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 SDS grant program:

   - To increase diversity in the health professions by providing scholarships to full-time students with financial need from disadvantaged backgrounds.

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

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](http://bhw.hrsa.gov/grants/reporting/index.html) including general EHB guidance as well as links to the performance measures and program manual.
4. **Resource Links**: Several resources are available via the ‘Resource’ tab on the EHB home screen including the following links:
   1. View Prior Period Data- Previously submitted PRGCA data are available in read-only mode
   2. Glossary- Current definitions of key terms
   3. Instruction Manual- Electronic copy of this program manual (can also be found on the HRSA.gov website)
5. **Video Recordings**:
6. **Grant Personnel**: Review your grant personnel listed in EHB and update this list as necessary. Ensure that listed personnel have appropriate authorizations (i.e., PRGCA submission, etc.). Make sure you have a backup person in place to submit your report!
7. **Sequence of Forms**: Complete PRGCA forms in the order they appear (i.e., complete EXP-1 prior to EXP-2)
8. **Saving and Validating**: You must click ‘Save and Validate’ in order to move to the next form. Save your work frequently (every 15-20 minutes) and print a hard copy of your report prior to submission.
9. **Government Project Officers**: Contact your Government Project Officer if you need further assistance on the content of your report.
10. **HRSA Call Center**: If you need additional assistance, contact the HRSA Call Center. If you have contacted the Call Center and are waiting for a reply, you should follow-up with them 48 hours after the initial contact. Have your ticket number ready (the same ticket number will be used at all tier levels now). Do not wait for the Call Center to return a phone call or email: **Call Center Phone Number: 877-Go4-HRSA/877-464-4772 or Call Center Online Assistance Form [click here](http://bhw.hrsa.gov/)**.
Order of Required Forms

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

<table>
<thead>
<tr>
<th>Order</th>
<th>Type of Form</th>
<th>Parent Form</th>
<th>Form ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Setup Form</td>
<td>SetupForms</td>
<td>Training Program</td>
</tr>
<tr>
<td>2</td>
<td>Performance Data Form</td>
<td>ProgramCharacteristics-PCSubforms</td>
<td>PC-1</td>
</tr>
<tr>
<td>3</td>
<td>Performance Data Form</td>
<td>IndividualCharacteristics-INDGENSubforms</td>
<td>IND-GEN</td>
</tr>
<tr>
<td>4</td>
<td>Performance Data Form</td>
<td>IndividualCharacteristics-INDGENSubforms</td>
<td>INDGEN-PY</td>
</tr>
<tr>
<td>5</td>
<td>Performance Data Form</td>
<td>ExperientialCharacteristics-EXPSubforms</td>
<td>EXP-1</td>
</tr>
<tr>
<td>6</td>
<td>Performance Data Form</td>
<td>ExperientialCharacteristics-EXPSubforms</td>
<td>EXP-2</td>
</tr>
</tbody>
</table>
Setup Forms
Setup Forms - Introduction
Training Program - Setup
Training Program Setup - Selecting Type of Training Program

*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 new degree programs, select the type(s) of training program(s) supported with grant funds during the annual reporting period by clicking on the drop-down menu next to “Select Type of Training Program Offered” and choosing one of the following options:

- Degree/Diploma/Certificate Academic Training Program (Degree/Diploma)

Warning: The Training Program Setup form will configure all subforms specific to the degree program. Complete this step only if grant funds were used to NEW support degree programs other than those previously reported (you do not need to re-enter information about degree programs previously reported). If no NEW degree programs were supported other than those previously reported, skip to the last step for this subform.

Note: To view data submitted in previous reporting period, click on the “View Prior Period Data” link on top of the form.
Next, click on the “Load Program Details” button to activate the remaining drop-down menus in this setup form.

💡 Note: Clicking on the "Load Program Details" button will activate drop-down menus specific to the selection made in the previous step.
### Training Program Setup - Adding Degree/Diploma Program

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

<table>
<thead>
<tr>
<th><em>Add Training Program</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>For a Degree/Diploma/Certificate Program, Select Type of Degree Offered</td>
</tr>
<tr>
<td>For a Degree/Diploma/Certificate Program, Select Primary Focus Area</td>
</tr>
<tr>
<td>Select Delivery Mode Used to Offer Program</td>
</tr>
<tr>
<td>Add Record</td>
</tr>
</tbody>
</table>

**Figure 5. Training Program Setup - Adding Degree/Diploma Program**

**For a Degree/Diploma/Certificate Program, Select Type of Degree Offered:** Select the type of degree associated with the program offered during the reporting period.

- AA
- BS
- DDS
- DNP
- MA
- MD
- MPH
- DDS/MPH
- MSW
- PhD
- DO/DrPH
- DO/ScD
- EdD
- MD/MPH
- MD/ScD
- MLS
- MMS/MSPH

- AS
- BA
- DMD
- DO
- Master's Degree Not Otherwise Specified
- MMS
- DC
- DDS/MSPH
- DNAP
- DNSc
- DO/MPH
- DrPH
- LPN
- MD/MSPH
- MEd
- MMS/DrPH
- MMS/ScD
- Bachelor's Degree not otherwise specified
- BSN
- BPH
- DPT
- BSW
- MPAS
- MS
- MSN
- PharmD
- PsyD
- DO/MSPH
- DVM
- MD/DrPH
- MD/PhD
- MHA
- MMS/MPH
- MPAS/DrPH

Scholarships for Disadvantaged Students
Health Resources and Services Administration  
Bureau of Health Workforce  

Scholarships for Disadvantaged Students

- MPAS/MPH
- MS-CTS
- MSN/MPH
- MSSW
- VMD
- MPAS/MSPH
- MSCR
- MSOT
- Post-Masters Certificate
- MPAS/ScD
- MSN/MBA
- MSPH
- ScD

For a Degree/Diploma/Certificate Program, Select Primary Focus Area:

Select one of the options below to identify the primary focus area of the degree program:

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Rehabilitation counseling
- Dentistry - Other
- Nursing - AS/ASN
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - Diploma Degree
- Nursing - NP - Acute care pediatric
- Nursing - NP - Adult
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family
- Nursing - NP - Geropsychiatric
- Nursing - NP - Pediatrics
- Nursing - Nurse Anesthetist
- Nursing - Nurse
- Nursing Researchers/Scientists
- Nursing - Public Health Nurse
- Behavioral Health - Clinical Social Work
- Behavioral Health - Mental Health Counseling
- Dentistry - Dental Hygiene
- Medicine - Allopathic Medicine
- Nursing - BS/BSN Completion
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - LPN - Licensed Practical Nurse
- Nursing - NP - Adult
- Nursing - NP - Child/Adolescent Psychiatric/Mental Health
- Nursing - Nurse Case Management
- Nursing - NP - Neonatal
- Nursing - NP - Women's health
- Nursing - Nurse Educator
- Nursing - Nursing Informatics
- Other - Audiology
- Other - Midwife
- Behavioral Health - Gerontological Counseling
- Behavioral Health - Other Social Work
- Substance Abuse/Addictions Counseling
- Dentistry - General Dentistry
- Medicine - Osteopathic Medicine
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Other advanced nurse specialists
- Nursing - Nurse Administrator
- Nursing - Nurse Midwife
- Nursing - Pre-licensure
- Other - Chiropractic
- Other - Occupational Therapy
- Other - Physical Therapy
- Other - Registered Dietician
Scholarships for Disadvantaged Students

*Select Delivery Mode Used to Offer Program:* Finally, select the primary mode used to deliver each degree program from the options below and, click on the "Add Record" button to save your entry. Repeat this process to list each NEW degree program supported with grant funds during the annual reporting period.

- Campus-based program
- Distance learning program
- Hybrid program

*Example:*
Select Training Activity Status in the Current Reporting Period: Select the Training Activity Status of all reported training programs by choosing one of the options from the list below.

- Active
- Inactive

Warning: The BPMH system requires that at least one training program must be marked "Active" in the annual reporting period. If you have no active programs in the current reporting period, contact your government project officer for additional guidance.

Note: All new records must be labeled "Active." If you have any data to report on a training program, select Active.

Note: Selecting ‘Inactive’ indicates the training program is completed, you are no longer administering it, and you have no active INDGEN or INDGEN-PY records, or faculty development programs. You will not report on any aspect of an inactive program, and all records associated with
the program (i.e., EXP records) will be made inactive. Please confirm with your Government Project Officer before choosing the ‘Inactive’ status for any program.

To Complete the Form: Click on "Save and Validate" on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.
Program Characteristics—PC Subforms
PC Subforms - Introduction
## PC-1: Program Characteristics – Degree/Diploma/Certificate Training Programs
### PC-1 - Entering Enrollment Information

#### Figure 7. PC-1 - Entering Enrollment Information

<table>
<thead>
<tr>
<th>Enter Total # Enrolled (whether funded by BHW or not)</th>
<th>Total</th>
<th>URM</th>
</tr>
</thead>
<tbody>
<tr>
<td>(7) Block 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) Block 3a</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

For Column 7, enter the total number of students who participated in each degree program during the current reporting period. Count all students who participated, regardless of whether the student received a BHW-funded financial award. For the total enrollee count (Column 7), include students who went on to graduate from the degree program in the current reporting period but do NOT include students who discontinued prior to graduation (i.e., attrition). Attrition counts will be captured separately in Column 12.

For Column 8, enter the number of students who participated in each degree program during the current reporting period who were underrepresented minorities.

*Note: Column 8 is a subset of Column 7.*
Reference: Refer to the glossary for a definition of underrepresented minority.

Example:
Enter Total # Graduated/Completed (whether funded by BHW or not): Total:

In Column 10, enter the total number of students who graduated from their degree program during the current reporting period. Count all students who graduated, regardless of whether the student directly received a BHW-funded financial award.

Enter Total # Graduated/Completed (whether funded by BHW or not): URM:

In Column 11, enter the number of students who graduated from their degree program during the current reporting period and were underrepresented minorities.

Note: Column 10 is a subset of Column 7; Column 11 is a subset of Column 10.

Example:

Scholarships for Disadvantaged Students
Scholarships for Disadvantaged Students

PC-1 - Entering Attrition Information

Figure 9. PC-1 - Entering Attrition Information

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

**Enter Total # Who left the Program Before Completion (whether funded by BHW or not): Total:**

In Column 12, enter the total number of students who permanently left their degree programs before completion during the current 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, enter the number of students who permanently left their degree programs before completion during the current reporting period and were underrepresented minorities.
Note: Column 13 is a subset of Column 12.

Example:

<table>
<thead>
<tr>
<th>Enter Total # Enrolled (whether funded by BHW or not)</th>
<th>Enter Total # Graduated/Completed (whether funded by BHW or not)</th>
<th>Enter Total # Who left the Program Before Completion (whether funded by BHW or not)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total (7)</td>
<td>Total (10)</td>
<td>Total (12)</td>
</tr>
<tr>
<td>Block 3</td>
<td>Block 8</td>
<td>Block 9</td>
</tr>
<tr>
<td>URM (8) Block 3a</td>
<td>URM (11) Block 8a</td>
<td>URM (13) Block 9a</td>
</tr>
<tr>
<td>20</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>15</td>
<td></td>
<td>4</td>
</tr>
</tbody>
</table>

*Figure 10. Example of PC-1 Subform*

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

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

IND-GEN - Setup

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

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

Figure 11. 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 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 likely have a browser compatibility problem. Please refer to the Getting Started-Browser Settings page at the beginning of this manual.

⚠️ Warning: Prior records cannot be deleted.
IND-GEN - Selecting Type of Training Program

Type of Training Program:

Select each individual's training program by clicking on the drop-down menu in Column 1 and choosing one of the active training programs.

Note: Column 1 will prepopulate for prior records. Prior data cannot be altered or deleted.

Note: The type of training program entitled "Other" does not apply to this program.

Example:
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.

⚠️ Warning: Each grantee is responsible for keeping a log of all unique IDs used in order to provide annual updates and 1-year follow-up data for each trainee.

💡 Note: This Column will prepopulate for prior records with data submitted in previous reporting periods.
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 and choosing one of the following options:

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

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

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

<table>
<thead>
<tr>
<th>Select Individual's Enrollment / Employment Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>(4)</td>
</tr>
<tr>
<td>Block 3</td>
</tr>
</tbody>
</table>

**Figure 15. 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 and choosing one of the following options:

- Both Full-time and Part-time
- Full-time
- Part-time
- On leave of absence
- Inactive
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 and choosing one of the following options:

- Female
- Male
- Not Reported

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

💡 Note: This column will prepopulate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.
**IND-GEN - Entering Year of Birth**

**Enter Year of Birth:** Enter each individual’s year of birth in the textbox under Column 6a.

- 1917  
- 1918  
- 1919  
- 1920  
- 1921  
- 1922  
- 1923  
- 1924  
- 1925  
- 1926  
- 1927  
- 1928  
- 1929  
- 1930  
- 1931  
- 1932  
- 1933  
- 1934  
- 1935  
- 1936  
- 1937  
- 1938  
- 1939  
- 1940  
- 1941  
- 1942  
- 1943  
- 1944  
- 1945  
- 1946  
- 1947  
- 1948  
- 1949  
- 1950  
- 1951  
- 1952  
- 1953  
- 1954  
- 1955  
- 1956  
- 1957  
- 1958  
- 1959  
- 1960  
- 1961  
- 1962  
- 1963  
- 1964  
- 1965  
- 1966  
- 1967  
- 1968  
- 1969  
- 1970  
- 1971  
- 1972  
- 1973  
- 1974  
- 1975  
- 1976  
- 1977  
- 1978  
- 1979  
- 1980  
- 1981  
- 1982
Scholarships for Disadvantaged Students

- 1983
- 1986
- 1989
- 1992
- 1995
- 1998
- 2001
- 2004
- 2007
- 2010
- 2013
- 2016
- 1984
- 1987
- 1990
- 1993
- 1996
- 1999
- 2002
- 2005
- 2008
- 2011
- 2014
- 2017
- 1985
- 1988
- 1991
- 1994
- 1997
- 2000
- 2003
- 2006
- 2009
- 2012
- 2015
- Not Reported

⚠️ Warning: The 'Not Reported' option may not be selected for prior records.
Scholarships for Disadvantaged Students

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 and choosing one of the following options:

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

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

Note: This column will prepopulate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.
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 and choosing all that apply from the following options. You may select more than one option for individuals of multiple races:

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

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

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

💡 Note: This column will prepopulate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.
IND-GEN - Selecting if Individual is from a Rural Residential Background

![Select Whether Individual is from a Rural Residential Background](image)

Figure 20. 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 and choosing one of the following options:

- Yes
- No
- Not Reported

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

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

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

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 and choosing one of the following options:

- Yes
- No
- Not Reported

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

Note: For the SDS program, 100% of students who received scholarships should be from disadvantaged backgrounds.

Note: This column will prepopulate for prior records with data submitted in the previous reporting period. Prior data cannot be altered or deleted.
Reference: Refer to the glossary for a definition of disadvantaged background.
IND-GEN - Selecting Individual's Veteran Status

Select Individual's Veteran Status:

Select each individual's current veteran status by clicking on the drop-down menu in Column 11 and choosing one of the following options:

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

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

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

Reference: Refer to the glossary for a definition of the various types of veteran statuses.
IND-GEN - Entering BHW-Funded Financial Award Information

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

<table>
<thead>
<tr>
<th>Select Whether Individual Received BHW Financial Award?</th>
<th>Enter Individual's Financial Award Amount (BHW funds only)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(12) Block 11</td>
<td>Scholarship</td>
</tr>
<tr>
<td>(15) Block 11</td>
<td></td>
</tr>
</tbody>
</table>

Figure 23. 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 and choosing one of the following options:

- Yes
- No

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

- If the individual did receive a SDS-funded financial award, enter the total amount of dollars provided during the annual reporting period in Column 15.
- If the individual did not receive a financial award, enter "0" in Column 15.

Warning: All NEW records should select "Yes" for Column 12. Do not add new records for individuals who did not receive SDS Scholarships for Disadvantaged Students
Note: Total amount reported should account for all SDS dollars including those applied to tuition, fees, books, and reasonable living expenses, as allowed by federal statutes and regulations. SDS regulations stipulate that award amounts cannot exceed $30,000 per year per student.
Scholarships for Disadvantaged Students

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

<table>
<thead>
<tr>
<th>Enter # of Academic Years the Individual has Received BHW Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>(22)</td>
</tr>
<tr>
<td>Block 12</td>
</tr>
</tbody>
</table>

Figure 24. IND-GEN - Entering # of Academic Years the Individual has Received BHW Funding

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

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

Note: The number of academic years receiving BHW-funded financial awards does not need to be consecutive.

Note: If an individual has received money for a partial academic year, please round up to the nearest whole number.
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:

- Graduate Year 1
- Graduate Year 3
- Graduate Year 5
- Undergraduate Year 1
- Undergraduate Year 3
- Undergraduate Year 5
- Graduate Year 2
- Graduate Year 4
- Graduate Year 6
- Undergraduate Year 2
- Undergraduate Year 4

Note: For faculty or preceptors, select N/A.
IND-GEN - Selecting any HHS Priority Topic Area on which an Individual Received Training

### Figure 26. IND-GEN - Selecting any HHS Priority Topic Area on which an Individual Received Training

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

- Individual participated on a health care team delivering integrated behavioral health services in primary care
- Individual received a SAMHSA waiver to prescribe medication assisted treatment (MAT)
- Individual received training in opioid use treatment
- Individual received training in telehealth
- Individual received training on integrated behavioral health in primary care
- Individual received training in medication assisted treatment (MAT) for SUD/OUD
- Individual received training in substance use treatment
- None of the above
IND-GEN - Entering Training Information in a Primary Care Setting

Figure 27. IND-GEN - Entering Training Information in a Primary Care Setting

<table>
<thead>
<tr>
<th>Training in a Primary Care Setting</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Select Whether Individual Received Training</td>
<td>Enter # of Contact Hours</td>
</tr>
<tr>
<td>(28) Block 17</td>
<td>(29) Block 17a</td>
</tr>
</tbody>
</table>

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 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 current reporting period in the textbox under Column 29.
- If the individual did NOT receive clinical or experiential training in a primary care setting, leave the textbox blank under Column 29.
Scholarships for Disadvantaged Students

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

![Table](training_table.png)

Figure 28. IND-GEN - Entering Training Information in a Medically Underserved Community

Training in a Medically Underserved Community: Select Whether Individual Received Training:

Select whether each individual received experiential training in a medically underserved community (MUC) during the annual reporting period by clicking on the drop-down menu under Column 31 and choosing one of the following options:

- 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

<table>
<thead>
<tr>
<th>Training in a Rural Area</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Select Whether Individual Received Training</td>
<td>Enter # of Contact Hours</td>
</tr>
<tr>
<td>(33) Block 19</td>
<td>(34) Block 19a</td>
</tr>
</tbody>
</table>

Figure 29. IND-GEN - Entering Training Information in a Rural Area

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

Select whether each individual received experiential training in a rural area during the annual reporting period by clicking on the drop-down menu and choosing one of the following options:

- 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 Student Services Information

<table>
<thead>
<tr>
<th>Student Services</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Select Social Support services used by Trainee (34a)</td>
<td>Select Academic Support services used by Trainee (34b)</td>
</tr>
<tr>
<td>Faculty or staff led counseling sessions</td>
<td>Academic coaching</td>
</tr>
<tr>
<td>Peer support advisors</td>
<td>Faculty or staff led advising sessions</td>
</tr>
<tr>
<td>Service learning opportunities</td>
<td>Individual tutoring</td>
</tr>
<tr>
<td>N/A</td>
<td>Study skills training</td>
</tr>
<tr>
<td>Other social support services</td>
<td>None of the above</td>
</tr>
<tr>
<td>Peer support groups</td>
<td>Academic support program</td>
</tr>
<tr>
<td>None of the above</td>
<td>Group tutoring</td>
</tr>
<tr>
<td></td>
<td>Other academic support service</td>
</tr>
<tr>
<td></td>
<td>Time management training</td>
</tr>
<tr>
<td></td>
<td>N/A</td>
</tr>
</tbody>
</table>

Figure 30. IND-GEN — Selecting Student Services Information

**Student Services: Select Social Support services used by Trainee**: Select whether each trainee used social support services by clicking on the drop-down menu under Column 34a and choosing all that apply from the following options:

- Faculty or staff led counseling sessions
- Peer support advisors
- Service learning opportunities
- N/A
- Other social support services
- Peer support groups
- None of the above

**Student Services: Select Academic Support services used by Trainee**: Select whether each trainee used academic support services by clicking on the drop-down menu under Column 34b and choosing all that apply from the following options:

- Academic coaching
- Faculty or staff led advising sessions
- Individual tutoring
- Study skills training
- None of the above
- Academic support program
- Group tutoring
- Other academic support service
- Time management training
- N/A
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 and choosing one of the following options:

- Yes
- No
IND-GEN — Selecting Reason for Attrition or Inactive Status

Select Reason for Attrition or Inactive Status: Select the primary reason each individual discontinued participation by clicking on the drop-down menu under Column 36a and choosing one of the following options:

- Academic withdrawal
- Family obligations
- Medical leave of absence
- Transfer to another institution
- Other
- N/A
- Change in major
- Financial obligations
- Military/Active duty
- Transportation difficulties
- None of the Above
IND-GEN - Entering Graduation/Completion Information

<table>
<thead>
<tr>
<th>Select Whether Individual Graduated/Completed the Program</th>
<th>Select Degree Earned</th>
<th>Select Individual's Post-Graduation/Completion Intentions</th>
</tr>
</thead>
<tbody>
<tr>
<td>(37) Block 22</td>
<td>(38) Block 22a</td>
<td>(39) Block 22b</td>
</tr>
</tbody>
</table>

Figure 33. IND-GEN - Entering Graduation/Completion Information

Select Whether Individual Graduated/Completed the Program:

Select whether each individual completed the training program during the current reporting period by clicking on the drop-down menu in Column 37 and choosing one of the following options:

- Yes
- No

Select Degree Earned: If the student graduated from the degree program during the annual reporting period, select the type of degree earned through the program by clicking on the drop-down menu under Block 22a and choosing one of the options from the list below. If the student did not graduate, select "N/A" under Column 38.

- AA
- Bachelor's Degree not otherwise specified
- BSN
- DDS
- DMD
- DNSc
- DO/MPH
- DPT
- EdD
- AS
- BPH
- BSW
- DDS/MPH
- DNAP
- DO
- DO/MSPH
- DrPH
- LPN
- BA
- BS
- DC
- DDS/MSPH
- DNP
- DO/DrPH
- DO/ScD
- DVM
- MA
- MA
Scholarships for Disadvantaged Students

- Master's Degree Not Otherwise Specified
- MD
- MD/MPH
- MD/ScD
- MMS
- MMS/MSPH
- MPAS/DrPH
- MPAS/ScD
- MS-CTS
- MSN/MBA
- MSPH
- PharmD
- PsyD
- N/A

- MD/DrPH
- MD/PhD
- MEd
- MMS/DrPH
- MMS/ScD
- MPAS/MPH
- MPH
- MSCR
- MS
- MSN
- MSOT
- MSSW
- MS
- MSCR
- MSW
- Post-Masters Certificate
- VMD

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 and choosing all that apply from the options listed below. If an individual did not complete their training program during the current reporting period, select “N/A” in Column 39.

- Individual intends to practice in a medically underserved area
- Individual intends to practice in a primary care setting
- Individual intends to practice in a rural area
- None of the above
- N/A

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

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

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

**Figure 34. INDGEN-PY - Entering Employment Data 1-year Post Graduation/Completion**

Select whether status/employment data are available for the individual 1-year post graduation/completion:

Select whether current training/employment data are available for each individual who received a BHW-funded financial award and completed their training program one year prior to this reporting period by clicking on the drop-down menu in Column 13 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.”
<table>
<thead>
<tr>
<th>Scholarships for Disadvantaged Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Individual currently practices in a medically underserved area</td>
</tr>
<tr>
<td>• Individual currently practices in a rural area</td>
</tr>
<tr>
<td>• Individual is currently working in a facility that provides substance use treatment services</td>
</tr>
<tr>
<td>• Individual is serving individuals with OUD/SUD</td>
</tr>
<tr>
<td>• N/A</td>
</tr>
</tbody>
</table>

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

- No
- Yes
- N/A

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

- Yes
- No
- N/A

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

- Academic Institution
- Critical Access Hospital
- Other Clinical Training Site
- Area Health Education Center
- FQHC or Look-Alike
- Rural Health Clinic
None of the Above

N/A

Warning: “None of the above” 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.
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:

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.

買い物

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

Select Whether the Site was Used in the Current Reporting Period:

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

- Yes
- No

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

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

**Note:** If a clinical site was NOT used in the current reporting period, then it will not appear on EXP-2 as a dropdown option in Column 1.
EXP-1 - Selecting Type of Site Used

Select Type of Site Used:

Select the type of sites used to train individuals during the current reporting period by clicking on the drop-down menu under Column 3 and choosing from one of the following options:

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

- Physician Office
- Senior Centers
- Rural Health Clinic
- Surgery Clinic
- Tribal Organization

- Veterans Affairs Healthcare (e.g. VA Hospital or clinic)
- Tribal Government

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:

Select whether each site used to train individuals during the current reporting period was located in designated settings by clicking on the drop-down menu under Column 4 and choosing all that apply from the following options:

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

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

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

Note: To determine whether a site is located in a rural area, please visit HRSA’s Office of Rural Health Policy at http://datawarehouse.hrsa.gov/RuralAdvisor/ruralhealthadvisor.aspx
Select Type(s) of 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 and choosing all that apply from the following options:

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

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

**Note:** If you select "Other" in Column 7, provide an explanation in the comments field and reference the site name.
EXP-1 - Entering Site's geographical Data

<table>
<thead>
<tr>
<th>Enter Zip Code</th>
<th>City</th>
<th>State</th>
<th>Four Digit Zip Code Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>(8)</td>
<td>(9)</td>
<td>(10)</td>
<td>(11)</td>
</tr>
</tbody>
</table>

Figure 40. EXP-1 - Entering Site's geographical Data

State:

City:

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

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

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

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

- Yes
- No

Figure 41. EXP-1 - Selecting Whether the Training Site Implements Interprofessional Education and/or Practice
EXP-1 - Selecting any HHS Priorities Addressed at this Site

Select any HHS Priorities Addressed at this Site:

Using the dropdown menu in Column 14, select all that apply from the list of HHS priorities that were addressed at this site.

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

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

EXP-2 - Selecting Training Program and Site Name

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

Figure 43. 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 training program options. The options available will be programs marked as "Active" on the Training Program Setup Form.

**Site Name:**

Next, pair the selected training program with a training site by clicking on the drop-down menu in Column 2 and choosing a site name. The options available will be sites that were marked as "Used" in the current reporting period on EXP-1.

💡 *Note:* *The EXP-2 form will initially appear blank.*
**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. Repeat as necessary to identify all profession/discipline of all individuals trained at each site.

- Student - Behavioral Health - Clinical Psychology
- Student - Behavioral Health - Marriage and Family Therapy
- Student - Behavioral Health - Rehabilitation counseling
- Student - Dentistry - Other
- Student - Medicine - Osteopathic Medicine
- Student - Nursing - CNS - Adult gerontology
- Student - Nursing - CNS - Neonatal
- Student - Nursing - CNS - Women's health
- Student - Nursing - NP - Acute care pediatric
- Student - Nursing - NP - Adult Psychiatric/Mental health
- Student - Behavioral Health - Clinical Social Work
- Student - Behavioral Health - Mental Health Counseling
- Student - Dentistry - Dental Hygiene
- Student - Diploma/Certificate
- Student - Nursing - BS/BSN Completion
- Student - Nursing - CNS - Family
- Student - Nursing - CNS - Pediatrics
- Student - Nursing - Diploma Degree
- Student - Nursing - NP - Adult
- Student - Nursing - NP - Child/Adolescent Psychiatric/Mental Health
- Student - Nursing - NP - Family Psychiatric/Mental Health
- Student - Behavioral Health - Gerontological Counseling
- Student - Behavioral Health - Other Social Work Substance Abuse/Addictions Counseling
- Student - Dentistry - General Dentistry
- Student - Medicine - Allopathic Medicine
- Student - Nursing - Case Management
- Student - Nursing - CNS - Geropsychiatric
- Student - Nursing - CNS - Psychiatric/Mental health
- Student - Nursing - NP - Acute care adult gerontology
- Student - Nursing - NP - Adult gerontology
- Student - Nursing - NP - Emergency care
- Student - Nursing - NP - Geropsychiatric
- Student - Nursing - NP - Pediatrics
- Student - Nursing - Nurse Anesthetist
- Student - Nursing - Nurse Researchers/Scientists
Scholarships for Disadvantaged Students

- Student - Nursing - NP - Family
- Student - Nursing - NP - Neonatal
- Student - Nursing - NP - Women's health
- Student - Nursing - Nurse Educator
- Student - Nursing - Nursing Informatics
- Student - Other - Audiology
- Student - Other - Midwife
- Student - Other - Pharmacy
- Student - Other - Radiologic technology
- Student - Other - Veterinary Medicine
- Student - Public Health - Disease Prevention & Health Promotion
- Student - Public Health - Health Administration
- Student - Public Health - Injury Control & Prevention
- Student - Nursing - NP - Other advanced nurse specialists
- Student - Nursing - Nurse Administrator
- Student - Nursing - Nurse Midwife
- Student - Nursing - Pre - licensure
- Student - Other - Chiropractic
- Student - Other - Occupational Therapy
- Student - Other - Physical Therapy
- Student - Other - Registered Dietician
- Student - Physician Assistant
- Student - Public Health - Environmental Health
- Student - Public Health - Health Policy & Management
- Student - Public Health - Social & Behavioral Sciences

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

**Enter # Trained in this Profession and Discipline:** In Column 4, enter the number of trainees in the profession and discipline listed.

- **Note:** Counts provided in the textbox in Column 4 should be based on students reported on IND-GEN.

- **Note:** Do not enter counts for faculty, site staff, or other non-trainees.
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. No other action is needed.

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

- Senior Centers
- Rural Health Clinic
- Surgery Clinic
- Tribal Organization
- Veterans Affairs Healthcare (e.g. VA Hospital or clinic)
- Tribal Government

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

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. No other action is needed.

- 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.

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

- 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 48. Screenshot of Printing Your Performance Report
Submitting Your Performance Report

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

![Figure 49. Screenshot of the Submit Report Page](image)
2. After step 1, you will be directed to the Submit Report-Confirm page. On this page, check the box under the ‘Certification’ section and click the ‘Confirm’ button on the bottom right corner of your screen to submit your report to HRSA. You will receive a confirmation message on your next screen.

![Submit Report - Confirm](image)

**Figure 50. 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.

Scholarships for Disadvantaged Students
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?
Health Resources and Services Administration
Bureau of Health Workforce
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.