of the options below:

- Active
- Inactive



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



*Note: **Inactive**- A training program that was NOT offered during the 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 associated with this program. You will not report on any aspect of an inactive program, and all records associated with the program (i.e., EXP 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.

Faculty Development – Setup

Selecting Faculty Development Activities

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

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

Figure 9. 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, FD-2a, or FD-4a subforms.

Structured Faculty Development Training Program:

Faculty Development Activity:

Faculty Instruction:

No faculty-related activities conducted:



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



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

PC-1: Program Characteristics – Degree/Diploma/Certificate Training Programs

PC-1 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia Used to Offer this Training
(6) Block 2

Figure 10. PC-1 - 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 established for the purpose of offering each degree program during the current reporting period.

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

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- Senior Center
- Tribal Organization

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- Tribal Government

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



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

PC-1 - Selecting Type(s) of Community-based Collaborator(s)

Select Type of Community-based Collaborator(s)
(6b)

Figure 11. PC-1 - Selecting Type(s) of Community-based Collaborator(s)

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

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



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

PC-1 - 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)		
Total	URM	Disadvantaged Background and not URM
(7) Block 3	(8) Block 3a	(9) Block 3b

Figure 12. PC-1 - Entering Enrollment Information

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

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



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



Note: Students who permanently left their degree program before graduation (i.e. attrition) will be counted separately in Column 12 (Block 9).



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

Example: The John Doe School of Public Health had 18 graduate-level public health students enrolled in the MPH program with a focus area in Epidemiology. Among the 18 graduate-level public health students enrolled in this program, 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.*

PC-1 - Entering Graduate Information



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

Enter Total # Graduated/Completed (whether funded by BHW or not)	
Total	URM
(10) Block 8	(11) Block 8a

Figure 13. PC-1 - 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 graduated from their degree program during the reporting period. Count all students who graduated, regardless of whether or not the student directly received a BHW-funded financial award.

Enter Total # Graduated/Completed (whether funded by BHW or not): URM: In Column 8 (Block 8a), enter the number of students who graduated from their degree program during the 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 graduation (i.e. attrition) will be counted separately in Column 12 (Block 9).



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

Example: The John Doe School of Public Health had 18 graduate-level public health students enrolled in the MPH program with a focus area in Epidemiology. Among the graduate-level public health students who enrolled in the degree program, 3 graduated during the reporting period. Of those who graduated, 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-1 - Entering Attrition Information



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

Enter Total # Who left the Program Before Completion (whether funded by BHW or not)	
Total	URM
(12) Block 9	(13) Block 9a

Figure 14. PC-1 - Entering Attrition Information

Enter Total # Who left the Program Before Completion (whether funded by BHW or not): Total: In Column 12 (Block 9), enter the total number of students who permanently left their degree programs before completion during the reporting period. Count all students who permanently left their degree programs regardless of whether or not the student directly received a BHW-funded financial award.

Enter Total # Who left the Program Before Completion (whether funded by BHW or not): URM: In Column 13 (Block 9a), enter the number of students who permanently left their degree programs before completion during the 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 Public Health had 18 graduate-level public health students enrolled in the MPH program with a focus area in Epidemiology. Among the graduate-level public health students who enrolled in degree programs, 2 left the degree program before completion. Neither student was an underrepresented minority.

- *In Column 12 (Block 9), the reporting official would enter 2.*
- *In Column 13 (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
(3) Block 2

Figure 15. 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 fellowship programs to fellows during the annual reporting period.

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

- Tribal Organization
- Other
- Professional Associations
- State Governmental Programs

- Tribal Government



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

PC-6 - Selecting Type(s) of Community-based Collaborator(s)

Select Type of Community-based Collaborator(s)
(3a)

Figure 16. PC-6 - Selecting Type(s) of Community-based Collaborator(s)

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

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

PC-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)		
Total	URM	Disadvantaged Background and not URM
(4) Block 3	(5) Block 3a	(6) Block 3b

Figure 17. 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 fellows who participated in each program during the current reporting period. Count all fellows who participated, regardless of whether or not the fellow directly received a BHW-funded financial award.

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



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



Note: 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 Medicine had 18 Family Medicine physicians participate in a fellowship program during the current annual reporting period. Among the 18 Family Medicine physicians who participated, 9 were underrepresented minorities. In addition, 3 Family Medicine physicians 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.*

PC-6 - Entering Graduate Information



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

Enter Total # Graduated/Completed (whether funded by BHW or not)	
Total	URM
(7) Block 8	(8) Block 8a

Figure 18. 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 fellows who completed all fellowship requirements during the current reporting period. Count all fellows who completed the program, regardless of whether or not the fellow directly received a BHW-funded financial award.

Enter Total # Graduated/Completed (whether funded by BHW or not): URM: In Column 8 (Block 8a), enter the number of 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: 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 Medicine had 18 Family Medicine physicians participate in fellowship programs during the current annual reporting period. Among the Family Medicine physicians who participated in fellowship programs, 3 completed all program requirements. Of those

who completed, 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.

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

Figure 19. PC-6 - 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 fellows who permanently left their before completion during the current reporting period . Count all fellows who permanently left their fellowships regardless of whether or not the fellow directly received a BHW-funded financial award.

Enter Total # Who left the Program Before Completion (whether funded by BHW or not): URM: In Column 10 (Block 9a), enter the number of 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 Medicine had 18 Family Medicine physicians participate in fellowship programs during the current annual reporting period. Among the Family Medicine physicians who participated in fellowship programs, 2 left the program before completion. Neither Family Medicine physician 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-7: 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
(3) Block 2

Figure 20. PC-7 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia Used to Offer this Training: Complete Column 3 (Block 2) by selecting all of the type(s) of partnerships or consortia established for the purpose of offering each practicum/field placement (traineeship) 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
- Federal Government - Veterans Affairs
- Federal Government - CDC
- Federal Government - FDA
- Federal Government - Other HHS Agency/Office
- Federal Government -Other
- Geriatric consultation services
- Health department - State
- Health insurance/Healthcare Provider Group (e.g.; PPO/HMO)
- Hospital
- No partners/consortia used
- Nursing home
- Academic department - within the institution
- Alzheimer’s Disease Resource Centers
- Day and home care programs (i.e. Home Health)
- Federal Government - ACL
- Federal Government - CMS
- Federal Government - IHS
- Federal Government - Other HRSA Program
- Geriatric ambulatory care and comprehensive units
- Health center (e.g.; free clinic)
- Health department - Tribal
- Health policy center
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Educational institution (Grades K - 12)
- Federal Government - AHRQ
- Federal Government - Department of Defense/Military
- Federal Government - NIH
- Federal Government - SAMHSA
- Geriatric Behavioral or Mental Health Units
- Health department - Local
- Health disparities research center
- Hospice
- Long-term care facility
- Nurse Managed Health Clinics
- Physical therapy/Rehabilitation center

Health Resources and Services Administration
Bureau of Health Workforce

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

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

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- Quality improvement organization
- Tribal Government



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

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

Select Type of Community-based Collaborator(s)
(3a)

Figure 21. PC-7 - Selecting Type(s) of Community-based Collaborator(s)

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

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



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

PC-7 - Entering Enrollment Information

Enter Total # Enrolled (whether funded by BHW or not)		
Total	URM	Disadvantaged Background and not URM
(4) Block 3	(5) Block 3a	(6) Block 3b

Figure 22. PC-7 - Entering Enrollment Information

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

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.



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



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



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

Example: The John Doe School of Nursing had 18 NP students in Adult Gerontology students participate in practicum/field placement programs during the current reporting period. Among the 18 NP students in Adult Gerontology 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.*

PC-7 - Entering Graduate Information

Enter Total # Graduated/Completed (whether funded by BHW or not)	
Total	URM
(7) Block 8	(8) Block 8a

Figure 23. 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 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.

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 reporting period and were underrepresented minorities.



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



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



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

Example: The John Doe School of Nursing had 18 NP students in Adult Gerontology participate in practicum/field placement programs during the reporting period. Among the NP students in Adult Gerontology students who participated in practicum/field placement programs, 3 completed all

requirements. Of those who completed 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.

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

Figure 24. PC-7 - Entering Attrition Information

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

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 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 Nursing had 18 NP students in Adult Gerontology students participate in practicum/field placement programs during the current annual reporting period. Among the NP students in Adult Gerontology students who participated in practicum/field placement

programs, 2 left their programs 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.

Legislative Requirements & Demographic Variables—LR and DV Subforms

LR and DV - Introduction



Warning: You must complete a LR-1, LR-2, DV-1, DV-2, and DV-3 subform for each type of training program supported through the grant during the current reporting period.

LR-1a: Trainees by Training Category

LR-1 - Entering Ongoing Trainees Count

Trainees by Training Category
Enter # of Ongoing Trainees
(1a)

Figure 25. LR-1 - Entering Ongoing Trainees Count

Trainees by Training Category: Enter # of Ongoing Trainees: Enter the number of ongoing trainees enrolled in each training program in the textbox under Column 1a.



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

LR-1 - Entering Program Completers Count

Trainees by Training Category
Enter # of Program Completers
(6) Block 5

Figure 26. LR-1 - Entering Program Completers Count

Trainees by Training Category: Enter # of Program Completers: Enter the number of students who completed each training program during the reporting period in the textbox under Block 5.



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



Note: Do not count individuals who permanently left their training program before completion during the annual reporting period in the textbox under Block 4. These individuals will be captured separately in Block 6.

LR-1 - Entering Attrition Information

Attrition	
Enter # of Individuals who left the Program before Completion	Enter # of URM who left the Program before Completion
(7) Block 6	(8) Block 6a

Figure 27. LR-1 - Entering Attrition Information

Attrition: Enter # of Individuals who left the Program before Completion: Enter the number of individuals who permanently left each training program before completion during the current reporting period in the textbox under Block 6.

Attrition: Enter # of URM who left the Program before Completion: Of the individuals reported in Block 6, enter the number of underrepresented minorities who permanently left each training program before completion during the current reporting period in the textbox under Block 6a.



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



Note: Counts reported in Block 6a are a subset of those reported in Block 6.



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

LR-2: Trainees by Age & Gender

LR-2 - Entering Ongoing Trainees Count by Age and Gender

Gender: Male	Gender: Female	Gender: Not Reported
Enter # of Ongoing Trainees	Enter # of Ongoing Trainees	Enter # of Ongoing Trainees
(2a)	(7a)	(12a)

Figure 28. LR-2 - Entering Ongoing Trainees Count by Age and Gender

Gender: Male: Enter # of Ongoing Trainees: Enter the number of male ongoing trainees enrolled in each training program in the textbox under Column 2a.

Gender: Female: Enter # of Ongoing Trainees: Enter the number of female ongoing trainees enrolled in each training program in the textbox under Column 7a.

Gender: Not Reported: Enter # of Ongoing Trainees: Enter the number of gender not reported ongoing trainees enrolled in each training program in the textbox under Column 12a.



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

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

Gender: Male	Gender: Female	Gender: Not Reported
Enter # of Program Completers	Enter # of Program Completers	Enter # of Program Completers
(7) Blocks 49-54	(12) Blocks 55-60	(17)

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

Gender: Male: Enter # of Program Completers: Enter the number of male students, by age group, who completed each training program during the annual reporting period in the textboxes under Blocks 49 through 54 (Column #7).

Gender: Female: Enter # of Program Completers: Enter the number of female students, by age group, who completed each training program during the annual reporting period in the textboxes under Blocks 55 through 60 (Column #12).

Gender: Not Reported: Enter # of Program Completers: Enter the number of gender not reported completers from each collaborative training program in the textbox under Column 17.



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



Note: Enter \"0\" if there were no males or females in a specific age group who completed the training programs listed in this subform.



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

DV-1: Trainees by Racial & Ethnic Background

DV-1 - Entering Ongoing Trainees Count by Race and Ethnicity

Ethnicity: Hispanic/Latino	Ethnicity: Non-Hispanic/Non-Latino	Ethnicity: Not Reported
Enter # of Ongoing Trainees	Enter # of Ongoing Trainees	Enter # of Ongoing Trainees
(2a)	(7a)	(12a)

Figure 30. DV-1 - Entering Ongoing Trainees Count by Race and Ethnicity

Ethnicity: Hispanic/Latino: Enter # of Ongoing Trainees: Enter the number of Hispanic ongoing trainees enrolled in each training program in the textbox under Column 2a.

Ethnicity: Non-Hispanic/Non-Latino: Enter # of Ongoing Trainees: Enter the number of Non-Hispanic ongoing trainees enrolled in each training program in the textbox under Column 7a.

Ethnicity: Not Reported: Enter # of Ongoing Trainees: Enter the number of Ethnicity Not Reported ongoing trainees enrolled in each training program in the textbox under Column 12a.



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

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

Ethnicity: Hispanic/Latino	Ethnicity: Non-Hispanic/Non-Latino	Ethnicity: Not Reported
Enter # of Program Completers	Enter # of Program Completers	Enter # of Program Completers
(7) Blocks 29-35	(12) Blocks 64-70	(17)

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

Ethnicity: Hispanic/Latino: Enter # of Program Completers: Enter the number of Hispanic/Latino students by race who completed each training program during the annual reporting period in the textboxes under Blocks 29 through 35 (Column #7).

Ethnicity: Non-Hispanic/Non-Latino: Enter # of Program Completers: Enter the number of Non-Hispanic/Non-Latino students by race who completed each training program during the annual reporting period in the textboxes under Blocks 64 through 70 (Column #12).

Ethnicity: Not Reported: Enter # of Program Completers: Enter the number of Ethnicity Not Reported completers from each training program in the textbox under Column 17.



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



Note: Enter \"0\" if there were no individuals of a specific racial and ethnic group who completed the training programs listed in this subform.



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

DV-2: Trainees from a Disadvantaged Background

DV-2 - Entering Ongoing Trainees Count from Disadvantaged Background

Ongoing Trainees	
Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM
(13)	(14)

Figure 32. DV-2 - Entering Ongoing Trainees Count from Disadvantaged Background

Ongoing Trainees: Enter Total # from Disadvantaged Background: Enter the number of ongoing trainees from a disadvantaged background enrolled in each training program in the textbox under Column 13.

Ongoing Trainees: Enter # from Disadvantaged Background who are not URM: Enter the number of ongoing trainees from a disadvantaged background who are not underrepresented minorities enrolled in each training program in the textbox under Column 14.



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

DV-2 - Entering Program Completers Count from Disadvantaged Background

Program Completers	
Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM
(10) Block 9	(11) Block 10

Figure 33. DV-2 - Entering Program Completers Count from Disadvantaged Background

Program Completers: Enter Total # from Disadvantaged Background: Enter the **total** number of students from disadvantaged backgrounds that completed each training program during the annual reporting period in the textbox under Block 9.

Program Completers: Enter # from Disadvantaged Background who are not URM: Next, enter the number of students from a disadvantaged background that completed each training program and are **not underrepresented minorities** in the textbox under Block 10.



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



Note: Enter "0" in Block 9 if there were no individuals from disadvantaged backgrounds who completed the training programs listed in this subform.



Note: Counts reported in Block 10 are a subset of counts reported in Block 9.



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



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

DV-3: Diversity - Rural Background

DV-3 - Entering Ongoing Trainees Count from Rural Residential Background

Trainees from Rural Residential Background
Enter # of Ongoing Trainees from a Rural Background
(8)

Figure 34. DV-3 - Entering Ongoing Trainees Count from Rural Residential Background

Trainees from Rural Residential Background: Enter # of Ongoing Trainees from a Rural Background: Enter the number of ongoing trainees from a rural background enrolled in each training program in the textbox under Column 8.



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

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

Trainees from Rural Residential Background
Enter # of Program Completers from a Rural Background
(6) Block 5

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

Trainees from Rural Residential Background: Enter # of Program Completers from a Rural Background: Enter the number of students from a rural residential background who completed each training program during the annual reporting period in the textbox under Block 5.



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



Note: Enter \"0\" if there were no individuals from a rural residential background who completed the training programs listed in this subform.



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



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

Individual-level Data—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 BPMH 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. Please move ahead to the INDGEN form by using the form list located on the left side of your screen.

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?	<input checked="" type="checkbox"/> Yes (complete IND-GEN) <input type="checkbox"/> No (click Save and Validate button to proceed to the next form)
---	---

Figure 36. 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.

IND-GEN - Selecting Type of Training Program

Type of Training Program
(1)

Figure 37. IND-GEN - Selecting Type of Training Program

Type of Training Program: Select each **NEW** 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"** should be selected for faculty members who received direct financial support for participating in faculty development programs or activities.

IND-GEN - Entering Trainee Unique ID

Trainee Unique ID
(2) Block 1

Figure 38. 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 updates for each individual and one-year follow-up data for trainees.

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

Select Individual's Training or Awardee Category
(3) Block 2

Figure 39. 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 the following option:

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

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

Select Individual's Enrollment / Employment Status
(4) Block 3

Figure 40. 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

IND-GEN - Selecting Individual's Gender

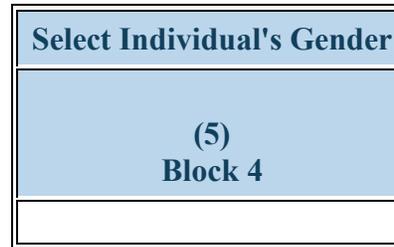
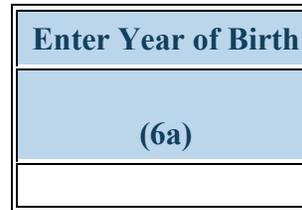


Figure 41. IND-GEN - Selecting Individual's Gender

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

IND-GEN - Entering Year of Birth



The image shows a screenshot of a dropdown menu. The top part of the menu is a blue header with the text "Enter Year of Birth" in white. Below the header, the option "(6a)" is selected and highlighted in a light blue color. The rest of the menu is currently hidden.

Figure 42. IND-GEN - Entering Year of Birth

Enter Year of Birth: Select each individual's age at the end of the current reporting period (i.e., as of **June 30, 2019**) in the dropdown menu under Column 6a.

- 1917
- 1918
- 1919
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- 2010
- 2011
- 2012
- 2013
- 2014
- 2015
- 2016
- 2017
- Not Reported

IND-GEN - Selecting Individual's Ethnicity

Select Individual's Ethnicity
(7) Block 6

Figure 43. 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

IND-GEN - Selecting Individual's Race

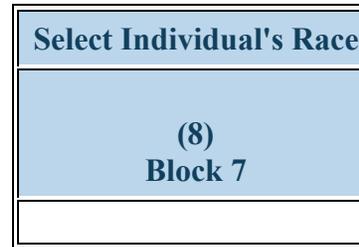


Figure 44. IND-GEN - Selecting Individual's Race

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.

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

Select Whether Individual is from a Rural Residential Background
(9) Block 8

Figure 45. 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
(10) Block 9

Figure 46. 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



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

IND-GEN - Selecting Individual's Veteran Status

Select Individual's Veteran Status
(11) Block 10

Figure 47. 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



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.**

Select Whether Individual Received BHW Financial Award?	Enter Individual's Financial Award Amount (BHW funds only)
(12) Block 11	Direct Financial Support (20a) Block 11

Figure 48. IND-GEN - Entering BHW-Funded Financial Award Information

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

- Yes
- No

Enter Individual's Financial Award Amount (BHW funds only): Direct Financial Support:

- If the individual did receive a BHW-funded financial award, select “Yes” in Column 12 (Block 11) and enter the total amount of BHW direct financial support provided during the current reporting period in the textbox in Column 20a.
- 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 20a.



Note: The amount reported under the column labeled \"Direct Financial Support\" should be the total monies from the grant provided to an

individual during the current reporting period for the purposes of participating in the training program that was selected under the column labeled \"Type of Training Program.\" Do not include dollars that came from other sources of funding. If an individual participated in more than one (1) program and received direct financial support for each program, multiple entries on IND-GEN are required to capture participation and funding 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
(22) Block 12

Figure 49. 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:

- 0
- 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 direct financial support for 1 ½ years, please enter 2 in Column 22 (Block 12).



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

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

Select Individual's Academic or Training Year
(26) Block 15

Figure 50. 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:

- 1
- 2
- 3
- 4
- 5 or more
- N/A



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

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
(26b) Block 15

Figure 51. 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/ODU
- Individual received training in substance use treatment
- None of the above

IND-GEN - Selecting Individual's Primary Discipline

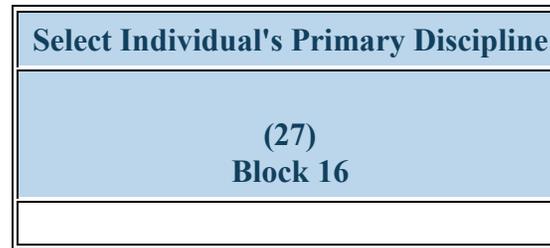


Figure 52. IND-GEN - Selecting Individual's Primary Discipline

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

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Ethics
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Obstetrics and Gynecology
- Medicine - Palliative Care
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Psychiatry
- Other - Physical Therapy
- Other - Respiratory Therapy
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Occupational Medicine
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Occupational Medicine
- Other - Allied Health
- Other - Radiologic technology
- Other - Speech Pathology
- Student - Certificate - CNA
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Prosthodontic Dentistry
- Medicine - Emergency Medicine
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Medical Genetics
- Medicine - Other
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Public Health
- Other - Pharmacy
- Other - Registered Dietician
- Other - Speech Therapy
- Student - Certificate - ENT
- Student - CNS - Family
- Student - CNS - Psychiatric/Mental health
- Student - Graduate - Nursing Doctorate

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- Student - Certificate - CHW
- Student - Certificate - Pharmacy Aid
- Student - CNS - Geropsychiatric
- Student - CNS - Women's health
- Student - Graduate - Nursing Masters
- Student - NP - Acute care adult gerontology
- Student - NP - Adult Psychiatric/Mental health
- Student - NP - Family Psychiatric/Mental Health
- Student - NP - Other advanced nurse specialists
- Student - Nurse Administrator
- Student - Nurse midwife
- Student - Other
- Student - Other - Radiologic Technology
- Student - Other - Speech Therapy

- Student - CNS - Adult gerontology
- Student - CNS - Palliative Care
- Student - Community Health Nursing
- Student - Graduate - Social Work
- Student - NP - Adult
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Palliative Care
- Student - Nurse Anesthetist
- Student - Nurse Researchers/Scientists
- Student - Other - Allied Health
- Student - Other - Registered Dietician
- Student - Public Health Nurse

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- Student - Midwife (non-nurse)
- Student - NP - Adult gerontology
- Student - NP - Family
- Student - NP - Medical Ethics
- Student - NP - Women's health
- Student - Nurse Educator
- Student - Nursing Informatics
- Student - Other - Physical Therapy
- Student - Other - Respiratory Therapy

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.

Training in a Primary Care Setting	
Select Whether Individual Received Training	Enter # of Contact Hours
(28) Block 17	(29) Block 17a

Figure 53. IND-GEN - Entering Training Information in a Primary Care Setting

Training in a Primary Care Setting: Select Whether Individual Received Training: Select whether each **individual** received clinical or experiential **training in a primary care setting** during the current reporting period by clicking on the drop-down menu in Column 28 (Block 17) and choosing **one** of the following options:

- Yes
- No

Training in a Primary Care Setting: Enter # of Contact Hours:

- **If the individual received clinical or experiential training in a primary care setting, enter the total number of hours** spent in this type of setting during the 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).**

IND-GEN - Entering Training Information in a Medically Underserved Community



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

Training in a Medically Underserved Community	
Select Whether Individual Received Training	Enter # of Contact Hours
(31) Block 18	(32) Block 18a

Figure 54. IND-GEN - Entering Training Information in a Medically Underserved Community

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).

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

- Yes
- No

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.

IND-GEN - Entering Training Information in a Rural Area



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	Enter # of Contact Hours
(33) Block 19	(34) Block 19a

Figure 55. IND-GEN - Entering Training Information in a Rural Area

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

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.

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

Select Whether Individual Left the Program Before Completion
(36) Block 21

Figure 56. IND-GEN - Selecting Whether Individual Left the Program Before Completion

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

- Yes
- No

IND-GEN - Entering Graduation/Completion Information



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

Select Whether Individual Graduated/Completed the Program	Select Degree Earned	Select Individual's Post-Graduation/Completion Intentions
(37) Block 22	(38) Block 22a	(39) Block 22b

Figure 57. IND-GEN - Entering Graduation/Completion Information

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

- Yes
- No

Select Degree Earned:

- If a individual graduated from their degree program during the reporting period, select the type of degree earned by clicking on the drop-down menu in Column 38 (Block 22a) and choosing one of the options from the list below.
- If the individual did not graduate, select "N/A" under Block 22a.

- | | | |
|------------------------------|---------------------|-----------------------|
| • Certificate - CHW | • Certificate - CNA | • Certificate - CNM |
| • Certificate - CNS | • Certificate - ENT | • Certificate - Other |
| • Certificate - Pharmacy Aid | • DNP | • MA |
| • MD | • MS | • MSN |
| • NP | • PhD | |

- PMHN
- N/A
- PHN

Select Individual's Post-Graduation/Completion Intentions:

- **Select the individual's training or employment intentions** by clicking on the drop-down menu in Column 39 (Block 22b) and choosing **all that apply** from the options listed below.
 - If an individual **did not complete from their training program** during the current reporting period, **select “N/A”** in Columns 37 and 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
 - Not Reported
 - Individual intends to become employed or pursue further training in a primary care setting
 - None of the above
 - N/A



Warning: For Block 22b, None of the above, not reported, and N/A cannot be selected in combination with any other option.



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

INDGEN-PY: Individual Prior Year

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 Individual's Current Training/Employment Status	Select Whether Your Organization Hired this Individual	Select Whether a Partner Organization Hired this Individual	Select Employment Location
(13) Block 23	(14) Block 23a	(16)	(17)	(18)

Figure 58. 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 a 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

- None of the above
- N/A

- Not Reported

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
- Area Health Education Center

- Critical Access Hospital
- Other Clinical Training Site
- None of the Above
- FQHC or Look-Alike
- Rural Health Clinic
- N/A



Warning: For Column 14, “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-1 and EXP-2 subforms 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
(1) Block 1

Figure 59. 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
(2)

Figure 60. 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 \"No\" is selected in Column 2, then the training site will not populate in the dropdown menus on the EXP-2 subform.



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.

EXP-1 - Selecting Type of Site Used

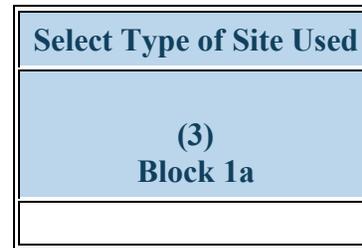


Figure 61. EXP-1 - Selecting Type of Site Used

Select Type of Site Used: Select the type of sites used 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 Mental Health Center
- Dentist Office
- Federal Government Office or Agency
- Geriatric Behavioral or Mental Health Units
- Hospital
- Indian Health Service (IHS) site
- Local health department
- Nurse Managed Health Clinics
- Other
- Physician Office
- Senior Centers
- Rural Health Clinic
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Health Center (CHC)
- Day and home care programs (e.g. Home Health)
- Emergency Room
- FQHC or look - alike
- Geriatric consultation services
- International nonprofit/nongovernmental organization
- Long - term Care Facility
- Home-based Primary Care
- National health association or affiliate
- Other community health center (e.g.; free clinic)
- School - based clinic
- Residential Living Facility
- State Government Office or Agency
- Tribal Health Department
- Acute care services
- Community - based organization
- Community - based care programs for elderly mentally challenged individuals
- Critical Access Hospital
- Federal and State Bureau of Prisons
- Geriatric ambulatory care and comprehensive units
- Hospice
- Independent Living Facility
- Local Government Office or Agency
- Mobile Clinic/Site
- Nursing Home
- 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
- Tribal Organization

- Surgery Clinic
- Veterans Affairs Hospital or clinic



Note: If you select "Other" in Column 3, provide an explanation in the comments field and reference the site name.

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

Select Type of Setting Where the Site was Located
(4) Block 2

Figure 62. EXP-1 - Selecting Type of Setting Where the Site was Located

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

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



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



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>

EXP-1 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia used to Offer Training at this Site
(5)

Figure 63. EXP-1 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia used to Offer Training at this Site: Select the type(s) of partnerships or consortia used or established for the purpose of training individuals at each site during the 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
- Area Health Education Centers
- Federal Government - Veterans Affairs
- Geriatric Behavioral or Mental Health Units
- Critical Access Hospital
- Federal Government - CDC
- Federal Government - NIH
- Federal Government - Other HHS Agency/Office
- Local Government
- Federal Government - CMS
- Physical therapy/Rehabilitation center
- Senior Center
- Federally - qualified health center or look-alikes
- Health department - State
- Academic department - within the institution
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Mental Health Center
- Federal Government - Department of Defense/Military
- Federal Government - ACL
- Federal Government - AHRQ
- Federal Government - FDA
- Federal Government - Other
- Hospital
- Long-term care facility
- Nursing home
- Professional Associations
- State Governmental Programs
- Tribal Organization
- Health department - Tribal
- Health policy center
- Community Health Center (CHC)
- Alzheimer's Association/Chapters
- Area Agencies on Aging
- Educational institution (Grades K - 12)
- Geriatric ambulatory care and comprehensive units
- Geriatric consultation services
- Health center (e.g.; free clinic)
- Federal Government - IHS
- Hospice
- Federal Government - SAMHSA
- Nonprofit organization
- Other
- Quality improvement organization
- Tribal Government
- Health department - Local
- Health disparities research center
- Nurse Managed Health Clinics
- No partners/consortia used

- Health insurance/Healthcare Provider Group (e.g.; PPO/HMO)
- Private/For - profit organization
- Rural Health Clinic



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

Select Type(s) of Vulnerable Population Served at this Site
(7)

Figure 64. 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 HIV/AIDS
- Low income persons/families
- Older adults
- Refugee Adults
- Unemployed
- Victims of abuse or trauma
- Children
- Health Insurance Marketplace eligible Individuals
- Individuals with mental illness or substance use disorders
- Migrant workers
- People with disabilities
- Returning war veterans (Iraq or Afghanistan)
- Uninsured/Underinsured persons/families
- Tribal Population
- Chronically ill
- Homeless individuals
- Lesbian/Gay/Bisexual/Transgender
- Military and/or military families
- Pregnant women and infants
- Undocumented Immigrants
- Veterans
- None of the above



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

EXP-1 - Entering Site's geographical Data

Enter Zip Code	City	State	Four Digit Zip Code Extension
(8)	(9)	(10)	(11)

Figure 65. EXP-1 - Entering Site's geographical Data

City:

State:

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 accessed at 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 - Entering Site's Payment Model

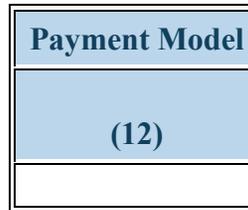


Figure 66. EXP-1 - Entering Site's Payment Model

Payment Model: Select the payment model(s) used by each training site by clicking on the dropdown menu below Column 12 and selecting all that apply:

- ACO
- Bundled Payments
- Charity Care
- CHIP
- Dual Eligible (Medicaid & Medicare)
- Medicaid
- Medicare
- Military TRICARE
- Other Private Insurance
- Other Public
- Patient Centered Medical Home
- PPO
- Self - Pay
- Sliding Scale
- Uninsured
- VA
- Workman's Comp
- N/A



Note: N/A cannot be selected in combination with any other option.

EXP-1 - Selecting Whether the Training Site Implements Interprofessional Education and/or Practice

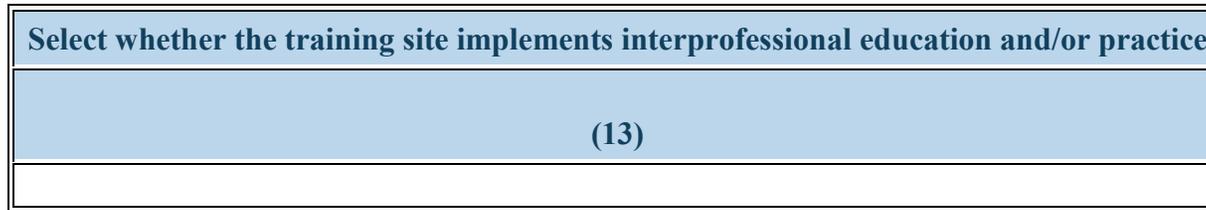


Figure 67. EXP-1 - Selecting Whether the Training Site Implements Interprofessional Education and/or Practice

Select 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
(14)

Figure 68. EXP-1 - Selecting any HHS Priorities Addressed at this Site

Select any HHS Priorities Addressed at this Site: Select any HHS Priorities 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.

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

Figure 69. EXP-2 - Selecting Training Program and Site Name

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

Site Name: Pair the selected training program with a site name by clicking on the drop-down menu in Column 2 (Block 1) and choosing one of the available options (sites that were marked in EXP-1 as “used” in the current reporting period). **Repeat this process** until all used Training Program/Site combinations used in EXP-2 are present.



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



Note: The EXP-2 form will initially appear blank.

EXP-2 - Selecting Profession and Discipline of Individuals Trained

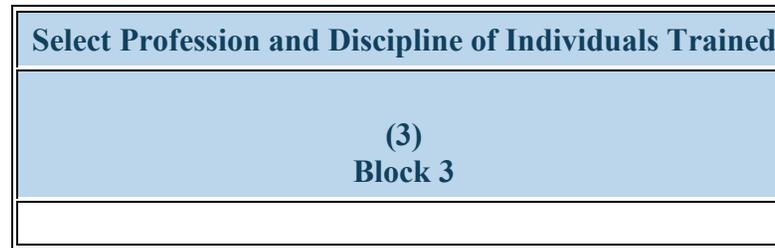


Figure 70. EXP-2 - Selecting Profession and Discipline of Individuals Trained

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 - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Obstetrics and Gynecology
- Medicine - Other
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Prosthodontic Dentistry
- Medicine - Emergency Medicine
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Medical Genetics
- Medicine - Occupational Medicine
- Medicine - Palliative Care
- Medicine - Preventive Medicine/Internal Medicine
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Ethics
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Student - Other - Physical Therapy
- Student - Physician Assistant
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Occupational Medicine
- Nursing - Alternative/ Complementary Nursing
- Nursing - CNL - Generalist

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- Medicine - Preventive
Medicine/Family Medicine
- Medicine - Preventive
Medicine/Public Health
- Nursing - Certified Nurse Assistant
(CNA)
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Medical Ethics
- Nursing - CNS - Women's health
- Nursing - Licensed
practical/vocational nurse
(LPN/LVN)
- Nursing - NP - Adult gerontology
- Nursing - NP - Family
- Nursing - NP - Medical Ethics
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Patient Care Associate
(PCA)
- Nursing - Researcher/Scientist
- Other - Chiropractor
- Other - Facility Administrator
- Other - Geriatric Educator
- Other - Lay Caregiver
- Other - Midwife (non-nurse)
- Other - Patient
- Other - Physical Therapy
- Other - Radiologic technology
- Other - Speech Therapy
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control &
Prevention
- Medicine - Psychiatry
- Nursing - Certified Nurse Midwife
(CNM)
- Nursing - CNS - Family
- Nursing - CNS - Palliative Care
- Nursing - Community health
nursing
- Nursing - NP - Acute care adult
gerontology
- Nursing - NP - Adult
Psychiatric/Mental health
- Nursing - NP - Family
Psychiatric/Mental Health
- Nursing - NP - Palliative Care
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Public Health Nurse
(PHN)
- Other - Allied Health
- Other - Community Health Worker
(CHW)
- Other - Family Caregiver
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Podiatry
- Other - Registered Dietician
- Other - Unknown
- Public Health - Disease Prevention
& Health Promotion
- Public Health - Health Policy &
Management
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Home Health Aide
- Nursing - NP - Adult
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Psychiatric/Mental health
- Nursing - Nurse anesthetist
- Nursing - Other
- Nursing - Registered Nurse (RN)
- Other - Audiology
- Other - Direct Service Worker
- Other - First Responder/EMT
- Other - Health Informatics/Health Information
Technology
- Other - Medical Laboratory Technology
- Other - Optometry
- Other - Pharmacy Aid
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Infectious Disease Control
- Student - Alternative/Complementary Nursing
- Student - Certificate - ENT
- Student - CNS - Family
- Student - CNS - Psychiatric/Mental health
- Student - Dental Assistant
- Student - Graduate - Marriage and Family Therapy
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Home Health Aide
- Student - Midwife (non - nurse)

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- Student - Certificate - CHW
- Student - Certificate - Pharmacy Aid
- Student - CNS - Geropsychiatric
- Student - CNS - Women's health
- Student - Dental Hygiene
- Student - Graduate - Nursing Doctorate
- Student - Graduate - Professional Counseling
- Student - Graduate - Social Work
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - NP - Acute care adult gerontology
- Student - NP - Adult 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 - Registered Nurse - BSN
- Student - Undergraduate - Social Work
- Public Health - Social & Behavioral Sciences
- Student - Certificate - CNA
- Student - CNS - Adult gerontology
- Student - CNS - Palliative Care
- Student - Community Health Nursing
- Student - Dental School
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Health Informatics
- Student - Medical School
- Student - NP - Adult
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Palliative Care
- Student - Nurse Administrator
- Student - Nurse Midwife
- Student - Pharmacy School
- Student - Undergraduate - Other
- Student - NP - Adult gerontology
- Student - NP - Family
- Student - NP - Medical Ethics
- Student - NP - Psychiatric/Mental health
- Student - Nurse Anesthetist
- Student - Nurse Researchers/Scientists
- Student - Registered nurse (RN)
- Student - Undergraduate - Public Health



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

Enter # Trained in this Profession and Discipline
(4) Block 3

Figure 71. EXP-2 - Entering # Trained in the Profession and Discipline

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



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: Do not enter counts for 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 72. 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: In Column 5 (Block 8), enter the number of all **OTHER** Interprofessional trainees who participated in team-based care alongside the Principal trainee. Counts provided should be based on individuals NOT reported on INDGEN.



Warning: Do not count faculty, site staff, or other non-trainees.



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 received support from or have an association with your HRSA grant.

EXP-2 - Adding Individuals Trained Example 1

Example: Example 1: Principal Residents ONLY (no interprofessional trainees)

In this example, the medical residents from the Family Medicine residency program do not have interprofessional experiences. The medical residents trained at 3 different clinical training sites.

- *At the first site, there were 24 Family Medicine residents and no interprofessional trainees at North Regional Hospital.*
- *At the second site, there were 10 Family Medicine residents and no interprofessional trainees at Community Physicians.*
- *At the third site, there were 4 Family Medicine residents and no interprofessional trainees at the Doctor's Clinic.*

No.	Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline	Enter # of Other Trainees in this Profession and Discipline Who Participated in <u>Interprofessional</u> Team-based care
	(1)	(2) Block 1	(3) Block 3	(4) Block 3	(5) Block 8
1	Residency Family Medicine	North Regional Hospital	Medicine-Family Medicine	24	0
2	Residency Family Medicine	Community Physicians	Medicine-Family Medicine	10	0
3	Residency Family Medicine	Doctor's Clinic	Medicine-Family Medicine	4	0

Figure 73. EXP-2 - Adding Individuals Trained Example 1

EXP-2 - Adding Individuals Trained Example 2

Example:

Example 2: Principal AND Interprofessional Trainees

- In the example on this page, the Residency in Family Medicine program trained 24 of its family medicine residents at North Regional Hospital. As part of Interprofessional team-based care, the Family Medicine residency program also trained 2 Internal Medicine residents and 3 graduate students in psychology.
- At a second site, the Family Medicine residency trained 14 of its medical residents alongside 4 pharmacy students who were part of interprofessional team-based care.

No.	Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline	Enter # of Other Trainees in this Profession and Discipline Who Participated in <u>Interprofessional</u> Team-based care
	(1)	(2) Block 1	(3) Block 3	(4) Block 3	(5) Block 8
1	Residency Family Medicine	North Regional Hospital	Medicine-Family Medicine	24	0
2	Residency Family Medicine	North Regional Hospital	Medicine-Internal Medicine	0	2
3	Residency Family Medicine	North Regional Hospital	Student-Graduate-Psychology	0	3
4	Residency Family Medicine	Community Physicians	Medicine-Family Medicine	14	0
5	Residency Family Medicine	Community Physicians	Student-Pharmacy School	0	4

Figure 74. EXP-2 - Adding Individuals Trained Example 2

EXP-2 - Adding Individuals Trained Example 3

Example:

Example 3: Principal AND Interprofessional Trainees

- In the example on this page, the Family Medicine residency program trained 24 of its own medical residents at North Regional Hospital. As part of Interprofessional team-based care, the Family Medicine residency also trained 10 Family Medicine residents from non-HRSA funded residency programs, 2 Internal Medicine residents and 5 pharmacy students.
- At a second site, the Family Medicine residency trained 10 of its own medical residents alongside 8 additional Family Medicine residents from different Family Medicine residency programs as well as 4 physical therapy students who were part of interprofessional team-based care.

No.	Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline	Enter # of Other Trainees in this Profession and Discipline Who Participated in <u>Interprofessional</u> Team-based care
	(1)	(2) Block 1	(3) Block 3	(4) Block 3	(5) Block 8
1	Residency Family Medicine	North Regional Hospital	Medicine-Family Medicine	24	10
2	Residency Family Medicine	North Regional Hospital	Medicine-Internal Medicine	0	2
3	Residency Family Medicine	North Regional Hospital	Student-Pharmacy School	0	5
4	Residency Family Medicine	Community Physicians	Medicine-Family Medicine	10	8
5	Residency Family Medicine	Community Physicians	Student-Physical Therapy	0	4

Figure 75. EXP-2 - Adding Individuals Trained Example 3

EXP-2 - Selecting Type of Site Used

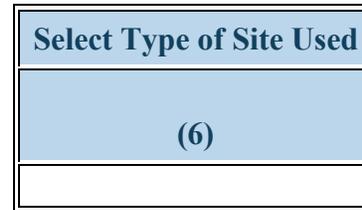


Figure 76. EXP-2 - Selecting Type of Site Used

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

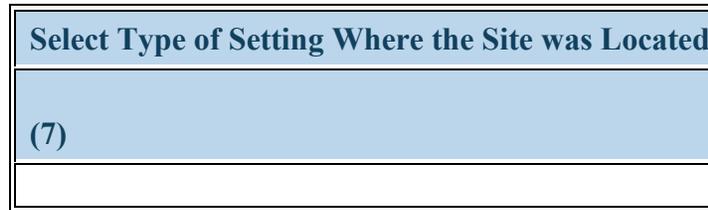
- Academic institution
- Aerospace operations setting
- Assisted Living Community
- Community Mental Health Center
- Dentist Office
- Federal Government Office or Agency
- Geriatric Behavioral or Mental Health Units
- Hospital
- Indian Health Service (IHS) site
- Local health department
- Nurse Managed Health Clinics
- Other
- Physician Office
- Senior Centers
- Rural Health Clinic
- Surgery Clinic
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Health Center (CHC)
- Day and home care programs (e.g. Home Health)
- Emergency Room
- FQHC or look - alike
- Geriatric consultation services
- International nonprofit/nongovernmental organization
- Long - term Care Facility
- Home-based Primary Care
- National health association or affiliate
- Other community health center (e.g.; free clinic)
- School - based clinic
- Residential Living Facility
- State Government Office or Agency
- Tribal Health Department
- Acute care services
- Community - based organization
- Community - based care programs for elderly mentally challenged individuals
- Critical Access Hospital
- Federal and State Bureau of Prisons
- Geriatric ambulatory care and comprehensive units
- Hospice
- Independent Living Facility
- Local Government Office or Agency
- Mobile Clinic/Site
- Nursing Home
- 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
- Tribal Organization

- Veterans Affairs Hospital or clinic



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

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



The image shows a screenshot of a web form. At the top, there is a blue header bar with the text "Select Type of Setting Where the Site was Located" in white. Below the header is a dropdown menu with a light blue background. The number "(7)" is displayed in the dropdown, indicating it is the selected option. The dropdown is enclosed in a double-line border.

Figure 77. 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



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



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



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

Course Development and Enhancement-CDE Subforms

CDE - Introduction

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?	<input checked="" type="checkbox"/> Yes (complete CDE-1 and CDE-2) <input type="checkbox"/> No (Click Save and Validate to proceed to the next form)
--	--

Figure 78. 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
(1) Block 1

Figure 79. CDE-1 - Entering the Name of Course/Training Activity

Name of Course or Training Activity:

Enter the name of each course or training activity that was developed or enhanced through the grant at any point during the entire project period. 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

Select Type of Course or Training Activity
(2) Block 2

Figure 80. 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
- Community Forum
- Faculty development programs or activities
- Grand rounds
- Clinical rotation
- Continuing Education courses
- Field placement/practicum
- Training/Workshop for health professions students fellows or residents

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

Select whether Course or Training Activity was Newly Developed or Enhanced
(3) Block 3

Figure 81. CDE-1 - Selecting whether Course was Newly Developed or Enhanced

Select whether Course or Training Activity was Newly Developed or Enhanced: Select whether each course or training activity identified 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.

CDE-1 - Entering Development/Enhancement Status



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

Select Status of Development or Enhancements
(4) Block 4

Figure 82. CDE-1 - Entering Development/Enhancement Status

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

- Developed not yet implemented
- Implemented
- Under development

CDE-1 - Selecting Delivery Mode

Select Delivery Mode Used to Offer this Course or Training Activity
(8) Block 6

Figure 83. CDE-1 - Selecting Delivery Mode

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

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

CDE-1 - Selecting Primary Topic Area

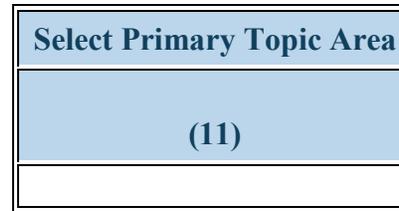


Figure 84. CDE-1 - Selecting Primary Topic Area

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.

CDE-1 - Selecting Whether the Course or Training Activity was Offered in the Current Reporting Period

Select Whether the Course or Training Activity was Offered in the Current Reporting Period
(12)

Figure 85. CDE-1 - Selecting Whether the Course or Training Activity was Offered in the Current Reporting Period

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.

Name of Course or Training Activity	Profession and Discipline of Individuals Trained
(1) Block 1	(2) Block 7

Figure 86. CDE-2 - Adding Courses and Profession/Disciplines

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 - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Other
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Public Health Dentistry

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- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Occupational Medicine
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Occupational Medicine
- Nursing - Alternative/Complementary Nursing
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Home Health Aide
- Nursing - NP - Adult
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Psychiatric/Mental health
- Nursing - Nurse anesthetist
- Nursing - Other
- Nursing - Registered Nurse (RN)
- Other - Chiropractor
- Other - Facility Administrator
- Other - Geriatric Educator
- Other - Lay Caregiver
- Other - Midwife (non-nurse)
- Other - Pharmacy
- Other - Profession Not Listed
- Dentistry - Prosthodontic Dentistry
- Medicine - Emergency Medicine
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Medical Genetics
- Medicine - Other
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Public Health
- Nursing - Certified Nurse Assistant (CNA)
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Medical Ethics
- Nursing - CNS - Women's health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult gerontology
- Nursing - NP - Family
- Nursing - NP - Medical Ethics
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Patient Care Associate (PCA)
- Nursing - Researcher/Scientist
- Other - Community Health Worker (CHW)
- Other - Family Caregiver
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Optometry
- Medicine - Ethics
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Obstetrics and Gynecology
- Medicine - Palliative Care
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Psychiatry
- Nursing - Certified Nurse Midwife (CNM)
- Nursing - CNS - Family
- Nursing - CNS - Palliative Care
- Nursing - Community health nursing
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Palliative Care
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Public Health Nurse (PHN)
- Other - Audiology
- Other - Direct Service Worker
- Other - First Responder/EMT
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Patient
- Other - Podiatry
- Other - Registered Dietician
- Other - Allied Health
- Other - Speech Therapy
- Public Health - Disease Prevention & Health Promotion

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- Other - Respiratory Therapy
- Other - Occupational Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Infectious Disease Control
- Student - Alternative/Complementary Nursing
- Student - Certificate - ENT
- Student - CNS - Family
- Student - CNS - Psychiatric/Mental health
- Student - Dental Assistant
- Student - Graduate - Marriage and Family Therapy
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Home Health Aide
- Student - Midwife (non-nurse)
- Student - NP - Adult gerontology
- Student - NP - Family
- Student - NP - Medical Ethics
- Student - NP - Psychiatric/Mental health
- Student - Nurse Anesthetist
- Student - Nurse Researchers/Scientists
- Student - Physician Assistant
- Student - Undergraduate - Other
- Student - Other - Physical Therapy

- Other - Pharmacy Aid
- Other - Radiologic technology
- Other - Unknown
- Other - Physical Therapy
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention
- Student - Certificate - CHW
- Student - Certificate - Pharmacy Aid
- Student - CNS - Geropsychiatric
- Student - CNS - Women's health
- Student - Dental Hygiene
- Student - Graduate - Nursing Doctorate
- Student - Graduate - Professional Counseling
- Student - Graduate - Social Work
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - NP - Acute care adult gerontology
- Student - NP - Adult 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 - Registered nurse (RN)

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- Public Health - Health Policy & Management
- Public Health - Social & Behavioral Sciences
- Student - Certificate - CNA
- Student - CNS - Adult gerontology
- Student - CNS - Palliative Care
- Student - Community Health Nursing
- Student - Dental School
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Health Informatics
- Student - Medical School
- Student - NP - Adult
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Palliative Care
- Student - Nurse Administrator
- Student - Nurse Midwife
- Student - Pharmacy School
- Student - Registered Nurse - BSN
- Student - Undergraduate - Social Work

- Student - Undergraduate - Public Health



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 87. 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
(4) Block 2

Figure 88. 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

CDE-2 - Selecting whether Course was Newly Developed or Enhanced

Select whether Course or Training Activity was Newly Developed or Enhanced
(5) Block 3

Figure 89. CDE-2 - Selecting whether Course was Newly Developed or Enhanced

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

CDE-2 - Selecting Delivery Mode

Select Delivery Mode Used to Offer this Course or Training Activity
(7) Block 6

Figure 90. CDE-2 - Selecting Delivery Mode

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

CDE-2 - Selecting Primary Topic Area

Select Primary Topic Area
(8)

Figure 91. CDE-2 - Selecting Primary Topic Area

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

CDE-2 - Selecting Whether the Course or Training Activity was Offered in the Current Reporting Period

Select Whether the Course or Training Activity was Offered in the Current Reporting Period
(9)

Figure 92. CDE-2 - Selecting Whether the Course or Training Activity was Offered in the Current Reporting Period

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

Purpose of FD Subforms:

- The FD-1 subforms collect information about the characteristics and the trainees of structured faculty development programs.
- The FD-2 subforms collect information about the characteristics and the trainees of faculty development activities.
- The FD-4 subforms collect information about the characteristics of faculty-instructed courses.

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

FD-1a - Adding Structured Faculty Development Programs

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

Program Name
(1)

Figure 93. FD-1a - Adding Structured Faculty Development Programs

Program Name:

Review Prior Records (*Ongoing and Complete*):

- Column 1 (Block 1) will prepopulate with data from prior structured training programs used in previous reporting periods.
- Review the programs available. If no additional structured faculty development programs were supported through the grant during the current annual reporting period other than prior records, proceed to FD-1a, Step 1.

Add New Records (*Ongoing and Complete*):

1. Enter the name of each new structured faculty development program coordinated and/or supported through the grant during the current annual reporting period.
2. Select “Add Record”.
3. Repeat this process as necessary to enter each new structured faculty development program that was coordinated and/or supported through the grant during the current annual reporting period.

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

FD-1a - Selecting Program Status

Select Program Status in the Current Reporting Period
(1a)

Figure 94. FD-1a - Selecting Program Status

Select Program Status in the Current Reporting Period: For all records (*New and Prior*): select the status of each structured faculty development program at the end of the annual reporting period by clicking on the drop-down menu under Block 1a and choosing **one** of the following options:

- Complete
- Ongoing



*Note: Select 'Ongoing' if the training program did not conclude by **June 30, 2019**.*



*Note: Select 'Complete' if the training program concluded at some point during the annual reporting period (i.e. **July 01, 2018 - June 30, 2019**)*

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

Select Whether this was a Degree Bearing Program	For Degree-bearing Programs		For Non-Degree Bearing Program, Enter Length of Training Program in Clock Hours
	Select Type of Degree Offered	Select Primary Focus Area	
(2) Block 2	(3) Block 2a	(4) Block 2b	(5) Block 3

Figure 95. FD-1a - Entering Program Information for Degree/Non-Degree Programs

Select Whether this was a Degree Bearing Program: Review Prior Records (*Ongoing and Complete*): Column 2 (Block 2) will prepopulate for prior records with data submitted in previous reporting periods.

Add New Records (*Ongoing and Complete*): Select whether each faculty development training program that was supported through the grant during the annual 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: Review Prior Records (*Ongoing and Complete*): Column 3 (Block 2a) will prepopulate for prior records with data submitted in previous reporting periods.

Add New Records: If you selected “Yes” in Column 2 (Block 2), select the type of degree that participants will earn when completing each program by clicking on the drop-down menu in Column 3 (Block 2a) and choosing **one** of the options below:

If you selected “No” in Column 2 (Block 2), select “N/A” in Column 3 (Block 2a).

- Certificate
- Post-Masters Certificate

- N/A

For Degree-bearing Programs: Select Primary Focus Area: Review Prior Records (*Ongoing and Complete*): Column 4 (Block 2b) will prepopulate for prior records with data submitted in previous reporting periods.

Add New Records (*Ongoing and Complete*):

- 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 structured faculty development program by clicking on the drop-down menu in Column 4 (Block 2b) and choosing **one** of the options below:

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Occupational Medicine
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Occupational Medicine
- Nursing - Alternative/ Complementary Nursing
- Nursing - CNL - Generalist
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Prosthodontic Dentistry
- Medicine - Emergency Medicine
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Medical Genetics
- Medicine - Other
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Public Health
- Nursing - Certified Nurse Assistant (CNA)
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Medical Ethics
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Ethics
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Obstetrics and Gynecology
- Medicine - Palliative Care
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Psychiatry
- Nursing - Certified Nurse Midwife (CNM)
- Nursing - CNS - Family
- Nursing - CNS - Palliative Care
- Nursing - Community health nursing
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult Psychiatric/Mental health

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- | | | |
|--|---|--|
| <ul style="list-style-type: none"> • Nursing - CNS - Geropsychiatric • Nursing - CNS - Psychiatric/Mental health • Nursing - Home Health Aide • Nursing - NP - Adult • Nursing - NP - Emergency care • Nursing - NP - Geropsychiatric • Nursing - NP - Psychiatric/Mental health • Nursing - Nurse Anesthetist • Nursing - Other • Nursing - Registered Nurse (RN) • Other - Audiology • Other - Direct Service Worker • Other - First Responder/EMT • Other - Health Informatics/Health Information Technology • Other - Medical Laboratory Technology • Other - Optometry • Other - Pharmacy Aid • Other - Profession Not Listed • Other - Respiratory Therapy • Physician Assistant • Public Health - Environmental Health • Public Health - Infectious Disease Control • Other Focus Area | <ul style="list-style-type: none"> • Nursing - CNS - Women's health • Nursing - Licensed Practical/Vocational Nurse (LPN/LVN) • Nursing - NP - Adult gerontology • Nursing - NP - Family • Nursing - NP - Medical Ethics • Nursing - NP - Women's health • Nursing - Nurse Educator • Nursing - Patient Care Associate (PCA) • Nursing - Researcher/Scientist • Other - Chiropractor • Other - Facility Administrator • Other - Geriatric Educator • Other - Lay Caregiver • Other - Midwife (non-nurse) • Other - Patient • Other - Physical Therapy • Other - Radiologic technology • Other - Speech Therapy • Public Health - Biostatistics • Public Health - Epidemiology • Public Health - Injury Control & Prevention • N/A | <ul style="list-style-type: none"> • Nursing - NP - Family Psychiatric/Mental Health • Nursing - NP - Palliative Care • Nursing - Nurse Administrator • Nursing - Nurse Informaticist • Nursing - Public Health Nurse (PHN) • Other - Allied Health • Other - Community Health Worker (CHW) • Other - Family Caregiver • Other - Health Education Specialist • Other - Medical Assistant • Other - Occupational Therapy • Other - Pharmacy • Other - Podiatry • Other - Registered Dietician • Other - Unknown • Public Health - Disease Prevention & Health Promotion • Public Health - Health Policy & Management • Public Health - Social & Behavioral Sciences |
|--|---|--|

For Non-Degree Bearing Program, Enter Length of Training Program in Clock Hours: Review Prior Records (*Ongoing and Complete*), Column 5 (Block 3) will prepopulate for prior records with data submitted in previous reporting periods.

Add New Records:

If you selected “Yes” in Column 2 (Block 2), enter a zero (“0”) in Column 5, (Block 3).

If you selected “No” in Column 2 (Block 2), enter the length of each non-degree bearing structured faculty development program in clock hours in the textbox in Column 5 (Block 3).

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



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

Enter the % of Time Spent Developing Competencies for the Following Roles			
Clinician	Administrator	Educator	Researcher
(6) Block 5	(7) Block 5	(8) Block 5	(9) Block 5

Figure 96. FD-1a - Entering % of Time Spent Developing Competencies in Different Roles

Enter the % of Time Spent Developing Competencies for the Following Roles: Clinician:

Review Prior Records (*Ongoing and Complete*): Columns 6(Block 5) will prepopulate for prior records with data submitted in previous reporting periods.

Add New Records (*Ongoing and Complete*): Enter the percentage of time spent in each structured faculty development program developing competencies associated with Clinician in Column 6(Block 5).

Enter the % of Time Spent Developing Competencies for the Following Roles: Administrator:

Review Prior Records (*Ongoing and Complete*): Columns 6(Block 5) will prepopulate for prior records with data submitted in previous reporting periods.

Add New Records (*Ongoing and Complete*): Enter the percentage of time spent in each structured faculty development program developing competencies associated with administrator Column 7(Block 5).

Enter the % of Time Spent Developing Competencies for the Following Roles: Educator:

Review Prior Records (*Ongoing and Complete*): Columns 6(Block 5) will prepopulate for prior records with data submitted in previous reporting periods.

Add New Records (*Ongoing and Complete*): Enter the percentage of time spent in each structured faculty development program developing competencies associated with Educator Column 8(Block 5).

Enter the % of Time Spent Developing Competencies for the Following Roles: Researcher:

Review Prior Records (*Ongoing and Complete*): Columns 6(Block 5) will prepopulate for prior records with data submitted in previous reporting periods.

Add New Records (*Ongoing and Complete*): Enter the percentage of time spent in each structured faculty development program developing competencies associated with Researcher Column 9(Block 5).



Note: Percentages of time spent across the faculty four roles must total 100%.

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

Enter # of Faculty Who Completed the Program
(10) Block 6

Figure 97. FD-1a - Entering # of Faculty Who Completed the Program

Enter # of Faculty Who Completed the Program: All Records *(New and Prior)*:

- If you marked a program as “**Complete**” in Column 1a, **enter the number of faculty who completed** each structured faculty development program during the current annual reporting period in the textbox in Column 10 (Block 6).
- If you selected “**Ongoing**” in Column 1a, **enter a zero (“0”)** in the textbox in Column 10 (Block 6).

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

Select whether any Faculty Received any type of BHW-Funded Financial Award during the Training Program
(11) Block 7

Figure 98. 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: Review Prior Records (*Ongoing and Complete*): Column 11 (Block 7) will prepopulate for prior records with data submitted in previous reporting periods.
Add New Records (*Ongoing and Complete*) : Select **whether any faculty** who participated in a training program **received any type of BHW-funded financial award** during the current annual 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 faculty who received a BHW-funded financial award during the current reporting period for participating in a structured faculty development program.



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

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

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



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

Program Name	Profession and Discipline of Faculty Trained
(1)	(2) Block 4

Figure 99. FD-1b - Adding Profession and Discipline for Structured Programs

Program Name:

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

Profession and Discipline of Faculty Trained: 2. Select the profession(s) and discipline(s) of all faculty members who participated in each structured faculty development program during the annual reporting period by choosing **all that apply** from the following options.

3. Select **“Add Record”**

Repeat this process to capture the profession and discipline of all faculty members who participated in each structured faculty development program during the current annual reporting period.

Choose **all** that apply:

- | | | |
|--|---|--|
| <ul style="list-style-type: none"> • Behavioral Health - Clinical Psychology • Behavioral Health - Other Psychology • Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling | <ul style="list-style-type: none"> • Behavioral Health - Clinical Social Work • Behavioral Health - Marriage and Family Therapy | <ul style="list-style-type: none"> • Behavioral Health - Counseling Psychology • Behavioral Health - Pastoral/Spiritual Care |
|--|---|--|

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- Dentistry - Dental Assistant
- Dentistry - Orthodontic Dentistry
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Integrative Medicine
- Other - Direct Service Worker
- Medicine - Medical Genetics
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Unknown
- Public Health - Health Policy & Management
- Medicine - Preventive Medicine/Internal Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Epidemiology
- Public Health - Social & Behavioral Sciences
- Nursing - CNS - Family
- Medicine - Palliative Care
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Geropsychiatric
- Nursing - Nurse anesthetist
- Nursing - Researcher/Scientist
- Nursing - Certified Nurse Midwife (CNM)
- Other - Facility Administrator
- Nursing - CNS - Palliative Care
- Nursing - Community health nursing
- Other - Podiatry
- Nursing - NP - Medical Ethics
- Nursing - Patient Care Associate (PCA)

- Dentistry - Endodontic Dentistry
- Dentistry - Oral Surgery Dentistry
- Dentistry - Other
- Dentistry - Prosthodontic Dentistry
- Medicine - Emergency Medicine
- Medicine - General Preventive Medicine
- Nursing - NP - Family
- Medicine - Other
- Medicine - Psychiatry
- Nursing - Other
- Other - Physical Therapy
- Medicine - Occupational Medicine
- Medicine - Ethics
- Medicine - Physical Medicine and Rehabilitation
- Public Health - Biostatistics
- Medicine - Preventive Medicine/Public Health
- Public Health - Infectious Disease Control
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - Home Health Aide
- Nursing - NP - Adult
- Nursing - NP - Emergency care
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Alternative/Complementary Nursing
- Other - Allied Health
- Nursing - CNS - Medical Ethics

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- Dentistry - General Dentistry
- Dentistry - Dental Hygiene
- Dentistry - Pathology Dentistry
- Dentistry - Public Health Dentistry
- Nursing - CNS - Psychiatric/Mental health
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Internal Medicine/Family Medicine
- Other - Health Education Specialist
- Other - Occupational Therapy
- Medicine - Obstetrics and Gynecology
- Other - Registered Dietician
- Physician Assistant
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Occupational Medicine
- Public Health - Environmental Health
- Public Health - Injury Control & Prevention
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Women's health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult gerontology
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Certified Nurse Assistant (CNA)

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- Other - Audiology
- Other - Geriatric Educator
- Other - Patient

- Other - Health Informatics/Health Information Technology
- Other - Midwife (non-nurse)
- Other - Respiratory Therapy
- Nursing - NP - Palliative Care
- Nursing - Public Health Nurse (PHN)
- Other - Community Health Worker (CHW)
- Other - Lay Caregiver
- Other - Pharmacy Aid

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- Other - Chiropractor
- Other - First Responder/EMT
- Other - Medical Assistant
- Other - Optometry
- Other - Speech Therapy
- Nursing - NP - Psychiatric/Mental health
- Nursing - Registered Nurse (RN)
- Other - Family Caregiver
- Other - Medical Laboratory Technology
- Other - Radiologic technology

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

Enter # Trained in this Profession and Discipline
(3) Block 4

Figure 100. FD-1b - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline:

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



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

FD-2a: Faculty Development - Faculty Development Activities

FD-2a - Entering Faculty Development Activities

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

Activity Name
(1)

Figure 101. FD-2a - Entering Faculty Development Activities

Activity Name:

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

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.

Select Type of Faculty Development Activity Offered	For Courses or Workshops	
	Select Whether Activity is Accredited for Continuing Education Credit	Select Whether Attendance was to Acquire or Maintain Professional Certification
(2) Block 8	(3) Block 8a	(4) Block 8b

Figure 102. FD-2a - Selecting Type of Faculty Development Activity Offered

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

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

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

- For Clinical Rotations and Grand Rounds for Continuing Education, as well as Professional Conferences (as selected in Column 2, Block 8), Select N/A for Column 3 (Block 8a)
- For Academic Courses and Trainings/Workshops for Continuing Education (as selected in Column 2, Block 8), select whether these activities are accredited for continuing education credit by clicking on the drop-down menu under Column 3 (Block 8a) and choosing

- Yes
- No
- N/A

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

- For Clinical Rotations and Grand Rounds for Continuing Education, as well as Professional Conferences (as selected in Column 2, Block 8), Select N/A for Column 4 (Block 8b)
- For Academic Courses and Trainings/Workshops for Continuing Education (as selected in Column 2, Block 8), select whether attendance by faculty was for the purposes of acquiring or maintaining a professional certification by clicking on the drop-down menu under Column 4 (Block 8b) and choosing one of the following options:

- Yes
- No
- N/A

FD-2a - Entering Duration of Training Activity

Enter Duration of Training Activity in Clock Hours
(5) Block 9

Figure 103. FD-2a - Entering Duration of Training Activity

Enter Duration of Training Activity in Clock Hours: All Records (*Ongoing and Complete*), Enter the duration (in clock hours) of each unstructured faculty development activity in the textbox in Column 5 (Block 9).



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

FD-2a - Selecting Delivery Mode

Select Delivery Mode Used to Offer Training Activity
(6) Block 10

Figure 104. FD-2a - Selecting Delivery Mode

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

- Classroom-based
- 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
(7) Block 11

Figure 105. FD-2a - Selecting Faculty Role(s)

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

- Administrator
- Clinician
- Educator
- Researcher



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

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

FD-2b - Adding Profession and Discipline for Activities



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

Activity Name	Profession and Discipline of Faculty Trained
(1)	(2) Block 12

Figure 106. FD-2b - Adding Profession and Discipline for Activities

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

Profession and Discipline of Faculty Trained:

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

- | | | |
|--|--|--|
| <ul style="list-style-type: none"> ● Behavioral Health - Clinical Psychology ● Behavioral Health - Other Psychology ● Behavioral Health - Other Social Work
Substance Abuse/Addictions Counseling ● Dentistry - Dental Assistant ● Dentistry - Orthodontic Dentistry ● Dentistry - Periodontic Dentistry | <ul style="list-style-type: none"> ● Behavioral Health - Clinical Social Work ● Behavioral Health - Marriage and Family Therapy ● Dentistry - Endodontic Dentistry ● Dentistry - Oral Surgery Dentistry ● Dentistry - Other | <ul style="list-style-type: none"> ● Behavioral Health - Counseling Psychology ● Behavioral Health - Pastoral/Spiritual Care ● Dentistry - General Dentistry ● Dentistry - Dental Hygiene ● Dentistry - Pathology Dentistry |
|--|--|--|

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- Dentistry - Radiology Dentistry
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Integrative Medicine
- Other - Direct Service Worker
- Medicine - Medical Genetics
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Unknown
- Public Health - Health Policy & Management
- Medicine - Preventive Medicine/Internal Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Epidemiology
- Public Health - Social & Behavioral Sciences
- Nursing - CNS - Family
- Medicine - Palliative Care
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Geropsychiatric
- Nursing - Nurse anesthetist
- Nursing - Researcher/Scientist
- Nursing - Certified Nurse Midwife (CNM)
- Other - Facility Administrator
- Nursing - CNS - Palliative Care
- Nursing - Community health nursing
- Other - Podiatry
- Nursing - NP - Medical Ethics
- Nursing - Patient Care Associate (PCA)
- Other - Audiology
- Other - Geriatric Educator

- Dentistry - Prosthodontic Dentistry
- Medicine - Emergency Medicine
- Medicine - General Preventive Medicine
- Nursing - NP - Family
- Medicine - Other
- Medicine - Psychiatry
- Nursing - Other
- Other - Physical Therapy
- Medicine - Occupational Medicine
- Medicine - Ethics
- Medicine - Physical Medicine and Rehabilitation
- Public Health - Biostatistics
- Medicine - Preventive Medicine/Public Health
- Public Health - Infectious Disease Control
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - Home Health Aide
- Nursing - NP - Adult
- Nursing - NP - Emergency care
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Alternative/Complementary Nursing
- Other - Allied Health
- Nursing - CNS - Medical Ethics
- Other - Health Informatics/Health Information Technology
- Other - Midwife (non-nurse)
- Other - Respiratory Therapy

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- Dentistry - Public Health Dentistry
- Nursing - CNS - Psychiatric/Mental health
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Internal Medicine/Family Medicine
- Other - Health Education Specialist
- Other - Occupational Therapy
- Medicine - Obstetrics and Gynecology
- Other - Registered Dietician
- Physician Assistant
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Occupational Medicine
- Public Health - Environmental Health
- Public Health - Injury Control & Prevention
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Women's health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult gerontology
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Certified Nurse Assistant (CNA)
- Other - Chiropractor
- Other - First Responder/EMT
- Other - Medical Assistant

Health Resources and Services Administration
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- Other - Patient

- Nursing - NP - Palliative Care
- Nursing - Public Health Nurse (PHN)
- Other - Community Health Worker (CHW)
- Other - Lay Caregiver
- Other - Pharmacy Aid

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- Other - Optometry
- Other - Speech Therapy
- Nursing - NP - Psychiatric/Mental health
- Nursing - Registered Nurse (RN)
- Other - Family Caregiver
- Other - Medical Laboratory Technology
- Other - Radiologic technology

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

Enter # Trained in this Profession and Discipline
(3) Block 12

Figure 107. FD-2b - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline:

- For each unstructured faculty development activity, **enter the number of faculty in each profession/discipline** who participated in the program in Column 3 (Block 12).
- **Repeat this step** as many times as necessary.



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-4a: Faculty Development - Faculty Instruction

FD-4a - Adding Faculty Instructional Activities

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

Name of the Course or Workshop Offered by the Faculty
(1) Block 17

Figure 108. FD-4a - Adding Faculty Instructional Activities

Name of the Course or Workshop Offered by the Faculty: Enter the name of each new faculty instruction activity coordinated and/or supported through the grant during the current annual reporting period.

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

Select Whether the Course/Workshop was Offered in the Current Reporting Period
(1a)

Figure 109. FD-4a - Selecting Whether the Course was Offered in the Current Period

Select Whether the Course/Workshop was Offered in the Current Reporting Period: Select whether each instructional activity was offered by faculty members during the reporting period by clicking on the drop-down menu in Column 1a and choosing one of the options listed below.

- Yes
- No

FD-4a - Selecting Content Area

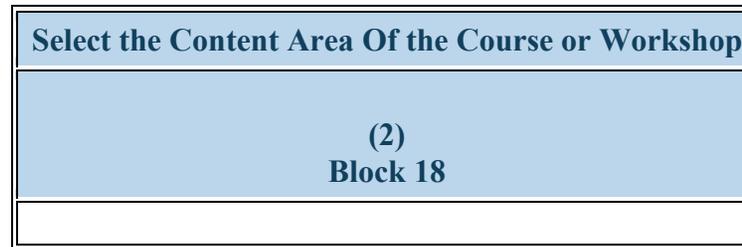


Figure 110. FD-4a - Selecting Content Area

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

- Acute care
- Alcohol and substance misuse/prevention
- Ambulatory care
- Asian Americans
- Behavioral health
- Border Health
- Chronic Disease
- Clinical preventive services
- Cultural Competencies
- Depression
- Drug - resistant diseases
- Emergency preparedness
- Extended care
- Frailty
- Geriatrics
- Health Disparities
- Health Promotion and disease prevention
- Heart disease
- HIV/AIDS
- Hospice Care
- Advocacy/health policy
- Alternative/complementary medicine
- American Indian/Alaska Natives
- Asthma
- Behavioral interventions for primary care
- Cancer
- Chronic disease management
- Communication Skills
- Delirium
- Diabetes
- E - Learning technology
- Ethics and confidentiality
- Falls
- Geriatric education for direct care providers
- Gerontological nursing
- Health information technology
- Health Reform/Health Insurance Marketplaces
- African - Americans
- Alzheimer's disease
- Arthritis
- Behavioral assessment and consultation in primary care
- Bioterrorism/preparedness
- Cardiovascular Disease
- Clinical Practice Information
- Community - Based Care
- Dementia
- Domestic Violence/Interpersonal violence
- Elder abuse
- Evidence Based Medicine/Practice
- Financial planning and management (including budgeting)
- Geriatric medicine
- Health care and older adults
- Health literacy
- Healthy aging
- Hispanics

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- Infection control
- Interactive simulated case studies
- Interprofessional Education
- Lesbian/Gay/Bisexual/Transgender individuals
- Mannequin - based and patient simulators
- Medications/drugs
- Migrant health initiatives
- Native Hawaiian/Pacific Islander
- Oral health
- Pain management
- Patient safety (medical errors)
- Pharmacology
- Prescription drug abuse
- Program evaluation
- Quality improvement and patient safety
- Renal Disease
- Sexual health
- Substance Abuse
- Telemedicine/telehealth
- Transitional care
- Urban health
- Veterans Health
- Women's health

- Hepatitis
- Home health
- Hypertension
- Influenza
- Interdisciplinary training
- Interprofessional integrated models of care
- Long - Term Care
- Medical ethics
- Mental health
- Minority Health
- Nutrition/healthy eating
- Other
- Palliative care
- Perioperative care
- Physical activity/active lifestyles
- Prevention/Primary care
- Pulmonary Disease
- Rehabilitation
- Rural Health
- Sexually transmitted infections
- Suicide
- Tertiary care
- Trauma
- Urgent care
- Violence
- Wound care

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- Homelessness
- Incontinence
- Injury prevention
- Interpersonal skills
- Interprofessional team training
- Malnutrition
- Medication basics
- Mental health and older adults
- Multiple Chronic Diseases
- Obesity
- Other simulated or virtual methods
- Pastoral/Spiritual Care
- Personal care skills
- Polypharmacy
- Primary care
- Quality Improvement
- Rehabilitation Therapies
- Sensory Loss
- Stroke
- Sustainability
- Tobacco cessation
- Tuberculosis
- Veteran Related
- Virtual simulation

FD-4a - Entering Course/Workshop Length

Enter the Length of the Course or Workshop in Clock Hours
(3) Block 19

Figure 111. FD-4a - Entering Course/Workshop Length

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



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



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

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

Enter # of Times the Course or Workshop was Offered
(4) Block 20

Figure 112. FD-4a - Entering # of Times the Course or Workshop was Offered

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



*Note: For instructional activities offered via **distance learning** (reported in Column 5), **enter 999**.*

FD-4a - Selecting Delivery Mode

Select the Delivery Mode Used to Offer the Course or Workshop
(5) Block 22

Figure 113. FD-4a - Selecting Delivery Mode

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

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



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

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

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

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

Name of the Course or Workshop Offered by the Faculty	Profession and Discipline of Individuals Trained
(1) Block 17	(2) Block 21

Figure 114. FD-4b - Adding Profession and Discipline for Faculty Instructional Activities

Name of the Course or Workshop Offered by the Faculty: Select a course name by clicking on the drop-down menu next to "Course or Workshop Offered by the Faculty" and choosing one of the available options.

Profession and Discipline of Individuals Trained:

- Select the profession(s) and discipline(s) all individuals trained in each instructional activity during the current annual reporting period by choosing all that apply from the options below.
- Next, select "Add Record."
- Repeat this process to capture the profession and discipline of all participants for each instructional activity.

- | | | |
|---|---|--|
| <ul style="list-style-type: none"> • Behavioral Health - Clinical Psychology • Behavioral Health - Marriage and Family Therapy • Behavioral Health - Pastoral/Spiritual Care • Dentistry - Endodontic Dentistry • Dentistry - Orthodontic Dentistry • Dentistry - Periodontic Dentistry | <ul style="list-style-type: none"> • Behavioral Health - Clinical Social Work • Behavioral Health - Other Psychology • Dentistry - Dental Assistant • Dentistry - General Dentistry • Dentistry - Other • Dentistry - Prosthodontic Dentistry | <ul style="list-style-type: none"> • Behavioral Health - Counseling Psychology • Behavioral Health - Other Social Work, Substance Abuse/Addictions Counseling • Dentistry - Dental Hygiene • Dentistry - Oral Surgery Dentistry • Dentistry - Pathology Dentistry • Dentistry - Public Health Dentistry • Medicine - Ethics |
|---|---|--|

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- Dentistry - Radiology Dentistry
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Occupational Medicine
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Occupational Medicine
- Nursing - Alternative/Complementary Nursing
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Home Health Aide
- Nursing - NP - Adult
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Psychiatric/Mental health
- Nursing - Nurse anesthetist
- Nursing - Other
- Nursing - Registered Nurse (RN)
- Other - Chiropractor
- Other - Facility Administrator
- Other - Geriatric Educator
- Other - Lay Caregiver
- Other - Midwife (non-nurse)
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Respiratory Therapy

- Medicine - Emergency Medicine
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Medical Genetics
- Medicine - Other
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Preventive Medicine/Public Health
- Nursing - Certified Nurse Assistant (CNA)
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Medical Ethics
- Nursing - CNS - Women's health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult gerontology
- Nursing - NP - Family
- Nursing - NP - Medical Ethics
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Patient Care Associate (PCA)
- Nursing - Researcher/Scientist
- Other - Community Health Worker (CHW)
- Other - Family Caregiver
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Optometry
- Other - Pharmacy Aid

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- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Obstetrics and Gynecology
- Medicine - Palliative Care
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Psychiatry
- Nursing - Certified Nurse Midwife (CNM)
- Nursing - CNS - Family
- Nursing - CNS - Palliative Care
- Nursing - Community health nursing
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Palliative Care
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Public Health Nurse (PHN)
- Other - Audiology
- Other - Direct Service Worker
- Other - First Responder/EMT
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Patient
- Other - Podiatry
- Other - Registered Dietician
- Other - Allied Health
- Other - Speech Therapy
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Management

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- Other - Occupational Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Infectious Disease Control
- Student - Alternative/Complementary Nursing
- Student - Certificate - ENT
- Student - CNS - Family
- Student - CNS - Psychiatric/Mental health
- Student - Dental Assistant
- Student - Graduate - Marriage and Family Therapy
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Home Health Aide
- Student - Midwife (non-nurse)
- Student - NP - Adult gerontology
- Student - NP - Family
- Student - NP - Medical Ethics
- Student - NP - Psychiatric/Mental health
- Student - Nurse Anesthetist
- Student - Nurse Researchers/Scientists
- Student - Physician Assistant
- Student - Undergraduate - Other

- Other - Radiologic technology
- Other - Unknown
- Other - Physical Therapy
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention
- Student - Certificate - CHW
- Student - Certificate - Pharmacy Aid
- Student - CNS - Geropsychiatric
- Student - CNS - Women's health
- Student - Dental Hygiene
- Student - Graduate - Nursing Doctorate
- Student - Graduate - Professional Counseling
- Student - Graduate - Social Work
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - NP - Acute care adult gerontology
- Student - NP - Adult 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 - Registered nurse (RN)

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- Public Health - Social & Behavioral Sciences
- Student - Certificate - CNA
- Student - CNS - Adult gerontology
- Student - CNS - Palliative Care
- Student - Community Health Nursing
- Student - Dental School
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Health Informatics
- Student - Medical School
- Student - NP - Adult
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Palliative Care
- Student - Nurse Administrator
- Student - Nurse Midwife
- Student - Pharmacy School
- Student - Registered Nurse - BSN
- Student - Undergraduate - Social Work

- Student - Undergraduate - Public Health

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

Enter # Trained in this Profession and Discipline
(3) Block 21

Figure 115. FD-4b - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline: Enter the number of individuals from each profession/discipline that were trained in each instructional activity offered by faculty during the current annual reporting period in the textbox in Column 3 (Block 21).



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

Continuing Education Activities—CE Subforms

CE - Introduction

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

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

2. Order of Subforms:

- 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 annual 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.

[View Prior Period Data](#)

CE-1 CE-2

Fields with * are required

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

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

Figure 116. CE-1 - Setup

CE-1 - Entering Course Title

Course Title
(1) Block 1

Figure 117. CE-1 - Entering Course Title

Course Title: Enter the name of each 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 Type of Course or Training Activity

Select Type of Course or Training Activity
(1b)

Figure 118. CE-1 – Selecting Type of Course or Training Activity

Select Type of Course or Training Activity: Select the type of course or training activity by clicking on the drop-down menu and choosing one of the following options:

- Other
- Structured Continuing Education Course
- Unstructured Training Activity



Note: For unstructured activities providing training to patients, family caregivers, and lay caregivers, select \"Unstructured Training Activity\"

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

Select Whether Course is Approved for Continuing Education Credit
(2) Block 2

Figure 119. 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

Enter the Duration of the Course in Clock Hours
(3) Block 3

Figure 120. CE-1 - Entering Course Duration

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



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



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

CE-1 - Entering # of Times Course was Offered

Enter # of Times Course was Offered
(4) Block 4

Figure 121. 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.

CE-1 - Selecting Delivery Mode

Select Delivery Mode Used to Offer Course
(5) Block 5

Figure 122. CE-1 - Selecting Delivery Mode

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
- Other
- 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
(6) Block 6

Figure 123. 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 Association/Chapters
- Area Agencies on Aging
- Community Mental Health Center
- Educational institution (Grades K - 12)
- Federal Government - CDC
- Federal Government - IHS
- Federal Government - Other HHS Agency/Office
- Federal Government - Veterans Affairs
- Geriatric ambulatory care and comprehensive units
- Health center (e.g.; free clinic)
- Health department - Tribal
- Health policy center
- Academic department - within the institution
- Alzheimer’s Disease Resource Centers
- Area Health Education Center
- Critical Access Hospital
- Federal Government - ACL
- Federal Government - Department of Defense/Military
- Federal Government - NIH
- Federal Government - Other HRSA Program
- Federal Government-CMS
- Geriatric Behavioral or Mental Health Units
- Health department - Local
- Health disparities research center
- Hospice
- Long - Term Care Facility
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Health Center (CHC)
- Day and home care programs (i.e. Home Health)
- Federal Government - AHRQ
- Federal Government - FDA
- Federal Government - Other
- Federal Government - SAMHSA
- FQHC or look-alike
- Geriatric consultation services
- Health department - State
- Health insurance/Healthcare Provider Group (e.g.; PPO/HMO)
- Hospital
- No partners/consortia used
- Nursing Home
- Private/For - profit organization

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- Local Government
- Nonprofit organization
- Other
- Professional Associations
- Senior Center
- Tribal Organization
- Nurse Managed Health Clinics
- Physical therapy/Rehabilitation center
- Quality improvement organization
- State Governmental Programs
- Rural Health Clinic
- Tribal Government



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.

Select Whether Employment Location Data are Available for Individuals Trained	Enter # of Individuals Trained by Employment Location (not mutually exclusive)		
	Primary Care Setting	Medically Underserved Community	Rural Area
(8) Block 9	(9) Block 9a	(10) Block 9b	(11) Block 9c

Figure 124. 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

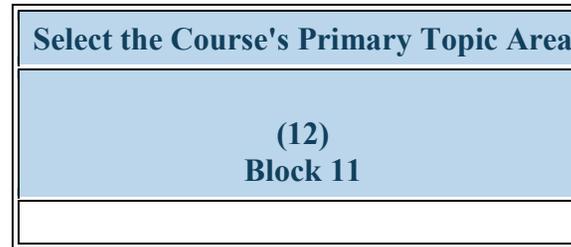


Figure 125. CE-1 - Selecting Primary Topic Area

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:

- 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
- 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

- Setting - Other



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-1 - Selecting Whether Supplemental Funding for Alzheimer's Disease-Related Training was used

Select Whether Supplemental Funding for Alzheimer's Disease-Related Training was used for this Course
(15) Block 14

Figure 126. CE-1 - Selecting Whether Supplemental Funding for Alzheimer's Disease-Related Training was used

Select Whether Supplemental Funding for Alzheimer's Disease-Related Training was used for this Course: Select whether supplemental funding for Alzheimer's disease-related training was used to offer each course during the annual reporting period by clicking on the drop-down menu under Block 14 and choosing one of the following options:

- Yes
- No



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

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

CE-2 - Selecting Profession and Discipline of Individuals Trained

Course Title	Select Profession and Discipline of Individuals Trained
(1) Block 1	(2) Block 8

Figure 127. CE-2 - Selecting Profession and Discipline of Individuals Trained

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 students or fellows trained at each site during the annual reporting period by clicking on the drop-down menu in Column 2 (Block 8) and choosing one of the following options:

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Family Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Occupational Medicine
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Other
- Dentistry - Prosthodontic Dentistry
- Medicine - Emergency Medicine
- Medicine - General Preventive Medicine
- Medicine - Integrative Medicine
- Medicine - Medical Genetics
- Medicine - Other
- Medicine - Preventive Medicine/Family Medicine
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Ethics
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Obstetrics and Gynecology
- Medicine - Palliative Care
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Psychiatry
- Nursing - Certified Nurse Midwife (CNM)

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- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine/Occupational Medicine
- Nursing - Alternative/ Complementary Nursing
- Nursing - CNL - Generalist
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Home Health Aide
- Nursing - NP - Adult
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Psychiatric/Mental health
- Nursing - Nurse anesthetist
- Nursing - Other
- Nursing - Registered Nurse (RN)
- Other - Audiology
- Other - Direct Service Worker
- Other - First Responder/EMT
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Optometry
- Other - Pharmacy Aid
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Physician Assistant
- Public Health - Environmental Health

- Medicine - Preventive Medicine/Public Health
- Nursing - Certified Nurse Assistant (CNA)
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Medical Ethics
- Nursing - CNS - Women's health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult gerontology
- Nursing - NP - Family
- Nursing - NP - Medical Ethics
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Patient Care Associate (PCA)
- Nursing - Researcher/Scientist
- Other - Chiropractor
- Other - Facility Administrator
- Other - Geriatric Educator
- Other - Lay Caregiver
- Other - Midwife (non-nurse)
- Other - Patient
- Other - Physical Therapy
- Other - Radiologic technology
- Other - Speech Therapy
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention

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- Nursing - CNS - Family
- Nursing - CNS - Palliative Care
- Nursing - Community health nursing
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Palliative Care
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Public Health Nurse (PHN)
- Other - Allied Health
- Other - Community Health Worker (CHW)
- Other - Family Caregiver
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Podiatry
- Other - Registered Dietician
- Other - Unknown
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Management
- Public Health - Social & Behavioral Sciences

- Public Health - Infectious Disease Control

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

Enter # Trained in this Profession and Discipline
(3) Block 8

Figure 128. 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.

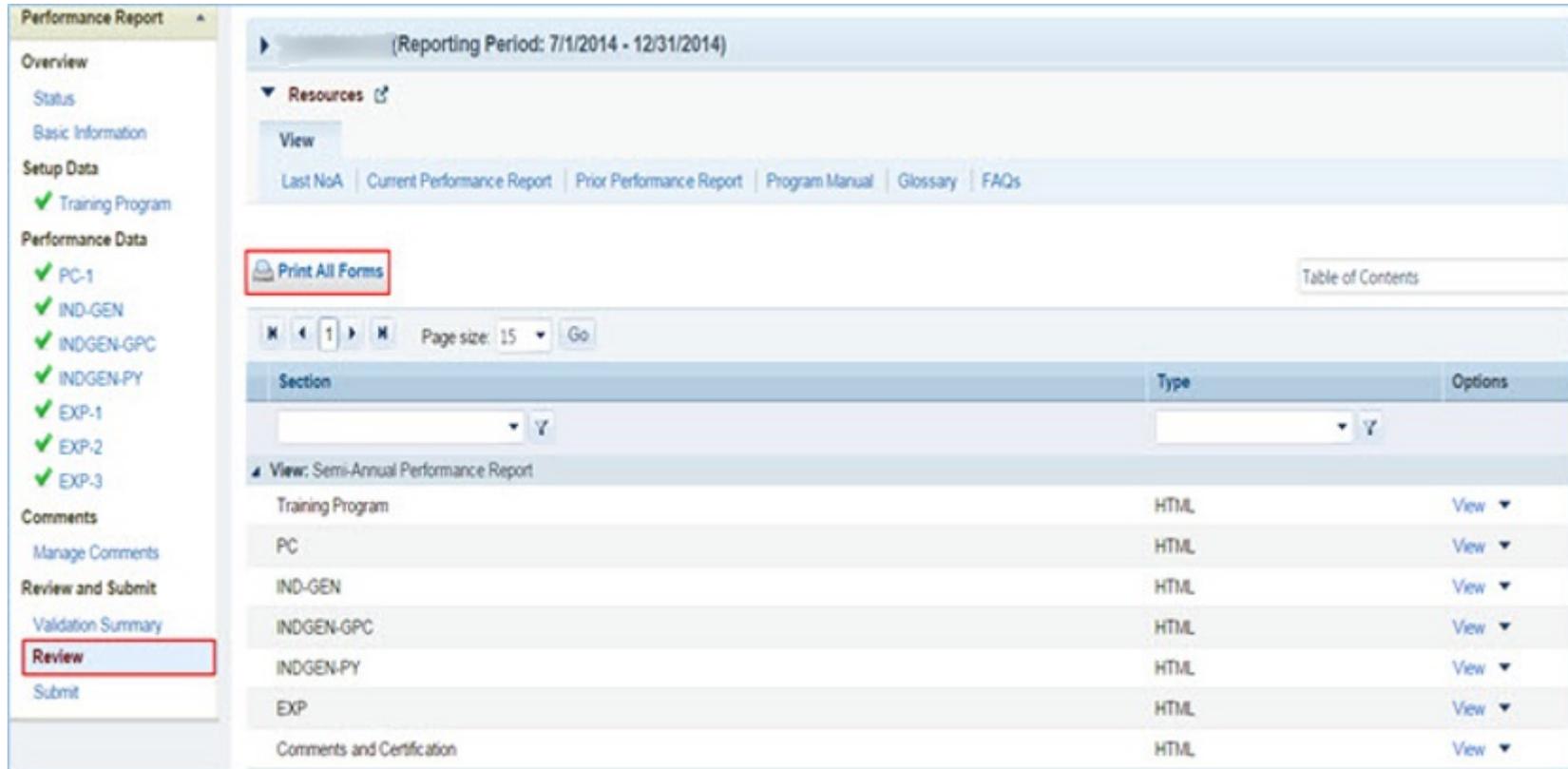


Figure 129. Screenshot of Printing Your Performance Report

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.

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

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

Figure 130. Screenshot of the Submit Report Page

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

Submit Report - Confirm

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

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

Fields with * are required

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

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

Please check the box to electronically sign the Report.

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

Figure 131. 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?

You may only select the 'not reported' option during the first reporting period for each trainee. Demographics are required information and grantees are expected to collect and report the information in all subsequent reports.

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.