U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Performance Report for Grants and Cooperative Agreements

ACADEMIC YEAR 2015-2016

Instruction Manual for Grantees of the Residency Training in Primary Care

Annual Performance Report

Welcome

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

Please note the following:

1. All required performance measures are linked to the following legislative purpose(s) of the **Residency Training in Primary Care** grant program:

   - **Plan, develop, and operate or participate in an accredited residency or internship program.**
   - **Plan, develop, and operate a program for the training of physicians teaching in community-based settings.**

2. Data submitted by grantees of the program must cover all activities that took place between **July 01, 2015 - June 30, 2016** (referred to as **Annual Performance Report**)

3. **The PRGCA is due no later than August 01, 2016.** Failure to submit a PRGCA by this date may place your grant in a noncompliant status.

4. Officials at the Health Resources and Services Administration (HRSA) will review and approve all PRGCA submitted by grantees. In the case that revisions are needed, you will be granted the ability to reenter the BPMH system, make corrections, and submit a revised PRGCA. All revisions must be resubmitted within five (5) business days of the initial request. Failure to resubmit a revised PRGCA within five (5) business days may place your grant in a noncompliant status.

We appreciate your feedback and assistance during this process. All requests for technical assistance will be coordinated through the Call Center and responded to promptly. If you have any questions or require further assistance in completing your PRGCA, please visit the grants homepage or contact the HRSA Contact Center via:

- Phone at **877-Go4-HRSA/877-464-4772** or
- Click this link to send us your inquiry: click here.

National Center for Health Workforce Analysis

Performance Metrics and Evaluation Branch

Getting Started

The Office of Management and Budget (OMB) has issued a 3-year approval for the annual collection of performance measures across all grants and cooperative agreements funded through the Health Resources and Services Administration's Bureau of Health Workforce (BHW) (OMB # **0915-0061**). The BPMH system has been significantly enhanced to incorporate all approved subforms, as well as increase system performance and functionality. Throughout the manual, there are several icons that identify tips and other important information which will assist you in completing each subform accurately (see below).

Marks a warning statement. Please read information in **bold** carefully in order to complete each subform accurately.

Marks a tip or important note for completing a specific Block or subform in the BPMH system.

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

Due to the nature of annual reporting, the BPMH system has been recently enhanced so as to prepopulate specific Blocks within certain subforms with data submitted in a previous reporting period. In addition, a "View Prior Period Data" link has been added at the top of each subform in order to provide you with easy access to data submitted by your organization in prior reporting periods.

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.

Column Number: The first is a Column number. It is contained in parentheses above the Block number. Column numbers are unique to the field in a particular form and are used to identify error messages. If you receive an error message, it will refer to a Column Number. In that circumstance, find the Column number in the form to locate the error. Data fields that are prepopulated may only be identified with a Column number as shown in Column #1 in the above Figure.

Block Numbers: The second type of identifier is a Block number. Block numbers are also unique to a data entry field and correspond to the paper version of the performance measures. If you print the performance measures or received paper copies, the data fields are identified with a Block number. The Block numbers here in the EHB are the same as what appears in the paper copies of the performance measures. Nearly all fields where you enter data will be identified with a Block number.

Getting Started: Browser Settings

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

- HRSA's Electronic Handbook system (EHB) is compatible only with certain Internet browsers that have specific settings. Please check your settings by logging into EHB and clicking the 'Recommended Settings' tab that appears in the yellow banner at the top left of your home screen. The system will check your browser and its settings for compatibility.
- There are multiple checks that are performed, and you must receive green check marks next to each setting in order to proceed. The following link will direct you to a page that displays the list of the checks performed: **Recommended Settings**.
- Opening this link in your browser will automatically perform the recommended settings checks. Alternatively, you can access the recommended settings page in the EHBs system by clicking the 'Recommended Settings' tab on your EHBs home screen. It is highly recommended to check your settings prior to entering data in the BPMH system.
- Using different browsers or settings than what is described above may produce unpredictable results. If you find that you are unable to see dropdown menus, cannot enter data into a field, or a form is not appearing, you most likely have a browser compatibility problem.
- Please check these settings prior to calling the HRSA Call Center or your Government Project Officer. You may be asked to provide a screenshot showing the results of the 'Recommended Settings' tab.

Getting Started: Helpful Resources and Recommendations

The following is a list of resources and tips you may find helpful in the event you need assistance:

1. Begin PRGCA data entry early and submit your report prior to the deadline.
2. **Browser Settings**: Check your Internet browser and its settings by using 'Recommended Settings' tab on the EHB home screen within the yellow banner in the top left corner of the screen. Look for green check marks for all system requirements in order to meet system requirements and proceed.
3. **Reporting on Your Grant:** Several resources are available through HRSA's "Reporting on Your Grant" link http://bhw.hrsa.gov/grants/reporting/index.html including general EHB guidance as well as links to the performance measures and program manual.
4. **Resource Links**: Several resources are available via the 'Resource' tab on the EHB home screen including the following links:
   - View Prior Period Data- Previously submitted PRGCA data are available in read-only mode
   - Glossary- Current definitions of key terms
   - Instruction Manual- Electronic copy of this program manual (can also be found on the HRSA.gov website)
5. **Video Recordings:**
   - View recorded videos of how to enter data in the BPMH system: https://help.hrsa.gov/display/public/EHBSKBFG/BPMH+Videos
   - View the recorded TA webinar provided for your grant program. Please access the recording by using the link provided by your Government Project Officer.
6. **Grant Personnel:** Review your grant personnel listed in EHB and update this list as necessary. Ensure that listed personnel have appropriate authorizations (i.e., PRGCA submission, etc.). Make sure you have a backup person in place to submit your report!
7. **Sequence of Forms:** Complete PRGCA forms in the order they appear (i.e., complete EXP-1 prior to EXP-2; EXP-2, prior to EXP-3)
8. **Saving and Validating:** You must click 'Save and Validate' in order to move to the next form. Save your work frequently (every 15-20 minutes) and print a hard copy of your report prior to submission.
9. **HRSA Call Center:** If you need additional assistance, contact the HRSA Call Center using the contact information below. If you have contacted the Call Center and are waiting for a reply, you should follow-up with them 48 hours after the initial contact. Have your ticket number ready (the same ticket number will be used at all tier levels now). Do not wait for the Call Center to return a phone call or email.
   - Phone at 877-Go4-HRSA/877-464-4772; or
   - Click this link to send us your inquiry: click here.
10. **Government Project Officers**: Contact your Government Project Officer if you need further assistance.

Order of Required Forms

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

Order	Type of Form	Parent Form	Form ID	Applicable Grant Purpose(s)
1	Setup Form	Setup Forms	Grant Purpose	
2	Setup Form	Setup Forms	Training Program	RTPC-1,RTPC-2
3	Setup Form	Setup Forms	Faculty Development	RTPC-1,RTPC-2
4	Performance Data Form	Program Characteristics-PC Subforms	PC-8	RTPC-1,RTPC-2
5	Performance Data Form	Program Characteristics-PC Subforms	PC-9	RTPC-1,RTPC-2
6	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	LR-1a	RTPC-1,RTPC-2
7	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	LR-2	RTPC-1,RTPC-2

Order	Type of Form	Parent Form	Form ID	Applicable Grant Purpose(s)
8	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	DV-1	RTPC-1,RTPC-2
9	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	DV-2	RTPC-1,RTPC-2
10	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	DV-3	RTPC-1,RTPC-2
11	Performance Data Form	Individual Characteristics-INDGEN Subforms	IND-GEN	RTPC-3
12	Performance Data Form	Individual Characteristics-INDGEN Subforms	INDGEN-PY	RTPC-3
13	Performance Data Form	Experiential Characteristics-EXP Subforms	EXP-1	RTPC-1,RTPC-2
14	Performance Data Form	Experiential Characteristics-EXP Subforms	EXP-2	RTPC-1,RTPC-2
15	Performance Data Form	Experiential Characteristics-EXP Subforms	EXP-3	RTPC-1,RTPC-2
16	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-1	RTPC-1,RTPC-2
17	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-1a	RTPC-1,RTPC-2

Order	Type of Form	Parent Form	Form ID	Applicable Grant Purpose(s)
18	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-2	RTPC-1,RTPC-2
19	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-1a	RTPC-1,RTPC-2
20	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-1b	RTPC-1,RTPC-2
21	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-2a	RTPC-1,RTPC-2
22	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-2b	RTPC-1,RTPC-2

Grant Purpose – Setup

Selecting Grant Purpose(s)

To configure the BPMH system, please complete the Grant Purpose Setup form by selecting the specific type(s) of activities that were supported with grant funds during the annual reporting period (**July 01, 2015 - June 30, 2016**).

Grant Purpose	Select
RTPC-1: Plan, develop, and operate or participate in an accredited residency or internship program	☐
RTPC-2: Plan, develop, and operate a program for the training of physicians teaching in community-based settings	☐
RTPC-3: Provide need-based financial assistance in the form of traineeships and fellowships to medical students, interns, residents, practicing physicians, or other medical personnel	☑

Figure 3. Selecting Grant Purpose(s)

Warning: Selections made in this form will affect the types of subforms and/or drop-down menu options that will appear throughout the BPMH system.

Warning: Some options in the Grant Purpose form will be automatically selected based on information provided in a previous reporting period. Unselecting a grant purpose will cause related forms and data to be deleted. If you need to unselect a grant purpose, contact your project officer first to ensure you do not unnecessarily lose any data.

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

Training Program - Setup

Training Program Setup - Selecting Type of Training Program

Reviewing Prior Records in the "Saved Records" table:

- Previously reported Residency Programs (i.e., prior records) will prepopulate in the "Saved Records" table within the Training Program Setup form.
- Review this table for accuracy.
- If you have no **NEW** Residency Training Programs, proceed to the **manual section entitled "Training Program Setup: Final Steps."**

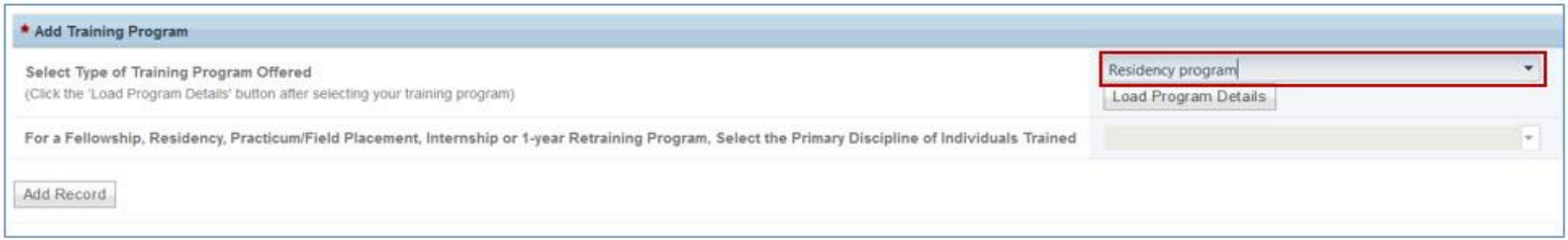


Figure 4. Training Program Setup - Selecting Type of Training Program

Select Type of Training Program Offered: Adding NEW Training Programs:
Select the type of training program supported through the grant during the current annual reporting period by clicking on the drop-down menu next to "Select Type of Training Program Offered" and choosing the following option:

- Residency program

Training Program Setup - Loading Program Details

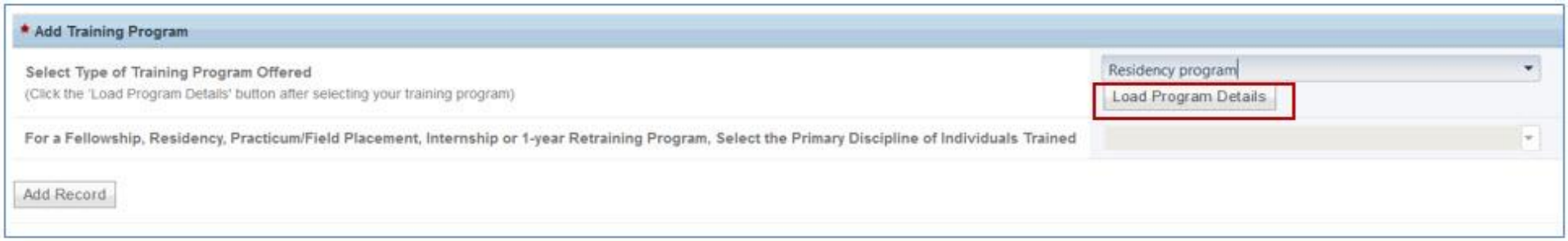


Figure 5. Training Program Setup - Loading Program Details

Next, **click on the "Load Program Details"** button to activate the remaining drop-down menus in this setup form.

Training Program Setup - Adding Residency Program

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

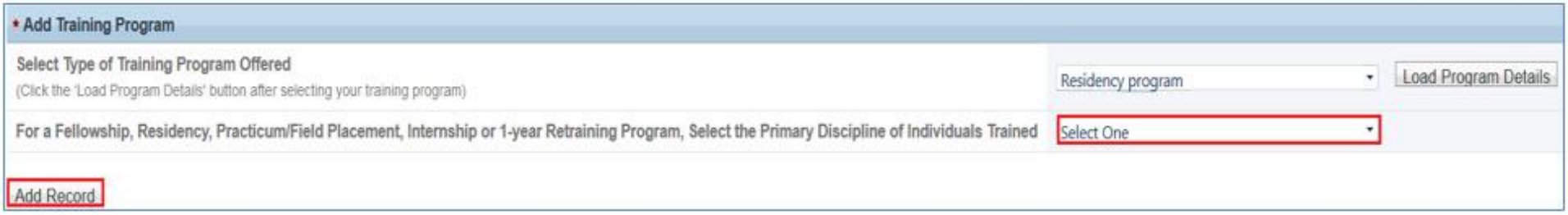


Figure 6. Training Program Setup - Adding Residency Program

For a Fellowship, Residency, Practicum/Field Placement, Internship or 1-year Retraining Program, Select the Primary Discipline of Individuals Trained: Adding NEW Training Programs (continued):

- **Select the profession/discipline of residents** in each residency program supported with grant funds by clicking on the drop-down menu next to “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 available options:
- Next, click on the "Add Record" button to save your entry.
- Repeat this process as necessary to capture the primary profession/discipline of each residency program supported with grant funds during the annual reporting period.

- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Internal
- Medicine - Allergy and Immunology
- Medicine - Dermatology
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery

Medicine
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology

Training Program Setup - Selecting Training Activity Status

Figure 7. Training Program Setup - Selecting Training Activity Status

Select Training Activity Status in the Current Reporting Period: For All Records *(New and Prior)*: Select the status of each residency program at the end of the current annual reporting period (i.e., **June 30, 2016**) by choosing one of the options below:

- Active
- Inactive

Note:

- *Active: A residency program that **was offered** during the current annual reporting period. If you are reporting any activity for a program, please select active.*
- *Inactive: A residency program that **was NOT offered** during the current annual reporting period. Selecting 'Inactive' indicates that the training program is completed, you are no longer administering it, and you have no active INDGEN records. You will not report on any aspect of an inactive program, and all records associated with the program (i.e., CDE and EXP records) will be made inactive. You must contact your Project Officer prior to choosing this status.*

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

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

Faculty Development Activities	
Structured Faculty Development Training Program	☒
Faculty Development Activity	☒

Figure 8. Selecting Faculty Development Activities

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

Warning: You may uncheck "Faculty Development Activity" (i.e., Unstructured Faculty Development) if you have nothing to report.

Warning: You may uncheck "Structured Faculty Development Training Program" only if you have no ongoing training programs.

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

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

PC-8: Program Characteristics – Residency Programs

PC-8 - Selecting Type(s) of Partners/Consortia

Type of Training Program	Primary Discipline of Individuals Trained	Select Type(s) of Partners/Consortia Used to Offer this Training
(1) Block 1	(2) Block 1l	(4) Block 2
Residency | Medicine – Family Medicine	I Medicine – Family Medicine	

Figure 9. PC-8 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia Used to Offer this Training: All Records *(New and Prior)***:** Complete Column 4 (Block 2) by selecting all of the type(s) of partnerships or consortia used or established for the purpose of offering each residency program during the current annual reporting period. Choose all that apply from the following options:

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

- Long-term care facility
- Nonprofit organization (non - faith based)
- Other
- Professional Associations
- State Government
- Quality improvement organization
- Tribal Government
- Private/For - profit organization
- Senior Center
- Tribal Organization

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

PC-8 - Entering Enrollment Information

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

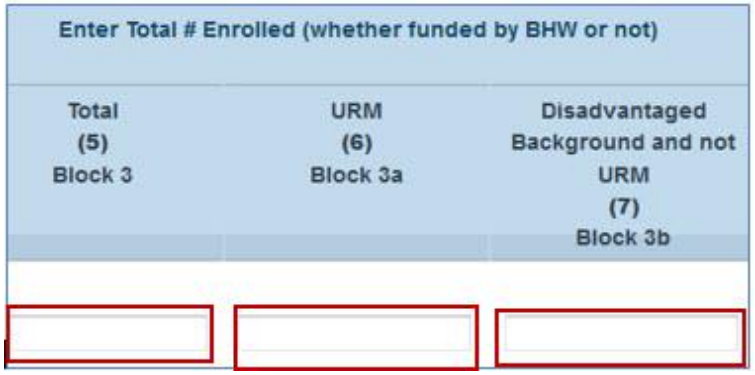


Figure 10. PC-8 - Entering Enrollment Information

Enter Total # Enrolled (whether funded by BHW or not): Total: All Records ***(****New and Prior)*: Complete Columns 5-7 (Blocks 3, 3a, and 3b) by entering the following information (see the example below): In Column 5 (Block 3), **enter the total number of residents** who participated in each residency program during the current annual reporting period. Count all residents who participated in the residency program, regardless of whether or not the resident directly received a BHW-funded financial award (**this is a total head count of residents that does not include those who permanently left the residency program).**

Enter Total # Enrolled (whether funded by BHW or not): URM: In Column 6 (Block 3a), **enter the number of residents who participated in the residency program** during the current annual reporting period and **were underrepresented minorities.**

Enter Total # Enrolled (whether funded by BHW or not): Disadvantaged Background and not URM: In Column 7 (Block 3b), enter the **number of residents from disadvantaged backgrounds** who participated in the residency program during the current annual reporting period but **were not underrepresented minorities.**

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

Note: Residents who permanently left their residency program before completion (i.e., attrition) will be counted separately in Column 10 (Block 9).

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

Example:

Example: The School of Medicine had 18 Internal Medicine residents maintain enrollment in the residency program during the current annual reporting period. Among the 18 residents who were enrolled in this program, 9 residents were underrepresented minorities. In addition, 3 residents were from disadvantaged backgrounds, but were not under-represented minorities.
In Column 5 (Block 3), the reporting official would enter 18.
In Column 6 (Block 3a), the reporting official would enter 9.
In Column 7 (Block 3b), the reporting official would enter 3.

PC-8 - Entering Graduate Information

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

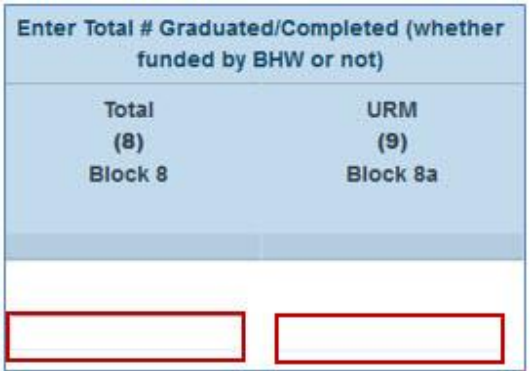


Figure 11. PC-8 - Entering Graduate Information

Enter Total # Graduated/Completed (whether funded by BHW or not): Total: All Records *(New and Prior)*: Complete Columns 8-9 (Blocks 8 and 8a) by entering the following information (see the example below): In Column 8 (Block 8), **enter the total number of residents who completed** all requirements of their residency program during the current annual reporting period. Count all residents who completed residency programs, regardless of whether or not the resident directly received a BHW-funded financial award (i.e., stipend).

Enter Total # Graduated/Completed (whether funded by BHW or not): URM: In Column 9 (Block 8a), **enter the number of residents who completed all requirements** of their residency program during the current annual reporting period and **were underrepresented minorities**.

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

Note: Residents who permanently left their practicum/field placement before completion (i.e., attrition) will be counted separately in Column 10 (Block 9).

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

Example:

Example: The School of Medicine had 18 Internal Medicine residents maintain enrollment in the residency program during the current annual reporting period. Among the 18 residents who were enrolled in this program, 3 completed all residency requirements during the current annual reporting period. Of those who completed training, none were underrepresented minorities.
In Column 8 (Block 8), the reporting official would enter 3.
In Column 9 (Block 8a), the reporting official would enter 0.

PC-8 - Entering Attrition Information

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

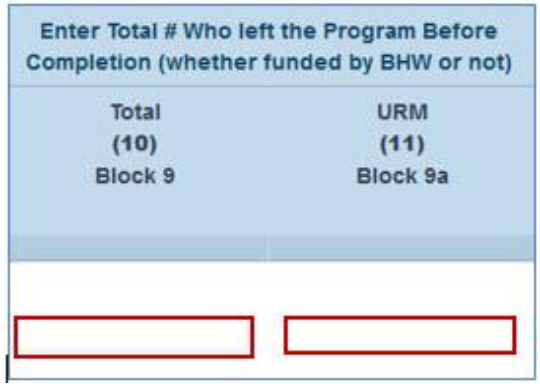


Figure 12. PC-8 - Entering Attrition Information

Enter Total # Who left the Program Before Completion (whether funded by BHW or not): Total: All Records *(New and Prior)*: Complete Columns 10-11 (Blocks 9 and 9a) by entering the following information (see the example below): In Column 10 (Block 9), **enter the total number of residents who permanently left their residency programs before completion** during the current annual reporting period. Count all residents who permanently left their **residency programs** regardless of whether or not the resident directly received a BHW-funded financial award (i.e., stipend).

Enter Total # Who left the Program Before Completion (whether funded by BHW or not): URM: In Column 11 (Block 9a), **enter the number of residents who permanently left their residency programs before completion** during the current annual 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:

Example: The School of Medicine had 18 Internal Medicine residents maintain enrollment in the residency program during the current annual reporting period. Among the 18 residents who were enrolled in this program, 2 left the residency program before completion. Neither resident was an underrepresented minority.
In Column 10 (Block 9), the reporting official would enter 2.
In Column 11 (Block 9a), the reporting official would enter 0.

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

PC-9: Program Characteristics –Positions Description

PC-9 - Selecting Type of Training Program

The PC-9 form collects information about the total number of residents in the residency program by training year.

Figure 13. PC-9 - Selecting Type of Training Program

Type of Training Program: New Records: Select a training program by clicking on the drop-down menu next to "Select Training Program" and choosing one of the available options. (The options available under "Type of Training Program" will prepopulate with information that was entered and saved in the Training Program Setup Form.)

Warning: Complete the PC-9 Setup form only if grant funds were used to support NEW residency programs other than those previously reported. If no NEW residency programs were supported (other than those previously reported), skip to PC-9: Final Steps.

PC-9 - Selecting Training Year

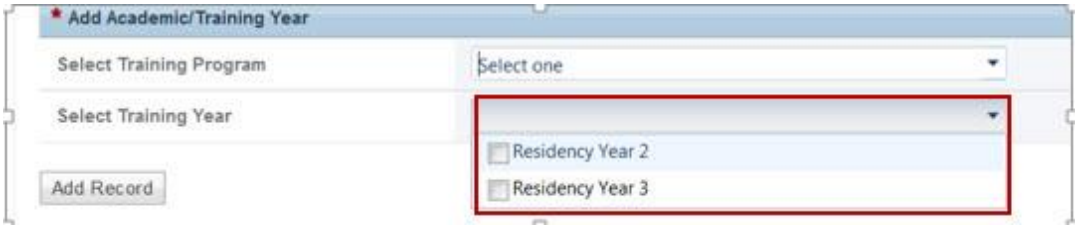


Figure 14. PC-9 - Selecting Training Year

Training Year: New Records:

- Select the types of training years that apply to the residency program supported through the grant by clicking on the drop-down menu next to "Select Training Year" and choosing **all that apply** from the available options.
- Next, **click on the "Add Record"** button to save your entry.
- **Repeat this process** as necessary to capture training years associated with each residency program supported through the grant.

- Residency Year 1
- Residency Year 2
- Residency Year 3
- Residency Year 4
- Residency Year 5

PC-9 - Entering Total # of Accredited Positions

No.	Record Status	Type of Training Program (1) Block 1	Training Year (2)	Enter Total # of Accredited Positions (3) Block 4	Enter Total # of Positions Recruited For (4) Block 5	Enter Total # of Positions Filled (5) Block 6
1	Prior Record	Residency | Medicine - Family Medicine	Residency Year 1			

Figure 15. PC-9 - Entering Total # of Accredited Positions

Enter Total # of Accredited Positions: Add New Records: For each training year, enter the following information:
Enter the total **number of accredited** residency positions in the textbox in Column 3 (Block 4). This is the number of positions reported to ACGME or AOA.

PC-9 - Entering Total # of Positions Recruited For

Figure 16. PC-9 - Entering Total # of Positions Recruited For

Enter Total # of Positions Recruited For:
Review Prior Records: Column 4 (Block 5) will prepopulate for prior records with data submitted in the previous annual reporting period.
Add New Records: For **each training year**, enter the number of residency **positions recruited** for during the annual reporting period in the textbox in Column 4 (Block 5).

PC-9 - Entering Total # of Positions Filled

No.	Record Status	Type of Training Program (1) Block 1	Training Year (2)	Enter Total # of Accredited Positions (3) Block 4	Enter Total # of Positions Recruited For (4) Block 5	Enter Total # of Positions Filled (5) Block 6
1	Prior Record	Residency | Medicine - Family Medicine	Residency Year 1			

Figure 17. PC-9 - Entering Total # of Positions Filled

Enter Total # of Positions Filled: All Records *(New and Prior)*: For each training year, enter the total number of positions filled in the textbox in Column 5 (Block 6).

Note: The sum of Block 6 across all years within a residency program will equal the number reported in PC-8 Block 3 (for Residency Programs).

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

LR-1a: Trainees by Training Category

LR-1 - Entering Residents Count

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

No.	Record Status	Type of Training Program	Trainees by Training Category		Attrition		Select Training Activity Status in the Current Reporting Period
			Enter # of Residents	Enter # of Program Completers	Enter # of Individuals who left the Program before Completion	Enter # of URM who left the Program before Completion	
		(1)	(4) Block 3	(6) Block 5	(7) Block 6	(8) Block 6a	(16)
1	Prior Record	Residency | Internal Medicine					Active

Figure 18. LR-1 - Entering Residents Count

Trainees by Training Category: Enter # of Residents: For All Programs *(New and Prior Records)*: Enter the **number of residents who participated** in each residency training program in the textbox in Column 4 (Block 3). This is the number of residents touched by the grant in some manner including residents who received direct financial support from the grant and any resident who was trained under a curriculum or course developed as a result of the grant.

Warning: Report counts of residents and program completers separately (i.e., program completers are NOT a subset of residents).

Warning: Do not count individuals who permanently left a residency training program before completion during the annual reporting period Columns 2 or 6 (Blocks 1 and 5). These individuals will be captured separately in Column 7 (Block 6).

LR-1 - Entering Program Completers Count

No.	Record Status	Type of Training Program	Trainees by Training Category		Attrition		Select Training Activity Status in the Current Reporting Period
			Enter # of Residents	Enter # of Program Completers	Enter # of Individuals who left the Program before Completion	Enter # of URM who left the Program before Completion	
		(1)	(4) Block 3	(6) Block 5	(7) Block 6	(8) Block 6a	(16)
1	Prior Record	Residency | Internal Medicine					Active

Figure 19. LR-1 - Entering Program Completers Count

Trainees by Training Category: Enter # of Program Completers: Enter the number of residents who completed each residency training program in the textbox in Column 6 (Block 5). This number includes any resident who completed the program by having received direct financial support from the grant or by training under a curriculum or course sponsored by the grant at any point during the resident's enrollment.

Warning: Report counts of residents and program completers separately (i.e., program completers are NOT a subset of residents).

Warning: Do not count individuals who permanently left a residency training program before completion during the annual reporting period Columns 2 or 6 (Blocks 1 and 5). These individuals will be captured separately in Column 7 (Block 6).

LR-1 - Entering Attrition Information

No.	Record Status	Type of Training Program	Trainees by Training Category		Attrition		Select Training Activity Status in the Current Reporting Period
			Enter # of Residents	Enter # of Program Completers	Enter # of Individuals who left the Program before Completion	Enter # of URM who left the Program before Completion	
		(1)	(4) Block 3	(6) Block 5	(7) Block 6	(8) Block 6a	(16)
1	Prior Record	Residency | Internal Medicine					Active

Figure 20. LR-1 - Entering Attrition Information

Attrition: Enter # of Individuals who left the Program before Completion: For ALL Programs *(New and Prior Records)***:** Enter the number of residents **who permanently left each residency training program** before completion during the current annual reporting period in the textbox in Column 7 (Block 6).

Attrition: Enter # of URM who left the Program before Completion: Of the individuals reported in Column 7 (Block 6), **enter the number of underrepresented minority residents** who permanently left each residency training program before completion during the current annual reporting period in the textbox in Column 8 (Block 6a).

Note: Counts reported in Column 8 (Block 6a) are a subset of those reported in Column 7 (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 & Sex

LR-2 - Entering Residents Count by Age and Gender

Type of Training Program	Age Group of Trainees	Sex: Male		Sex: Female	
		Enter # of Residents	Enter # of Program Completers	Enter # of Residents	Enter # of Program Completers
(1)	(2)	(5) Blocks 25-30	(7) Blocks 49-54	(10) Blocks 31-36	(12) Blocks 55-60
Residency |Internal Medicine	19 and Under				
Residency |Internal Medicine	20 – 29 years				
Residency |Internal Medicine	30 – 39 years				
Residency |Internal Medicine	40 – 49 years				
Residency |Internal Medicine	50 – 59 years				
Residency |Internal Medicine	60 and Over				
Residency |Internal Medicine	Age Not Reported				

Figure 21. LR-2 - Entering Residents Count by Age and Gender

Sex: Male: Enter # of Residents: For all programs *(New and Prior Records)***:** For each age group, **enter the number of male residents who participated** in each residency training program under Column 5 (Blocks 25-30). If there were no residents in a specific age group who participated in the residency training program during the current annual reporting period, enter a zero ("0") in the appropriate sex/age block.

Sex: Female: Enter # of Residents: For each age group, **enter the number of female residents who participated** in each residency training program under Column 10 (Blocks 31-36). If there were no residents in a specific age group who participated in the residency training program during the current annual reporting period, enter a zero ("0") in the appropriate sex/age block.

Warning: For each residency training program, the sum of residents across Columns 5 and 10 (Blocks 25-30 and 31-36) must be equal to the total number of enrollees entered in LR-1, Column 4 (Block 3).

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

Type of Training Program	Age Group of Trainees	Sex: Male		Sex: Female	
		Enter # of Residents	Enter # of Program Completers	Enter # of Residents	Enter # of Program Completers
(1)	(2)	(5) Blocks 25-30	(7) Blocks 49-54	(10) Blocks 31-36	(12) Blocks 55-60
Residency |Internal Medicine	19 and Under				
Residency |Internal Medicine	20 – 29 years				
Residency |Internal Medicine	30 – 39 years				
Residency |Internal Medicine	40 – 49 years				
Residency |Internal Medicine	50 – 59 years				
Residency |Internal Medicine	60 and Over				
Residency |Internal Medicine	Age Not Reported				

Figure 22. LR-2 - Entering Program Completers Count by Age and Gender

Sex: Male: Enter # of Program Completers: For all programs *(New and Prior Records)*: For each age group, enter the **number of male residents who completed** each residency training program under Column 7 (Blocks 49-54). If there were no residents in a specific age group who completed the residency training program during the current annual reporting period, enter a zero ("0") in the appropriate sex/age block.

Sex: Female: Enter # of Program Completers: For all programs (New and Prior Records): For each age group, enter the **number of female residents who completed** each residency training program under Column 12 (Blocks 55-60). If there were no residents in a specific age group who completed the residency training program during the current annual reporting period, enter a zero ("0") in the appropriate sex/age block.

Warning: The sum of program completers across Columns 7 and 12 (Blocks 49-54 and 55-60) must be equal to the total number of program completers entered in LR-1, Column 6 (Block 5).

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 Residents Count by Race and Ethnicity

No.	Record Status	Type of Training Program	Race Category	Ethnicity: Hispanic/Latino		Ethnicity: Non-Hispanic/Non-Latino	
				Enter # of Residents	Enter # of Program Completers	Enter # of Residents	Enter # of Program Completers
		(1)	(2)	(5) Blocks 15-21	(7) Blocks 29-35	(10) Blocks 50-56	(12) Blocks 64-70
1	Prior Record	Residency |Internal Medicine	American Indian or Alaska Native				
2	Prior Record	Residency |Internal Medicine	Black or African American				
3	Prior Record	Residency |Internal Medicine	Asian				
4	Prior Record	Residency |Internal Medicine	Native Hawaiian or Pacific Islander				
5	Prior Record	Residency |Internal Medicine	White				
6	Prior Record	Residency |Internal Medicine	More than one Race				
7	Prior Record	Residency |Internal Medicine	Race Not Reported				

Figure 23. DV-1 - Entering Residents Count by Race and Ethnicity

Ethnicity: Hispanic/Latino: Enter # of Residents: For All Programs *(New and Prior Records):* For each racial category, enter the number of residents who participated in each residency training program and were Hispanic/Latino in Column 5 (Blocks 15-21). If there were no residents in a specific racial category who participated in the residency training program during the current annual reporting period, enter a zero ("0") in the appropriate ethnicity/race block.

Ethnicity: Non-Hispanic/Non-Latino: Enter # of Residents: For All Programs *(New and Prior Records):* For each racial category, enter the number of residents who participated in each residency training program and were Non-Hispanic/Latino in Column 10 (Blocks 50-56). If there were no residents in a specific racial category who participated in the residency training program during the current annual reporting period, enter a zero ("0") in the appropriate ethnicity/race block.

Warning: The sum of residents across Columns 3 and 8 (Blocks 1-7 and 36-42) must be equal to the total number of enrollees entered in LR-1, Column 4 (Block 3).

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

No.	Record Status	Type of Training Program	Race Category	Ethnicity: Hispanic/Latino		Ethnicity: Non-Hispanic/Non-Latino	
				Enter # of Residents	Enter # of Program Completers	Enter # of Residents	Enter # of Program Completers
		(1)	(2)	(5) Blocks 15-21	(7) Blocks 29-35	(10) Blocks 50-56	(12) Blocks 64-70
1	Prior Record	Residency |Internal Medicine	American Indian or Alaska Native				
2	Prior Record	Residency |Internal Medicine	Black or African American				
3	Prior Record	Residency |Internal Medicine	Asian				
4	Prior Record	Residency |Internal Medicine	Native Hawaiian or Pacific Islander				
5	Prior Record	Residency |Internal Medicine	White				
6	Prior Record	Residency |Internal Medicine	More than one Race				
7	Prior Record	Residency |Internal Medicine	Race Not Reported				

Figure 24. DV-1 - Entering Program Completers Count by Race and Ethnicity

Ethnicity: Hispanic/Latino: Enter # of Program Completers: For All Programs *(New and Prior Records)*: For each racial category, enter the number of residents who completed each residency training program and were Hispanic/Latino in Column 7 (Blocks 29-35). If there were no residents in a specific racial category who participated in the residency training program during the current annual reporting period, enter a zero ("0") in the appropriate ethnicity/race block.

Ethnicity: Non-Hispanic/Non-Latino: Enter # of Program Completers: For All Programs *(New and Prior Records)*: For each racial category, enter the number of residents who completed each residency training program and were Non-Hispanic/Latino- in Column 12 (Blocks 64-70). If there were no residents in a specific racial category who participated in the residency training program during the current annual reporting period, enter a zero ("0") in the appropriate ethnicity/race block.

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 Residents Count from Disadvantaged Background

No.	Record Status	Type of Training Program	Residents		Program Completers	
			Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM	Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM
		(1)	(6) Block 5	(7) Block 6	(10) Block 9	(11) Block 10
1	Prior Record	Residency |Internal Medicine				

Figure 25. DV-2 - Entering Residents Count from Disadvantaged Background

Residents: Enter Total # from Disadvantaged Background: For All Programs *(New and Prior Records)*: Enter the total **number of residents from disadvantaged backgrounds** who participated in each residency training program during the annual reporting period in the textbox in Column 6 (Block 5).

Residents: Enter # from Disadvantaged Background who are not URM: Next, enter the **total number of residents from disadvantaged backgrounds** who participated in each residency training program during the annual reporting period and **were NOT underrepresented minorities** in the textbox in Column 7 (Block 6).

Note: Counts reported in Column 7 (Block 6) are a subset of counts reported in Column 6 (Block 5).

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

DV-2 - Entering Program Completers Count from Disadvantaged Background

No.	Record Status	Type of Training Program	Enrollees		Program Completers	
			Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM	Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM
		(1)	(6) Block 5	(7) Block 6	(10) Block 9	(11) Block 10
1	Prior Record	Residency |Internal Medicine				

Figure 26. DV-2 - Entering Program Completers Count from Disadvantaged Background

Program Completers: Enter Total # from Disadvantaged Background: For All Programs ***(****New and Prior Records)*: Enter the total number of residents from disadvantaged backgrounds who completed each residency training program during the annual reporting period in the textbox in Column 10 (Block 9).

Program Completers: Enter # from Disadvantaged Background who are not URM: Next, enter the total **number of residents from disadvantaged backgrounds** who completed each residency training program during the annual reporting period and were **NOT underrepresented minorities** in the textbox in Column 11 (Block 10).

Note: Counts reported in Column 11 (Block 10) are a subset of counts reported in Column 10 (Block 9).

Reference: Refer to the glossary for definitions 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: Trainees from a Rural Background

DV-3 - Entering Residents Count from Rural Residential Background

No.	Record Status	Type of Training Program	Trainees from Rural Residential Background	
			Enter # of Residents from a Rural Background	Enter # of Program Completers from a Rural Background
		(1)	(4) Block 3	(6) Block 5
1	Prior Record	Residency |Internal Medicine		

Figure 27. DV-3 - Entering Residents Count from Rural Residential Background

Trainees from Rural Residential Background: Enter # of Residents from a Rural Background: For All Programs *(New and Prior Records)*: Enter the total number of residents from a rural residential background who participated in each residency training program during the annual reporting period in the textbox in Column 4 (Block 3).

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

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

No.	Record Status	Type of Training Program	Trainees from Rural Residential Background	
			Enter # of Residents from a Rural Background	Enter # of Program Completers from a Rural Background
		(1)	(4) Block 3	(6) Block 5
1	Prior Record	Residency |Internal Medicine		

Figure 28. DV-3 - Entering Program Completers Count from Rural Residential Background

Trainees from Rural Residential Background: Enter # of Program Completers from a Rural Background: For All Programs *(New and Prior Records)***:** Enter the total number of residents from a rural residential background who completed each residency training program during the annual reporting period in the textbox in Column 6 (Block 5).

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.

IND-GEN: Individual Characteristics

INDGEN - Introduction

Notice to Grantees about Individual-level Data:

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

IND-GEN - 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.

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

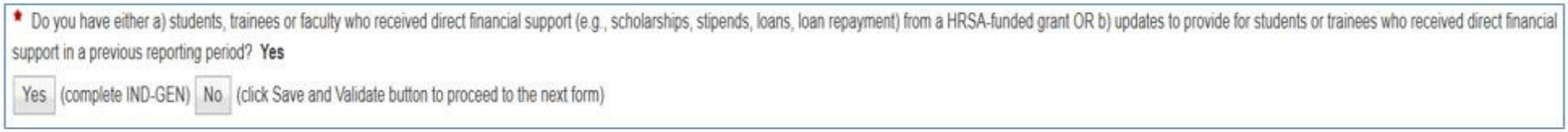


Figure 29. IND-GEN - Setup

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.

IND-GEN - Selecting Type of Training Program

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

Figure 30. IND-GEN - Selecting Type of Training Program

Type of Training Program:

- **Review Prior Records:** Column 1 (Type of Training Program) will prepopulate for prior records with data submitted in the previous annual reporting period.

- **Add New Records:** 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" that is available in the drop-down menu under the column labeled "Type of Training Program" should only be selected for faculty who received a BHW-funded financial award during the annual reporting period.

IND-GEN - Entering Trainee Unique ID

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

Figure 31. IND-GEN - Entering Trainee Unique ID

Trainee Unique ID:

- **Review Prior Record:** Column 2 (Block 1) will prepopulate for prior records with data submitted in the previous annual reporting period.
- **Add New Records:** Enter a seven (7) alphanumeric unique identifier for each individual in the textbox in Column 2 (Block 1).

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

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

Type of Training Program	Trainee Unique ID	Select Individual's Training or Awardee Category	Select Individual's Enrollment / Employment Status	Select Individual's Sex
(1)	(2) Block 1	(3) Block 2	(4) Block 3	(5) Block 4
		Select one Resident Faculty		

Figure 32. IND-GEN - Selecting Individual's Training or Awardee Category

Select Individual's Training or Awardee Category:

- **Review Prior Records:** Column 3 (Block 2) will prepopulate for prior records with data submitted in the previous annual reporting period.

- **Add New Records:** Select each individual’s **training category** by clicking on the drop-down menu in Column 3 (Block 2) and choosing from the available options:

- Faculty
- Practicing Professional
- Resident

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

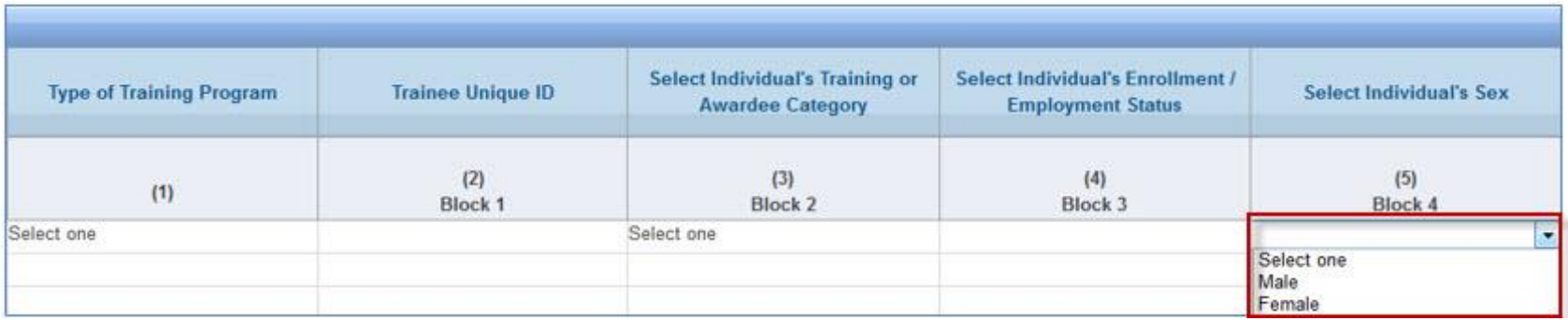
Type of Training Program	Trainee Unique ID	Select Individual's Training or Awardee Category	Select Individual's Enrollment / Employment Status	Select Individual's Sex
(1)	(2) Block 1	(3) Block 2	(4) Block 3	(5) Block 4
Select one		Select one	Select one Full-time Part-time	

Figure 33. IND-GEN - Selecting Individual's Enrollment/Employment Status

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

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

IND-GEN - Selecting Individual's Sex



Type of Training Program	Trainee Unique ID	Select Individual's Training or Awardee Category	Select Individual's Enrollment / Employment Status	Select Individual's Sex
(1)	(2) Block 1	(3) Block 2	(4) Block 3	(5) Block 4
Select one		Select one		Select one Male Female

Figure 34. IND-GEN - Selecting Individual's Sex

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

- Female
- Male
- Not Reported

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

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

IND-GEN - Selecting Individual's Age

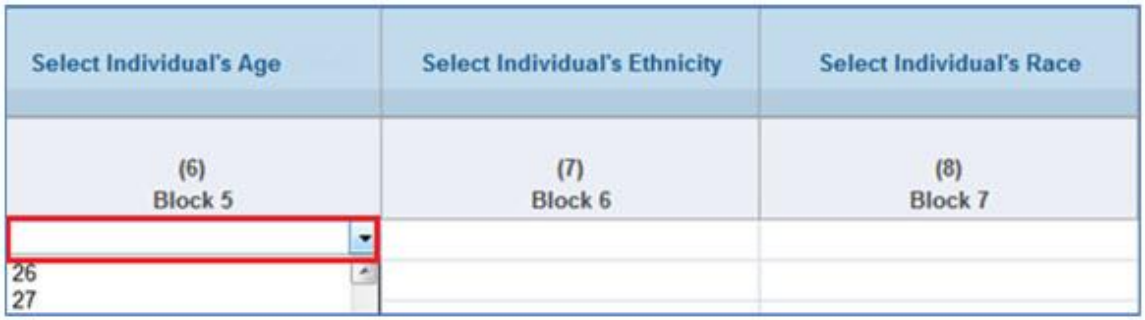


Figure 35. IND-GEN - Selecting Individual's Age

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

- 12
- 15
- 18
- 21
- 24
- 27
- 30
- 33
- 36
- 39
- 42
- 45
- 48
- 51
- 54
- 57
- 60
- 63
- 66
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- 47
- 50
- 53
- 56
- 59
- 62
- 65
- 68

- 69
- 70
- 71
- 72
- 73
- 74
- 75
- Not Reported

IND-GEN - Selecting Individual's Ethnicity

Type of Training Program	Trainee Unique ID	Select Individual's Age	Select Individual's Ethnicity
(1)	(2) Block 1	(6) Block 5	(7) Block 6
Select one		14	

Select one
Hispanic/Latino
Non-Hispanic/Non-Latino

Figure 36. IND-GEN - Selecting Individual's Ethnicity

Select Individual's Ethnicity:

- **Review Prior Records:** Column 7 (Block 6) will prepopulate for prior records with data submitted in the previous annual reporting period.
- **Add New Records:** Select each **individual's ethnicity** by clicking on the drop-down menu in Column 7 (Block 6) and choosing one of the following options:

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

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

Note: This column will 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

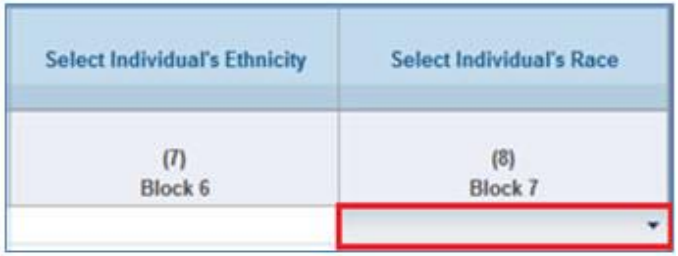


Figure 37. IND-GEN - Selecting Individual's Race

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

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

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

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

Note: This column will 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

Trainee Unique ID	Select Whether Individual is from a Rural Residential Background	Select Whether Individual is from a Disadvantaged Background	Select Individual's Veteran Status
(2) Block 1	(9) Block 8	(10) Block 9	(11) Block 10

Figure 38. IND-GEN - Selecting if Individual is from a Rural Residential Background

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

- Yes
- No
- Not Reported

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

Note: This column will 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

Trainee Unique ID	Select Whether Individual is from a Rural Residential Background	Select Whether Individual is from a Disadvantaged Background
(2) Block 1	(9) Block 8	(10) Block 9

Figure 39. IND-GEN - Selecting if Individual is from a Disadvantaged Background

Select Whether Individual is from a Disadvantaged Background: Review Prior Records: Column 10 (Block 9) will prepopulate for prior records with data submitted in the previous annual reporting period.
Add New Records: Select whether each individual is from a **disadvantaged background** by clicking on the drop-down menu in Column 10 (Block 9) and choosing one of the following options:

- Yes
- No
- Not Reported

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

Note: This column will 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

Trainee Unique ID	Select Whether Individual is from a Rural Residential Background	Select Whether Individual is from a Disadvantaged Background	Select Individual's Veteran Status
(2) Block 1	(9) Block 8	(10) Block 9	(11) Block 10

Figure 40. IND-GEN - Selecting Individual's Veteran Status

Select Individual's Veteran Status: Review Prior Records: Column 11 (Block 10) will prepopulate for prior records with data submitted in the previous annual reporting period.
Add New Records: Select each individual's current **veteran status** by clicking on the drop-down menu in Column 11 (Block 10) and choosing **one** of the following options:

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

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

Note: This column will 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.

Type of Training Program	Trainee Unique ID	Select Whether Individual Received BHW Financial Award?	Enter Individual's Financial Award Amount (BHW funds only)					
			Stipend	Traineeship	Fellowship	Current Reporting Period Total	Academic Year Total	Cumulative BHW Financial Award Total
(1)	(2) Block 1	(12) Block 11	(13) Block 11	(14) Block 11	(20) Block 11	(21a) Block 11	(21b) Block 11	(21c) Block 11
		Select one Yes No				0	0	0
						0	0	0
						0	0	0

Figure 41. IND-GEN - Entering BHW-Funded Financial Award Information

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

- Yes
- No

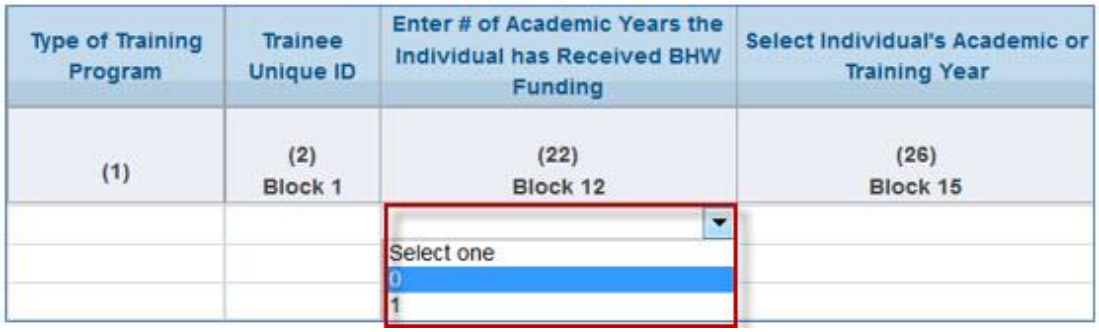
Enter Individual's Financial Award Amount (BHW funds only): Stipend: If the individual did receive a BHW-funded financial award, select "Yes" in Column 12 (Block 11) and enter the total amount of BHW dollars provided during the current annual reporting period in the textbox in Column 13. Total amount reported should account for all BHW dollars including those applied to salary, fringe benefits, travel expenses, conference expenses, tuition, fees, and reasonable living expenses, as allowed by federal statutes and regulations (do not report salary or benefits for faculty). If the individual did not receive a BHW-funded financial award, select "No" in Column 12 (Block 11) and enter "0" in the textbox in Column 13.

Enter Individual's Financial Award Amount (BHW funds only): Traineeship: If the individual did receive a BHW-funded financial award, select "Yes" in Column 12 (Block 11) and enter the total amount of BHW dollars provided during the current annual reporting period in the textbox

in Column 14. Total amount reported should account for all BHW dollars including those applied to salary, fringe benefits, travel expenses, conference expenses, tuition, fees, and reasonable living expenses, as allowed by federal statutes and regulations (do not report salary or benefits for faculty). 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 14.

Enter Individual's Financial Award Amount (BHW funds only): Fellowship: If the individual did receive a BHW-funded financial award, select “Yes” in Column 12 (Block 11) and enter the total amount of BHW dollars provided during the current annual reporting period in the textbox in Column 20. Total amount reported should account for all BHW dollars including those applied to salary, fringe benefits, travel expenses, conference expenses, tuition, fees, and reasonable living expenses, as allowed by federal statutes and regulations (do not report salary or benefits for faculty). 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 20.

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



Type of Training Program	Trainee Unique ID	Enter # of Academic Years the Individual has Received BHW Funding	Select Individual's Academic or Training Year
(1)	(2) Block 1	(22) Block 12	(26) Block 15

Figure 42. IND-GEN - Entering # of Academic Years the Individual has Received BHW Funding

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

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

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

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

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

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

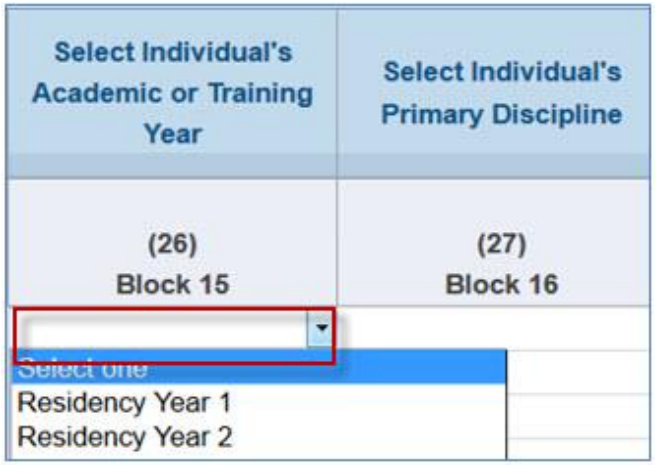


Figure 43. IND-GEN - Selecting Individual's Academic or Training Year

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

- Faculty
- Non-degree Training Year 1
- Residency Year 2
- Residency Year 4
- Non-degree Training Program Year 2
- Residency Year 1
- Residency Year 3
- N/A

Note: For practicing professionals (community physicians), select Non-degree Training Program Year 1 or Year 2.

IND-GEN - Selecting Individual's Primary Discipline

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

Figure 44. IND-GEN - Selecting Individual's Primary Discipline

Select Individual's Primary Discipline: Review Prior Records: Column 27 (Block 16) will prepopulate for prior records with data submitted in previous reporting periods.

Add New Records: Select each individual's **profession and discipline** by clicking on the drop-down menu in Column 27 (Block 16) and choosing **one** of the available options:

- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Medicine - Allergy and Immunology
- Medicine - Dermatology
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology

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.

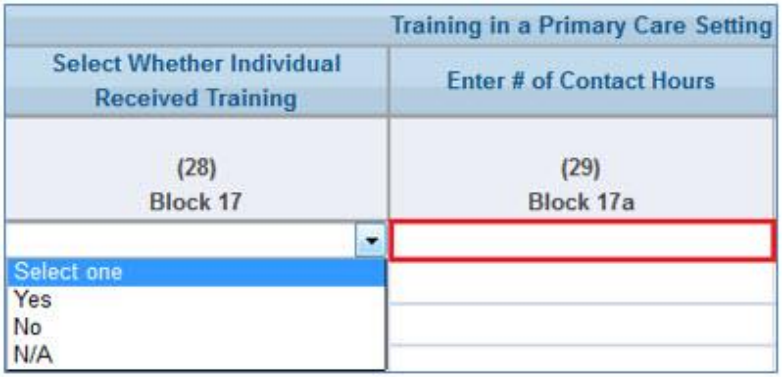


Figure 45. IND-GEN - Entering Training Information in a Primary Care Setting

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

- Yes
- No
- N/A

Training in a Primary Care Setting: Enter # of Contact Hours: If the individual **did receive** clinical or experiential training in a primary care setting, **enter the total number of hours** spent in this type of setting during the annual 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).

Training in a Primary Care Setting: Enter # of Patient Encounters: If the individual **did receive** clinical or experiential training in a primary care setting, **enter the number of patient encounters** spent in this type of setting during the annual reporting period in the textbox under Column 30

(Block 17b). If the individual **did NOT receive** clinical or experiential training in a primary care setting, **leave the textbox blank** under Column 30 (Block 17b).

Warning: Select "N/A" in the drop-down menu under Block 17 for faculty.

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

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

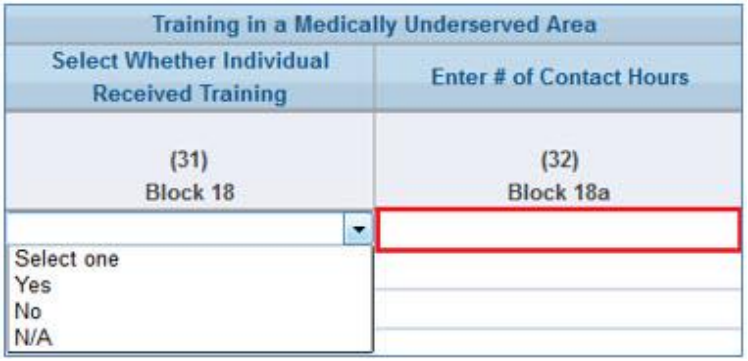


Figure 46. IND-GEN - Entering Training Information in a Medically Underserved Area

Training in a Medically Underserved Area: Select Whether Individual Received Training: All Records *(New and Prior)*: Select whether each individual received clinical or experiential **training in a medically-underserved community (MUC)** during the current annual reporting period by clicking on the drop-down menu in Column 31 (Block 18) and choosing **one** of the following options:

- Yes
- No
- N/A

Training in a Medically Underserved Area: Enter # of Contact Hours: If the individual **did receive** clinical or experiential training in a medically-underserved community, **enter the total number of hours** spent in this type of setting during the annual reporting period in the textbox under Column 32 (Block 18a). If the individual **did NOT receive** clinical or experiential training in a medically-underserved community, **leave the textbox blank** under Column 32 (Block 18a).

Warning: Select "N/A" in the drop-down menu under Block 18 for faculty.

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.

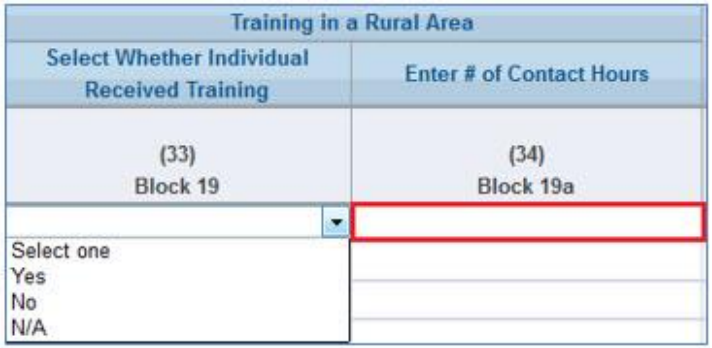


Figure 47. IND-GEN - Entering Training Information in a Rural Area

Training in a Rural Area: Select Whether Individual Received Training: All Records *(New and Prior)***:** Select whether each individual received clinical or experiential **training in a rural area** during the current annual reporting period by clicking on the drop-down menu in Column 33 (Block 19) and choosing **one** of the following options:

- Yes
- No
- N/A

Training in a Rural Area: Enter # of Contact Hours: If the individual **did receive** clinical or experiential training in a rural area, **enter the total number of hours** spent in this type of setting during the annual reporting period in the textbox under Column 34 (Block 19a). if the individual **did NOT receive** clinical or experiential training in a rural area, **leave the textbox blank** under Column 34 (Block 19a).

Warning: Select "N/A" in the drop-down menu under Block 19 for faculty.

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

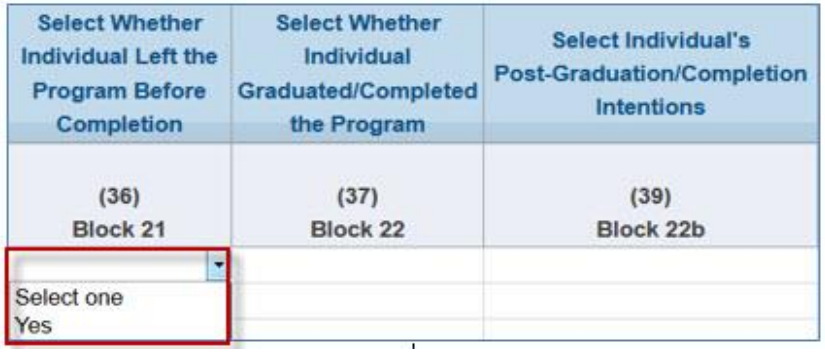


Figure 48. IND-GEN - Selecting Whether Individual Left the Program Before Completion

Select Whether Individual Left the Program Before Completion: For all records (new and prior), select whether each individual permanently left their training program before completion during the annual 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 Individual's Post-Graduation/Completion Intentions
(37) Block 22	(39) Block 22b

Figure 49. IND-GEN - Entering Graduation/Completion Information

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

- Yes
- No

Select Individual's Post-Graduation/Completion Intentions: If the individual is a resident who completed their residency program or a community provider who completed faculty development, select the individual's training or employment intentions by clicking on the drop-down menu under Block 22b and choosing **all that apply** from the available options.
If the individual is a resident who did not complete their residency program or is a faculty member, select "N/A" under Block 22b.

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

Warning: 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

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

Figure 50. 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: Grayed fields are provided here for identification purposes only. Select whether current employment data are available for each former resident who received a BHW-funded financial award and completed their residency one year prior to this report by clicking on the drop-down menu under Block 23 and choosing **one** of the following options:

- Yes
- No

Select Individual's Current Training/Employment Status: If "Yes" was selected in Block 23, choose each former resident's current employment location by clicking on the drop-down menu under Block 23a and choosing all that apply from the available options.
If "No" was selected in Block 23, choose "N/A" in Block 23a.
Repeat these steps for all rows in the INDGEN-PY table and enter selections for all blank fields under Blocks 23 and 23a.

- Individual currently practices in a medically underserved area
- Individual currently practices in a rural area
- None of the above
- Individual currently practices in a primary care setting
- Individual is currently teaching
- N/A

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

- No
- Yes
- N/A

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

Experiential Characteristics—EXP Subforms

EXP - Introduction

Order of Subforms: EXP subforms **MUST be completed in order**, otherwise drop-down menus will not prepopulate correctly.

- You must complete and 'Save and Validate' EXP-1 first before proceeding to EXP-2.
- Likewise, you must complete and then 'Save and Validate' EXP-2 before proceeding to EXP-3.

Information about Prior Records (training sites) reported previously:
The BPMH system will prepopulate the names each site previously reported in the Saved Records Table within the EXP-1 subform. You must select whether each previously-reported site was used during the current annual reporting period.

- **If "Yes" was selected**, the BPMH system will prepopulate certain blocks in the EXP-2 subform and display it as an option in the EXP-3 subform:

- **If "'No" was selected**, the BPMH system will not include the site as an option in the EXP-2 and EXP-3 subforms.

Warning: Complete the EXP-1, EXP-2 and EXP-3 subforms only for sites associated with field placements for community-based clinical training in primary care.

EXP-1: Training Site Setup

EXP-1 - Entering Site Name

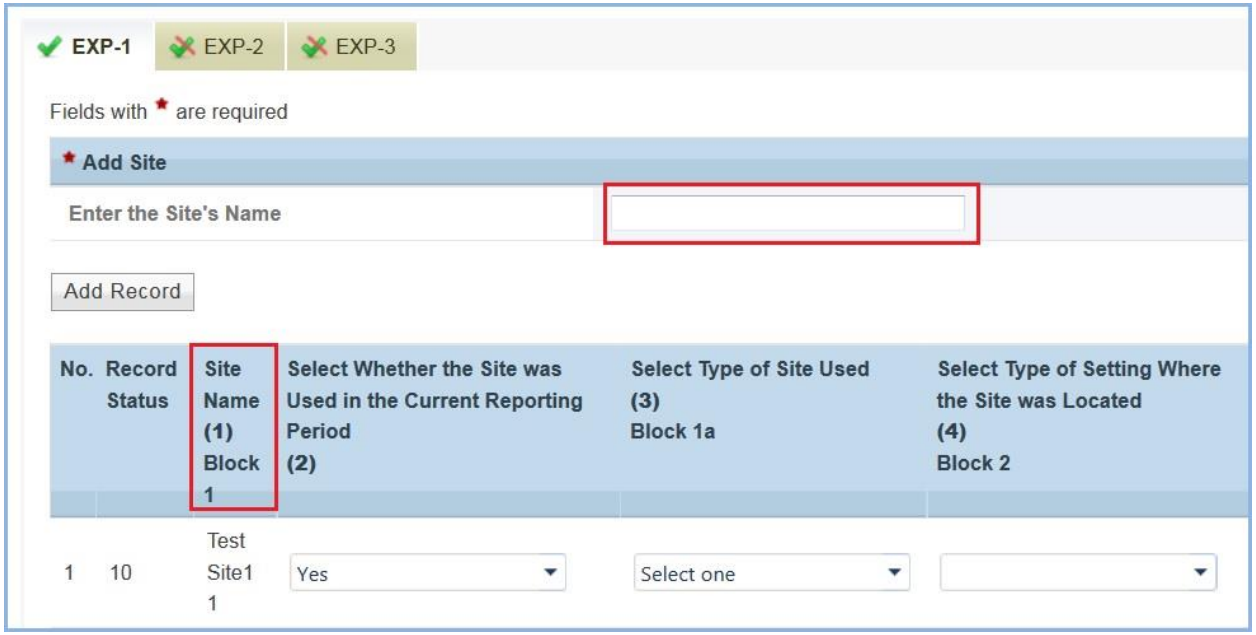


Figure 51. EXP-1 - Entering Site Name

Site Name:

- **Review Prior Sites:** Column 1 (Block 1) will prepopulate with data from prior sites used in previous reporting periods.
- **Add New Sites:** Enter the name of the site used to train individuals during the current reporting period in the textbox next to the row labeled, "Enter the Site's Name." Next, click the "Add Record" button. Repeat this process as necessary to capture the names of each NEW site used during the current reporting period.

EXP-1 - Selecting Whether the Site was Used in the Current Period

Warning: EXP-1 must be completed and validated prior to beginning EXP-2. You may delete or edit pre-populated prior records in this form if they are no longer applicable.

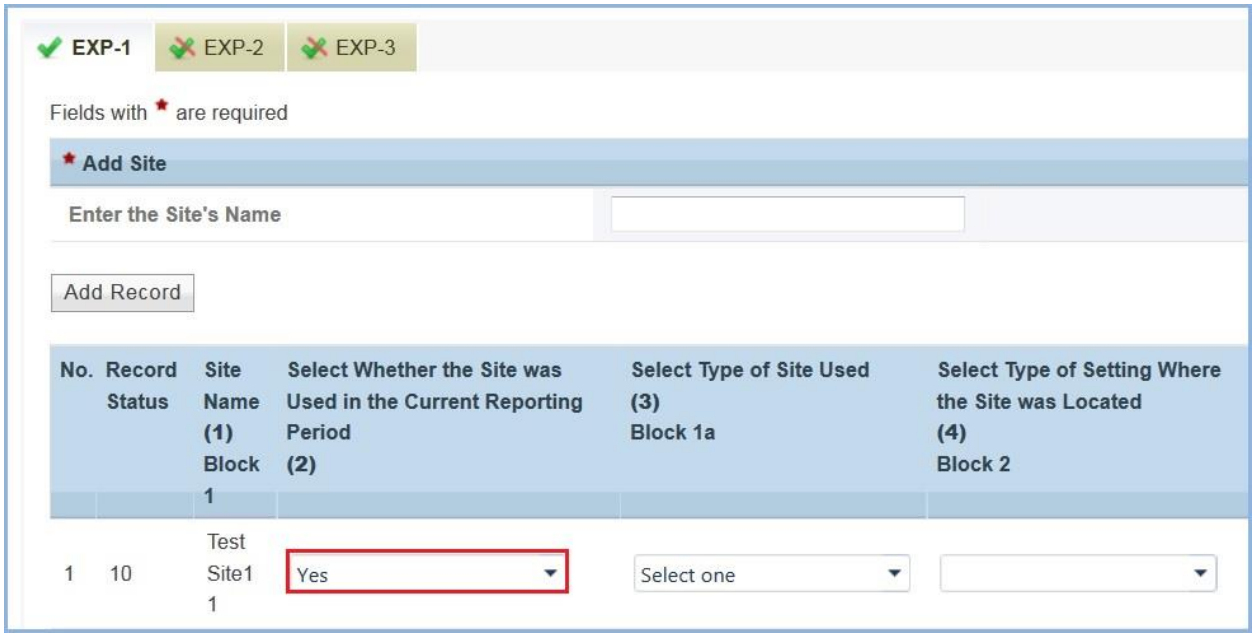


Figure 52. EXP-1 - Selecting Whether the Site was Used in the Current Period

Select Whether the Site was Used in the Current Reporting Period: For all records, select whether each site was used during the annual reporting period by clicking on the drop-down menu located under the column labeled "Select Whether Site Was used in the Current Reporting Period" and choosing **one** of the following options:

- Yes
- No

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

Note: If "No" was selected for a previously-used site, this site will not prepopulate into drop-down menus on EXP-2 or EXP-3.

EXP-1 - Selecting Type of Site Used

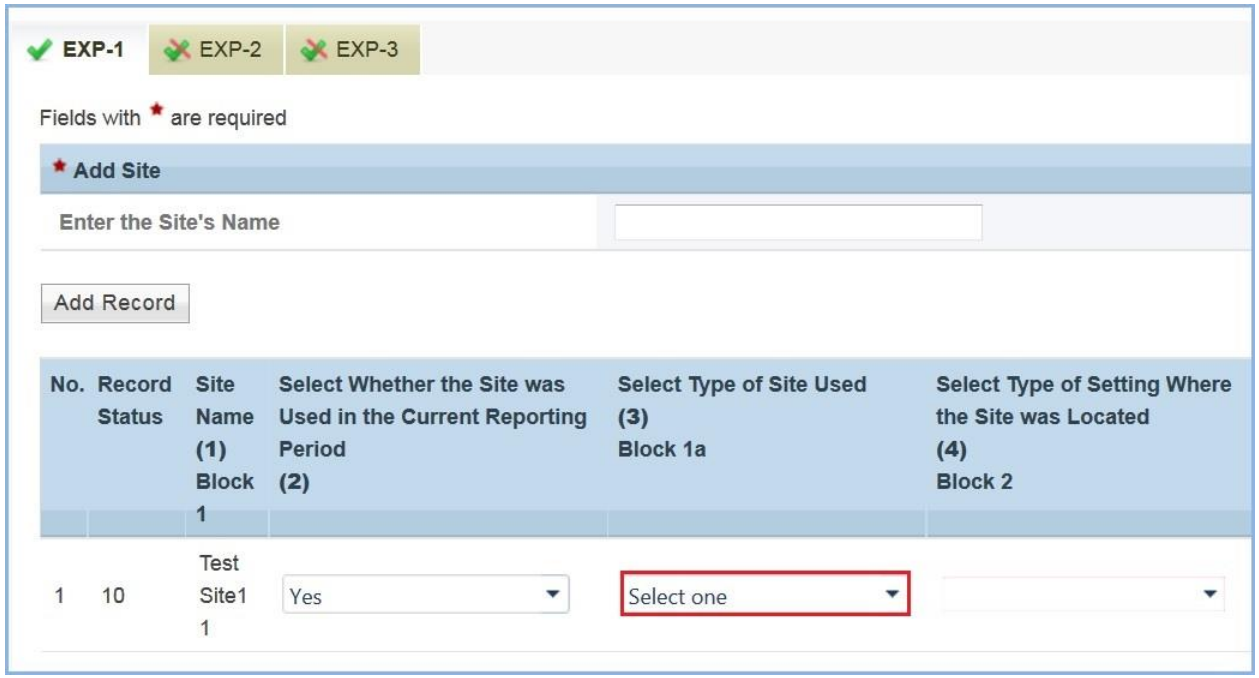


Figure 53. EXP-1 - Selecting Type of Site Used

Select Type of Site Used: Select the type of sites used to train residents or fellows during the annual 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
- Community - based organization
- Community Health Center (CHC)
- Dentist Office
- Federal Government Office or Agency
- Hospital
- International nonprofit/nongovernmental organization
- Long - term Care Facility
- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Behavioral Health Center
- Critical Access Hospital
- Emergency Room
- FQHC or look - alike
- Independent Living Facility
- Local Government Office or
- Acute care services
- Assisted Living Community
- Community care programs for elderly mentally challenged individuals
- Day and home care programs (e.g., Home Health)
- Federal and State Bureau of Prisons
- Hospice
- Indian Health Service (IHS) site
- Local health department
- National health association

- Nurse Managed Health Clinics
- Other community health center (e.g.; free clinic)
- Program of All Inclusive Care for the Elderly
- School - based clinic
- State Government Office or Agency
- Tribal Government
- Veterans Affairs Healthcare (e.g., VA Hospital or clinic)

Agency

- Mobile Clinic/Site
- Nursing Home
- Other Oral Health Facility
- Residential Living Facility
- Senior Centers
- State Health Department
- Tribal Health Department
- Other
- Physician Office
- Rural Health Clinic
- Specialty clinics (e.g., mental health practice, rehabilitation, substance abuse clinic)
- Surgery Clinic
- Tribal Organization

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

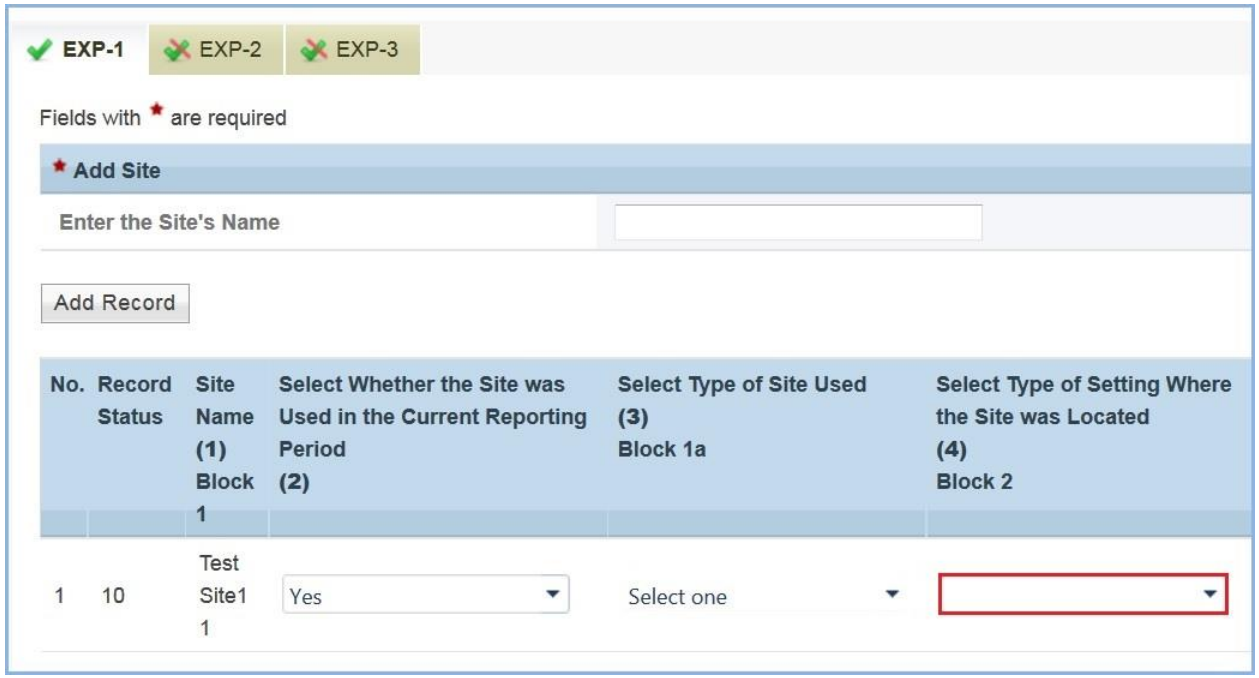


Figure 54. EXP-1 - Selecting Type of Setting Where the Site was Located

Select Type of Setting Where the Site was Located: Select whether each site used to train students during the annual reporting period was located in designated settings by clicking on the drop-down menu under Block 2 and choosing all that apply from the following options:

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

EXP-1 - Entering Site's geographical Data

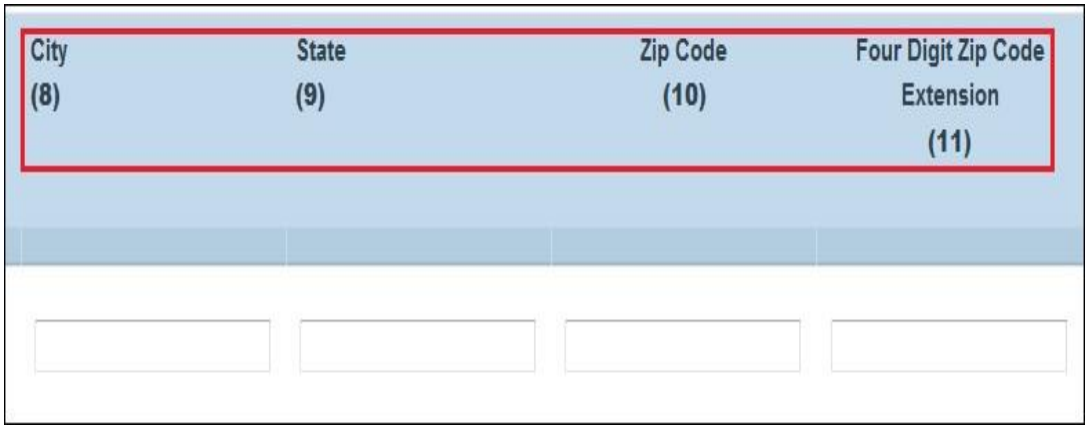


Figure 55. EXP-1 - Entering Site's geographical Data

City: Enter the name of the city where each training site is located by clicking on the textbox under Column 8.

State: Enter the two-letter abbreviation for the state where each training site is located by clicking on the textbox below Column 9.

Zip Code: Enter the zip code (5 digits) where each training site is located by clicking on the textbox under Column 10.

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

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: Training Site Characteristics

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	Select Type of Site Used
(1)	(2) Block 1	(3) Block 1a

Figure 56. EXP-2 - Selecting Training Program and Site Name

Type of Training Program: Review Prior Records: Columns 1 and 2 (Block 1) will prepopulate for prior records with data submitted in previous reporting periods.
Add New Records: Select a training program by clicking on the drop-down menu in Column 1 and choosing one of the available options (programs that were marked on the Training Program Setup Form as "active" in the annual 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 annual reporting period).

*Note: **Repeat this process** until all used Training Program/Site combinations are present.*

- *If the same site was used for multiple training programs, then multiple entries are required in the EXP-2 subform.*
- *If the same program used multiple training sites, then multiple entries are required in the EXP-2 subform.*

EXP-2 - Selecting Type of Site Used

Type of Training Program	Site Name	Select Type of Site Used	Select Type of Setting Where the Site was Located
(1)	(2) Block 1	(3) Block 1a	(4) Block 2
Major Participating Site/Rotation Site | Medical Specialties (Primary Care) - Pediatrics (General Pediatrics)	University Pediatric Hospital	Academic institution	None of the above

Figure 57. 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.

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

Site Name	Select Type of Site Used	Select Type of Setting Where the Site was Located	Select Type(s) of Partners/Consortia used to Offer Training at this Site
(2) Block 1	(3) Block 1a	(4) Block 2	(5) Block 5
University Pediatric Hospital	Academic institution	None of the above	Academic department - outside the institution, Academic department - within the institution, Ambulatory practice sites, Health department - Local, Hospital, Professional Associations, Quality improvement organization

Figure 58. 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.

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.

EXP-2 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia used to Offer Training at this Site	Select Type(s) of Vulnerable Population Served at this Site
(5) Block 5	(7) Block 4

Figure 59. EXP-2 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia used to Offer Training at this Site: For all records (*New and Prior*): Select the **type(s) of partnerships or consortia** used or established for the purpose of training individuals at each site during the annual 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
- Alzheimer's Disease Resource Centers
- Community Health Center (CHC)
- Educational institution (Grades K - 12)
- Federal Government - Other HRSA Program
- Federal Government - CDC
- Federal Government - NIH
- Federal Government - SAMHSA
- Geriatric Behavioral or Mental Health Units
- Health department - Local
- Health disparities research center
- Hospice
- Long-term care facility
- Nonprofit organization (non - faith
- Academic department - within the institution
- Ambulatory practice sites
- Community Mental Health Center
- Federal Government - Veterans Affairs
- Federal Government - ACL
- Federal Government - FDA
- Federal Government - Other
- Federally - qualified health center or look - alikes
- Geriatric consultation services
- Health department - State
- Health insurance/Healthcare Provider Group (e.g.; PPO/HMO)
- Hospital
- No partners/consortia used
- Nurse managed health clinic
- Other
- Professional Associations
- Alzheimer's Association/Chapters
- Area Agencies on Aging
- Day and home care programs (i.e. Home Health)
- Federal Government - Department of Defense/Military
- Federal Government - AHRQ
- Federal Government - IHS
- Federal Government - Other HHS Agency/Office
- Geriatric ambulatory care and comprehensive units
- Health center (e.g.; free clinic)
- Health department - Tribal
- Health policy center
- Local Government
- Nonprofit organization (faith - based)
- Nurse Managed Health Clinics
- Physical therapy/Rehabilitation center

based)
- Nursing home
- Private/For - profit organization
- Senior Center
- Tribal Organization
- State Governmental Programs
- Quality improvement organization
- Tribal Government

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

EXP-2 - Selecting Type(s) of Vulnerable Population

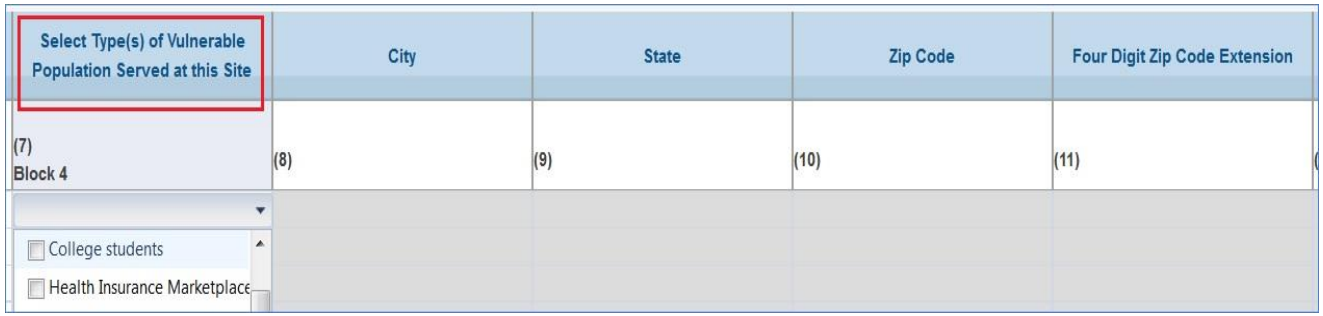


Figure 60. EXP-2 - Selecting Type(s) of Vulnerable Population

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

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

Warning: You may not select "None of the above" 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.

EXP-3: Experiential Characteristics - Trainees by Profession/Discipline

EXP-3 - Selecting Training Program and Site Name

Warning: EXP-2 must be completed, saved, and validated before beginning EXP-3.

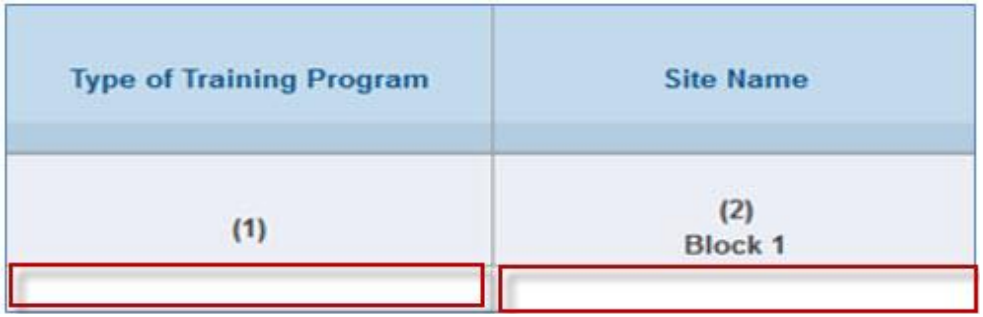


Figure 61. EXP-3 - Selecting Training Program and Site Name

Type of Training Program: For all records *(New and Prior):* **Select a training program** by clicking on the drop-down menu in Column 1 and choosing one of the available practicum/field placement program options (marked on the Training Program Setup Form as "active" in the annual 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 annual reporting period). **Repeat this process** until all used Training Program/Site combinations used in EXP-2 are present.

Note: EXP-3 will initially appear blank; however, drop-down menu in Columns 1 and 2 will load with data that were entered and saved in the Training Program Setup Form.

EXP-3 - Selecting Profession and Discipline of Individuals Trained

Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained
(1)	(2) Block 1	(3) Block 3

Figure 62. EXP-3 - Selecting Profession and Discipline of Individuals Trained

Select Profession and Discipline of Individuals Trained: For all records, Select the profession/discipline of trainees trained at each site during the annual reporting period (including interdisciplinary and interprofessional trainees who participated in team-based care) by clicking on the drop-down menu under Block 3 and choosing one of the available options. **Repeat EXP-3 Steps 1 and 2 to identify each Profession/Discipline of all individuals trained at one site; each reported profession/discipline will be reported on a separate line even though they trained at the same site).**

- Behavioral Health - Clinical Psychology
- Behavioral Health - Marriage and Family Therapy
- Behavioral Health - Pastoral/Spiritual Care
- Dentistry - General Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Prosthodontic Dentistry
- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Integrative Medicine
- Medicine - Internal
- Behavioral Health - Clinical Social Work
- Behavioral Health - Other Psychology
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pediatric Dentistry
- Dentistry - Public Health Dentistry
- Medicine - Allergy and Immunology
- Medicine - Dermatology
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Behavioral Health - Counseling Psychology
- Behavioral Health - Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Medicine - Anesthesiology
- Medicine - Emergency Medicine
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical

Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Public health nurse
- Other - Audiology
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Midwife (non-nurse)
- Other - Optometry
- Other - Podiatry
- Other - Registered Dietician
- Other - Speech Therapy
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Registered Nurse
- Other - Chiropractic
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Other - Unknown
- Public Health - Biostatistics
- Medicine - Plastic Surgery
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Child/Adolescent Psychiatric/Mental Health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse anesthetist
- Nursing - Nurse midwife
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Radiologic technology
- Other - Speech Pathology
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Administration
- Public Health - Injury Control & Prevention
- Student - Alternative/Complementary Nursing
- Student - CNS - Geropsychiatric
- Student - CNS - Psychiatric/Mental health
- Student - Dental Hygiene
- Student - Graduate - Nursing Doctorate

- Physician Assistant
- Public Health - Environmental Health
- Public Health - Health Policy & Management
- Public Health - Nutrition
- Student - CNS - Adult gerontology
- Student - CNS - Neonatal
- Student - CNS - Women's health
- Student - Dental School
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Health Informatics
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - NP - Acute care pediatric
- Student - NP - Child/Adolescent Psychiatric/Mental Health
- Student - NP - Family Psychiatric/Mental Health
- Student - NP - Other advanced nurse specialists
- Student - Pharmacy School
- Student - Post - high school / Pre - college
- Student - Undergraduate - Public Health
- Public Health - Epidemiology
- Public Health - Infectious Disease Control
- Public Health - Social & Behavioral Sciences
- Student - CNS - Family
- Student - CNS - Pediatrics
- Student - Dental Assistant
- Student - Diploma/Certificate
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Home Health Aide
- Student - Medical School
- Student - NP - Adult gerontology
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Pediatrics
- Student - Physical Therapy
- Student - Registered nurse (RN)
- Student - Graduate - Other Behavioral Health
- Student - Graduate - Social Work
- Student - Law School
- Student - NP - Acute care adult gerontology
- Student - NP - Adult Psychiatric/Mental health
- Student - NP - Family
- Student - NP - Neonatal
- Student - NP - Women's health
- Student - Physician Assistant
- Student - Undergraduate - Other

Note: Each line on this form relates to only one discipline reflected in the selection from the drop-down menu in Block 3. Add a line for each

profession/discipline (Block 3) of individuals that train at each training site (Block 1) for each program being reported on (Column #1). Only report additional team-based care trainees in Block 8 who trained alongside individuals reported in Block 3.
Remember to include:

- *Other medical residents that train with the residents counted in the PC form.*
- *Students, other medical/dental residents, or other professionals who are trained by residents.*

EXP-3 - Entering # Trained in the Profession and Discipline

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 Interprofessional Team-based care
(1)	(2) Block 1	(3) Block 3	(4) Block 3	(5) Block 8

Figure 63. EXP-3 - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline: For all records: In Column 4 (Block 3), enter the number of Principal Students in the profession/discipline selected in the previous step that were trained at each site during the annual reporting period. Counts provided should be based on individuals reported on PC-8 from HRSA-funded programs.

Warning: Do not count faculty or non-trainees.

EXP-3 - Entering # of Other Interprofessional trainees who participated in team-based care

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 Interprofessional Team-based care
(1)	(2) Block 1	(3) Block 3	(4) Block 3	(5) Block 8

Figure 64. EXP-3 - 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 PC-8 from non-HRSA-funded programs.

Warning: Do not count faculty or non-trainees.

EXP-3 - Adding Individuals Trained Example 1

Example: ***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 Interprofessional 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 65. EXP-3 - Adding Individuals Trained Example 1

EXP-3 - Adding Individuals Trained Example 2

Example: ***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 Interprofessional 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 66. EXP-3 - Adding Individuals Trained Example 2

EXP-3 - Adding Individuals Trained Example 3

Example: ***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 Interprofessional 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 67. EXP-3 - Adding Individuals Trained Example 3

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

- **The CDE-1 subform is used to create new courses and update prior courses/training activities that were reported previously, but have not yet been implemented.** The BPMH system will prepopulate some Blocks in the CDE-1 subform. All other Blocks must be updated on an annual basis until the course or training activity is marked as "Implemented."

- **The CDE-1a subform is used to report on implemented courses and training activities.** The BPMH system will transfer records from CDE-1 to CDE-1a when they have been marked as implemented. For prior records in CDE-1a, the only action required in this subform is to select whether and where each previously-implemented course or training activity previously implemented was also offered during the annual reporting period.

- **The CDE-2 subform is used to report aggregate counts of individuals trained in each curriculum, based on the type of course or training activity.**

Warning: Both CDE-1 and CDE-1a must be completed and validated prior to beginning CDE-2. If you reach the CDE-2 form, and no drop-down selections appear, you have not validated both CDE-1 and CDE-1a subforms.

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 embedded Excel® form that will allow you to begin data entry.

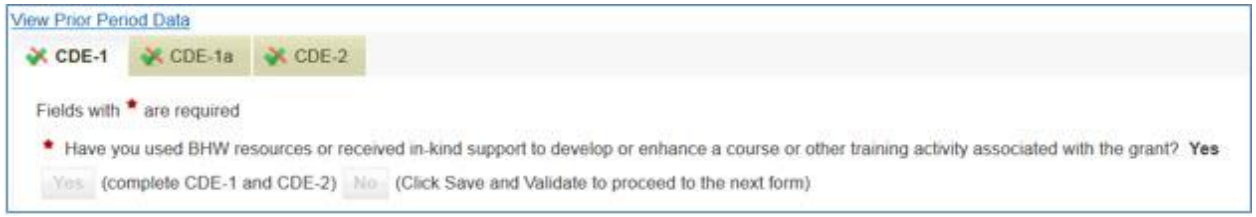


Figure 68. CDE-1 - Setup

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.

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.

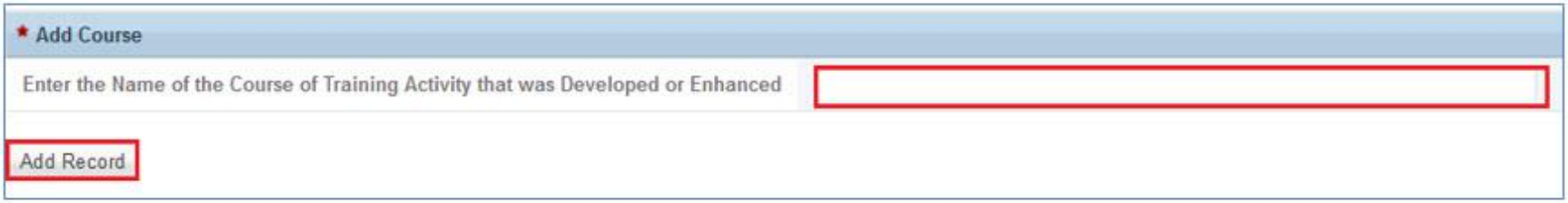


Figure 69. CDE-1 - Entering the Name of Course/Training Activity

Name of Course or Training Activity: Review Prior Records: Previously-reported (but non-implemented) courses and training activities (i.e., prior records) will prepopulate in the "Saved Records" table within the CDE-1 subform. Review this table for accuracy. If no NEW courses or training activities were developed or enhanced other than those previously reported, skip to CDE-1: Step 1 instructions.
Add New Records: Enter the name of each NEW course or training activity that was developed or enhanced through the grant at any point during the annual reporting period. Click the "Add Record" button to save your entry. **Repeat this process** to separately create each NEW course or training activity that was developed or enhanced through the grant.

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

CDE-1 - Selecting Type of Course or Training Activity

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

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

Select Type of Course or Training Activity: Review Prior Records: Column 2 (Block 2) will prepopulate for prior records with data submitted in previous annual reporting periods.
Add New Records: 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
- Clinical rotation
- Faculty development programs or activities
- Field placement/practicum
- Grand rounds

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

Figure 71. CDE-1 - Selecting whether Course was Newly Developed or Enhanced

Select whether Course or Training Activity was Newly Developed or Enhanced: Review Prior Records: Column 3 (Block 3) will prepopulate for prior records with data submitted in previous annual reporting periods.
Add New Records: 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.*
- *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.

Figure 72. CDE-1 - Entering Development/Enhancement Status

Select Status of Development or Enhancements: For all records: Select each course or training activity's **current status** by clicking on the drop-down menu under Block 4 and choosing **one** of the following options:

- Developed, not yet implemented
- Implemented
- Under development

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

- Under development: For courses and training activities under development **enter N/A** in the textboxes in Column 5.
- Developed, not yet implemented: For courses and training activities that were developed but not yet implemented, **enter N/A** in the textboxes in Column 5.
- Implemented: For developed or enhanced courses and training activities that were implemented, enter the first academic year that each developed/enhanced course or training activity was implemented in Column 5 using the YYYY-YYYY format.

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

- Under development: For courses and training activities under development, **enter N/A** in the textboxes in Column 5.
- Developed, not yet implemented: For courses and training activities that were developed but not yet implemented, **enter N/A** in the textboxes in Column 5.
- Implemented: For developed or enhanced courses and training activities that were implemented, enter the first academic year that each developed/enhanced course or training activity was implemented in Column 5 using the YYYY-YYYY format.

CDE-1 - Entering Curriculum

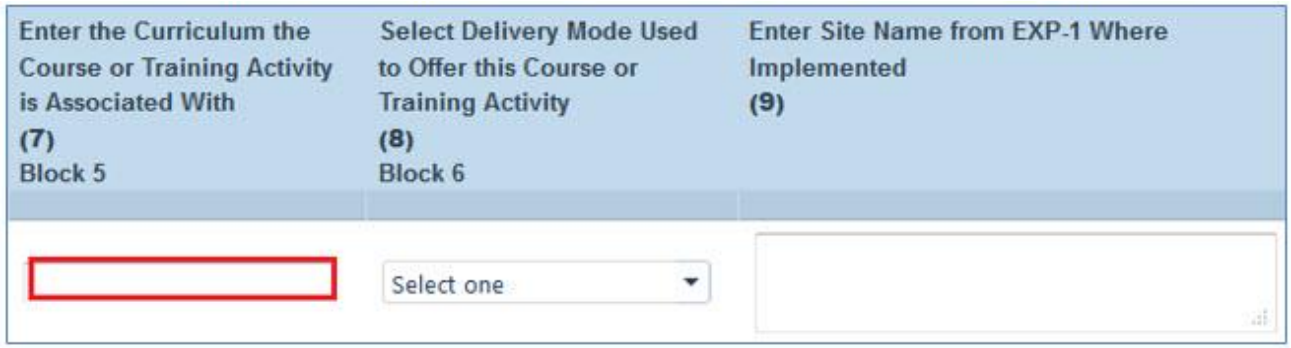


Figure 73. CDE-1 - Entering Curriculum

Enter the Curriculum the Course or Training Activity is Associated With: Review Prior Records: Column 7 (Block 5) will prepopulate for prior records with data submitted in previous annual reporting periods.
Add New Records: Type the name of the curriculum associated with each course or training activity that was developed or enhanced through the grant in the textbox in Column 7 (Block 5).

Note: If the course or training activity that was developed or enhanced ***is not associated with a specific curriculum****, type "N/A".*

CDE-1 - Selecting Delivery Mode

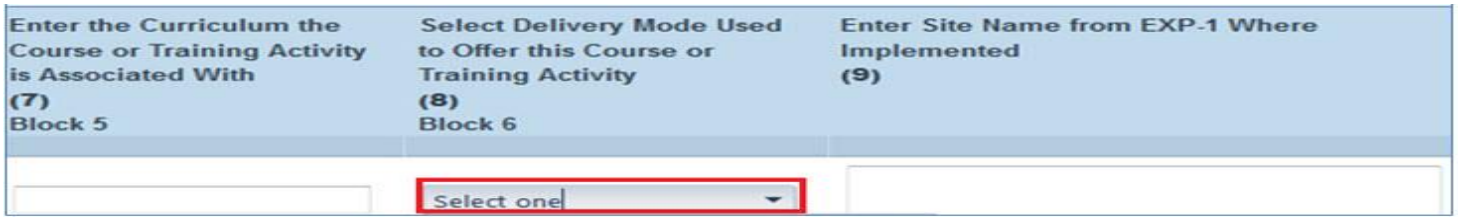


Figure 74. CDE-1 - Selecting Delivery Mode

Select Delivery Mode Used to Offer this Course or Training Activity: Review Prior Records: Column 8 (Block 6) will prepopulate for prior records with data submitted in previous annual reporting periods.

Add New Records: 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
- Distance learning (Online, Webinar)
- Grand rounds
- Clinical Rotation
- Experiential/Field-based
- Hybrid

CDE-1 - Selecting EXP-1 Site Name Where Implemented

Figure 75. CDE-1 - Selecting EXP-1 Site Name Where Implemented

Enter Site Name from EXP-1 Where Implemented: All records *(New and Prior):* Select the site names where each course or training activity was implemented during the annual reporting period according to the following directions:

1. Use the drop-down menu of EXP-1 sites in Column 9 to select all of the names of sites where the course or activity took place for courses/activities marked in Column 2 (Block 2).
2. Use the drop-down menu of EXP-1 sites in Column 9 to select “N/A” for courses/activities marked in Column 2 (Block 2).

Warning: You may not select "N/A" 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.

CDE-1a: Course Development and Enhancement - Log of Courses/Training Activities Implemented

CDE-1a - Selecting Whether the Course was Offered in the Current Period

Name of Course or Training Activity (1) Block 1	Select Type of Course or Training Activity (2) Block 2	Select whether Course or Training Activity was Newly Developed or Enhanced (3) Block 3	Select Status of Development or Enhancements (4) Block 4	For Courses or Training Activities Implemented, Enter Academic Year of First Implementation		Enter the Curriculum the Course or Training Activity is Associated With (7) Block 5	Select Delivery Mode Used to Offer this Course or Training Activity (8) Block 6	Select Whether the Course or Training Activity was Offered in the Current Reporting Period (9)
				From Year (5) Block 4a	To Year (6) Block 4a			
Medical Orders for Life-Sustaining Treatment	Faculty development prog	Enhanced	Implemented	2011	2012	Establishing a Center of Ex	Classroom-based	Select one

Figure 76. CDE-1a - Selecting Whether the Course was Offered in the Current Period

Select Whether the Course or Training Activity was Offered in the Current Reporting Period: All records: Select whether each previously-implemented course or training activity was also offered during the annual reporting period by clicking on the drop-down menu in Column 9 and choosing one of the following options:

- Yes
- No

Warning: If "No" is selected for Column 9 in the CDE-1a subform, the name of that course or training activity will not display as an option in the CDE-2 subform.

CDE-1a - Selecting EXP-1 Site Name Where Implemented

Name of Course or Training Activity (1) Block 1	Select Type of Course or Training Activity (2) Block 2	Select whether Course or Training Activity was Newly Developed or Enhanced (3) Block 3	Select Status of Development or Enhancements (4) Block 4	For Courses or Training Activities Implemented, Enter Academic Year of First Implementation		Enter the Curriculum the Course or Training Activity is Associated With (7) Block 5	Select Delivery Mode Used to Offer this Course or Training Activity (8) Block 6	Select Whether the Course or Training Activity was Offered in the Current Reporting Period (9)	Enter Site Name from EXP-1 Where Implemented (10)
				From Year (5) Block 4a	To Year (6) Block 4a				
Medical Orders for Life-Sustaining Treatment	Faculty development prog	Enhanced	Implemented	2011	2012	Establishing a Center	Classroom-based	Select one	

Figure 77. CDE-1a - Selecting EXP-1 Site Name Where Implemented

Enter Site Name from EXP-1 Where Implemented: All records *(New and Prior):* S**elect the site name** where each implemented course or training activity was offered during the annual reporting period according to the following directions:

1. Use the drop-down menu of EXP-1 sites in Column 10 to select all of the names of sites where the course or activity took place for courses/activities marked in Column 2 (Block 2).
2. Use the drop-down menu of EXP-1 sites in Column 10 to select "N/A" for courses/activities marked in Column 2 (Block 2).

Warning: You may not select "N/A" in combination with any other option.

Warning: If a previously-implemented course was NOT offered in the annual reporting period, leave the textbox under Column 9 blank.

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

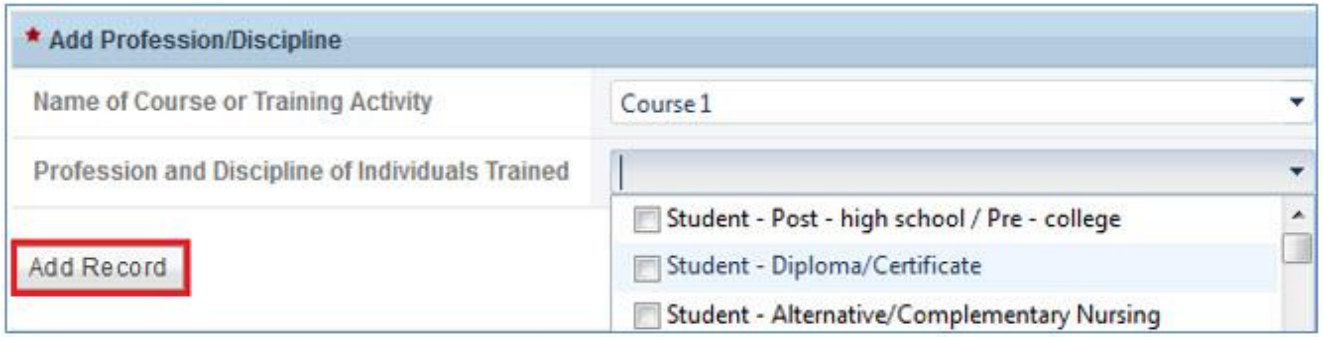


Figure 78. CDE-2 - Adding Courses and Profession/Disciplines

Name of Course or Training Activity: Select the name of one course or training activity by clicking on the drop-down menu next to "Name of Course or Training Activity" and choosing one of the available options. Only the names of courses or workshops for that were marked as "Implemented" in the CDE-1 subform (for new records) or marked as "Offered" in the CDE-1a subform (for previous records) will appear as options in the drop-down menu.

Profession and Discipline of Individuals Trained: Select all of the profession(s) and discipline(s) of individuals trained through each course or workshop offered during the annual reporting period by choosing all that apply from the available options. Click on the "Add Record" button. Repeat this process to capture the professions/disciplines of all individuals trained in each course or workshop offered during the annual reporting period.

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

- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women's health
- Nursing - Nurse educator
- Nursing - Public health nurse
- Other - Audiology
- Other - Direct Service Worker
- Other - Health Education Specialist
- Immunology
- Medicine - Dermatology
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women's health
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Registered Nurse
- Other - Chiropractic
- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Child/Adolescent Psychiatric/Mental Health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse anesthetist
- Nursing - Nurse midwife
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife
- Other - Optometry
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Other - Veterinary Medicine
- Other – Speech Therapy
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Administration

- Other - Medical Assistant
- Other - Midwife (non - nurse)
- Other - Pharmacy
- Other - Radiologic technology
- Other - Speech Pathology
- Other – Occupational Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Health Policy & Management
- Public Health - Nutrition
- Student - CNS - Adult gerontology
- Student - CNS - Neonatal
- Student - CNS - Women's health
- Student - Dental Hygiene/Public Health
- Student - Diploma/Certificate
- Student - Graduate - Other
- Student - Graduate - Public Health
- Student - Home Health Aide
- Student - Medical School
- Student - NP - Adult gerontology
- Student - NP - Emergency care
- Student - NP - Geropsychiatric
- Student - NP - Pediatrics
- Student - Physical Therapy
- Student - Registered nurse (RN)
- Student - Undergraduate - Public Health
- Other - Office/Support Staff
- Other - Podiatry
- Other - Registered Dietician
- Other - Unknown
- Other – Physical Therapy
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Infectious Disease Control
- Public Health - Social & Behavioral Sciences
- Student - CNS - Family
- Student - CNS - Pediatrics
- Student - Dental Assistant
- Student - Dental School
- Student - Graduate - Nursing Doctorate
- Student - Graduate - Other Behavioral Health
- Student - Graduate - Social Work
- Student - Law School
- Student - NP - Acute care adult gerontology
- Student - NP - Adult Psychiatric/Mental health
- Student - NP - Family
- Student - NP - Neonatal
- Student - NP - Women's health
- Student - Physician Assistant
- Student - Registered Nurse - BSN
- Public Health - Injury Control & Prevention
- Student - Alternative/Complementary Nursing
- Student - CNS - Geropsychiatric
- Student - CNS - Psychiatric/Mental health
- Student - Dental Hygiene
- Student - Dental School/Public Health
- Student - Graduate - Nursing Masters
- Student - Graduate - Psychology
- Student - Health Informatics
- Student - Licensed Practical/Vocational Nurse (LPN/LVN)
- Student - NP - Acute care pediatric
- Student - NP - Child/Adolescent Psychiatric/Mental Health
- Student - NP - Family Psychiatric/Mental Health
- Student - NP - Other advanced nurse specialists
- Student - Pharmacy School
- Student - Post - high school / Pre - college
- Student - Undergraduate - Other

Note: CDE-2 is used to report trainee counts for academic courses, training workshops, grand rounds, clinical rotations, and field placement/practica that were offered during the annual reporting period. Trainee counts for faculty development participants are captured separately with the FD-subforms and continuing education participants are reported with the CE subforms.

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

Name of Course or Training Activity (1) Block 1	Profession and Discipline of Individuals Trained (2) Block 7	Enter # Trained in this Profession and Discipline (3) Block 7
Course 1	Student - NP - Acute care pediatric	

Figure 79. CDE-2 - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline:

For each developed/enhanced course or training activity offered during the annual reporting period, click on the drop-down menu in Column 2 (Block 7) and **choose one profession/discipline** (this menu will load with the professions/disciplines selected in the previous step). Next, **enter the number of individuals trained** from that profession/discipline in the Column 3. **Repeat this step** as many times as necessary to capture the total number of individuals by profession/discipline who were trained in each course or workshop offered during the annual reporting period.

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

Faculty Development, Instruction, and Recruitment—FD Subforms

FD - Introduction

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

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

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

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

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.

Figure 80. 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 annual reporting period other than prior records, proceed to FD-1a, Step 1.
Add New Records *(Ongoing and Complete):* Enter the name of each NEW structured faculty development program coordinated and/or supported through the grant during the annual reporting period. **Select "Add Record." Repeat this process** as necessary to enter each new structured faculty development program that was coordinated and/or supported through the grant during the 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

Record Status	Program Name (1)	Select Program Status in the Current Reporting Period (1a)	Select Whether this was a Degree Bearing Program (2) Block 2	For Degree-bearing Programs	
				Select Type of Degree Offered (3) Block 2a	Select Primary Focus Area (4) Block 2b
New Record	Structured Program	Select one	Select one	Select one	Select one

Figure 81. 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 in Column 1a and choosing one of the following options:

- Complete
- Ongoing

Note:

- *Select 'Ongoing' if the training program did not conclude by* ***June 30, 2016****.*
- *Select 'Complete' if the training program concluded at some point during the annual reporting period (i.e.* ***July 01, 2015 - June 30, 2016****).*

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

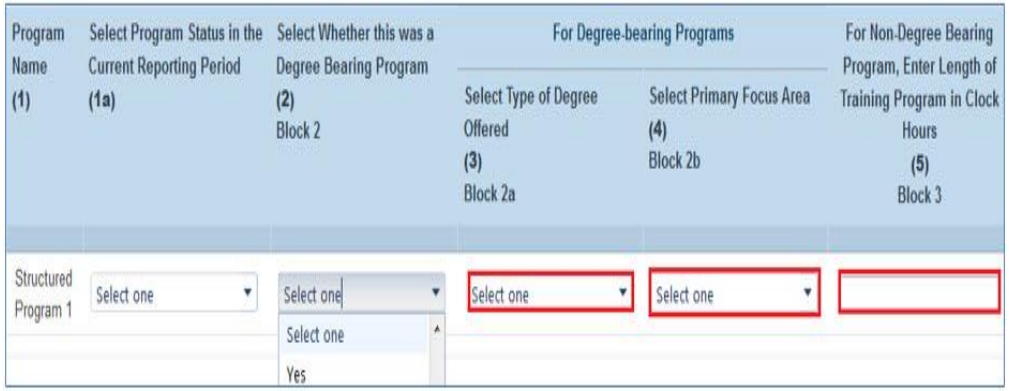


Figure 82. FD-1a - Entering Program Information for Degree/Non-Degree Programs

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: 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 "Yes" was selected for Block 2, then Select the type of degree that participants will earn when completing each program by clicking on the drop-down menu under Block 2a and choosing one of the available options. If "No" was selected in Block 2, then Select "N/A" in Block 2a.

- BA
- BCHS
- BPH

- BS
- Certificate
- DDS/MPH
- DMD
- DO
- DO/MSPH
- DrPH
- MA
- MCHS
- MD/MPH
- MD/ScD
- MHS
- MMS/MPH
- MPAP
- MPAS/MPH
- MPH
- MSCR
- MSPH
- No Degree Earned
- Post-Masters Certificate
- N/A
- BSN
- DC
- DDS/MSPH
- DMD/MPH
- DO/DrPH
- DO/ScD
- DVM
- Master's Degree Not Otherwise Specified
- MD
- MD/MSPH
- MEd
- MMS
- MMS/MSPH
- MPAS
- MPAS/MSPH
- MS
- MSHS
- MSSW
- PharmD
- PsyD
- BSW
- DDS
- Diploma
- DMD/MSPH
- DO/MPH
- Doctoral Degree Not Otherwise Specified
- Joint Degrees not otherwise specified
- MBA
- MD/DrPH
- MD/PhD
- MHA
- MMS/DrPH
- MMS/ScD
- MPAS/DrPH
- MPAS/ScD
- MS-CTS
- MSPAS
- MSW
- PhD
- ScD

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: 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 available options. If you selected "No" in Column 2 (Block 2), select "N/A" in Column 4 (Block 2b).

- Business Administration
- Dentistry - Endodontic Dentistry
- Dentistry - Orthodontic Dentistry
- Dentistry - Dental Assistant
- Dentistry - General Dentistry
- Dentistry - Pathology Dentistry
- Dentistry - Dental Hygiene
- Dentistry - Oral Surgery Dentistry
- Dentistry - Pediatric Dentistry

- Dentistry - Periodontic Dentistry
- Dentistry - Radiology Dentistry
- Health Administration
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Injury Control & Prevention
- Public Health - Social & Behavioral Sciences
- Dentistry - Prosthodontic Dentistry
- Education
- Leadership
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Policy & Management
- Public Health - Maternal and Child Health
- Teaching
- Dentistry - Public Health Dentistry
- Education and Clinical Research
- Other Focus Area
- Public Health - Environmental Health
- Public Health - Infectious Disease Control
- Public Health - Nutrition
- N/A

For Non-Degree Bearing Program, Enter Length of Training Program in Clock Hours: 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 “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). If "No" was selected in Block 2, then Select "N/A" in Block 2a.

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

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

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

Figure 83. FD-1a - Entering % of Time Spent Developing Competencies in Different Roles

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

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

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

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

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

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

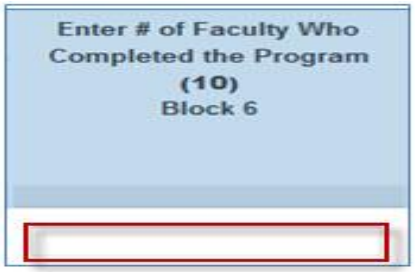


Figure 84. FD-1a - Entering # of Faculty Who Completed the Program

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 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

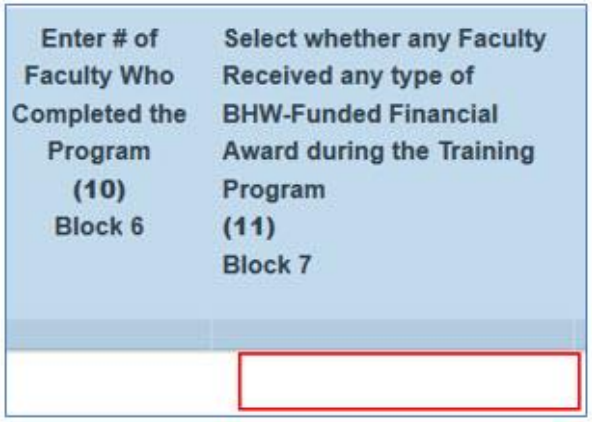


Figure 85. FD-1a - Selecting whether Faculty Received BHW-Funded Financial Award

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 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 INDGEN subform for each faculty who received a BHW-funded financial award during the annual reporting period for participating in a structured faculty development program.

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

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

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

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

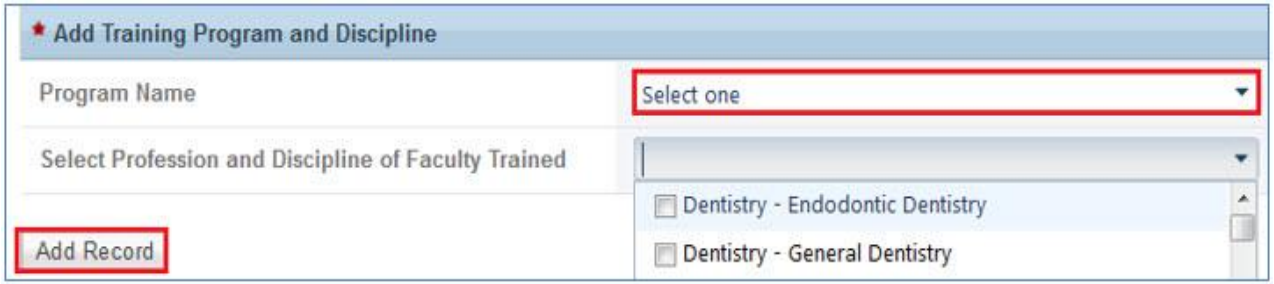


Figure 86. FD-1b - Adding Profession and Discipline for Structured Programs

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

Profession and Discipline of Faculty Trained: Next, select the profession(s) and discipline(s) of all faculty who participated in each faculty development program during the annual reporting period by choosing all that apply from the available options. Select **"Add Record." Repeat this process** to capture the profession/discipline of all faculty members who participated in each structured faculty development program during the annual reporting period.

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

- Medicine - Aerospace Medicine
- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult
- Nursing - NP - Child/Adolescent Psychiatric/Mental Health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse anesthetist
- Nursing - Nurse midwife
- Nursing - Registered Nurse
- Other - Chiropractic
- Medicine - Dermatology
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women’s health
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women’s health
- Nursing - Nurse educator
- Nursing - Other
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Radiologic technology
- Medicine - Geriatrics
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Public health nurse
- Other - Audiology
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Midwife (non - nurse)
- Other - Optometry
- Other - Podiatry
- Other - Registered Dietician
- Other - Speech Therapy
- Physician Assistant
- Public Health - Environmental Health

- Other - Facility Administrator
- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Other - Unknown
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Infectious Disease Control
- Public Health - Other
- Other - Speech Pathology
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Administration
- Public Health - Injury Control & Prevention
- Public Health - Social & Behavioral Sciences
- Public Health - Health Policy & Management
- Public Health - Nutrition

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

No.	Program Name (1)	Profession and Discipline of Faculty Trained (2) Block 4	Enter # Trained in this Profession and Discipline (3) Block 4
1	Structured Program 1	Dentistry - General Dentistry	

Figure 87. FD-1b - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline: ALL Records: Enter the number of faculty members in each profession/discipline who participated in the structured faculty development program during the current annual reporting period in the textbox in Column 3 (Block 4). **Repeat this step** as necessary to capture the total number of faculty members by profession/discipline who participated in each structured program.

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

FD-2a: Faculty Development - Faculty Development Activities

FD-2a - Entering Faculty Development Activities

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

Figure 88. FD-2a - Entering Faculty Development Activities

Activity Name: Add New Records *(Ongoing and Complete):* **Enter the name of each new faculty development activity** coordinated and/or supported through the grant during the annual reporting period in Column 1 (Block 1). Select "Add Record." Repeat this process as necessary to enter each new faculty development activity that was coordinated and/or supported through the grant during the annual reporting period.

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

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

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

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

Figure 89. FD-2a - Selecting Type of Faculty Development Activity Offered

Select Type of Faculty Development Activity Offered: All Records *(Ongoing and Complete)*: Select the type of faculty development activity supported and/or coordinated through the grant during the annual 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: If Academic Courses and Trainings/Workshops for Continuing Education selected in Column 2, Block 8 thenselect whether these activities are accredited for continuing education credit by clicking on the drop-down menu under Column 3 (Block 8a) and choosing one of the available options.
If Clinical Rotations, Grand Rounds, or Professional Conferences are selected in Column 2 (Block 8) then Select N/A for Column 3 (Block 8a).

- Yes
- No
- N/A

For Courses or Workshops: Select Whether Attendance was to Acquire or Maintain Professional Certification: If Academic Courses and Trainings/Workshops for Continuing Education are selected in Column 2 (Block 8), then **s**elect 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 available options.
If Clinical Rotations, Grand Rounds, or Professional Conferences are selected in Column 2 (Block 8) then select N/A for Column 4 (Block 8b).

- Yes
- No
- N/A

FD-2a - Entering Duration of Training Activity

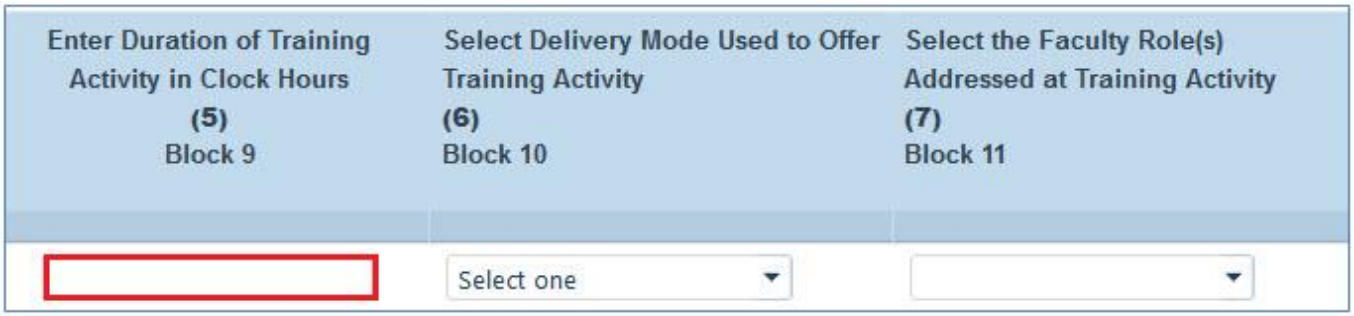


Figure 90. FD-2a - Entering Duration of Training Activity

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

Note: For activities that lasted 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).

FD-2a - Selecting Delivery Mode

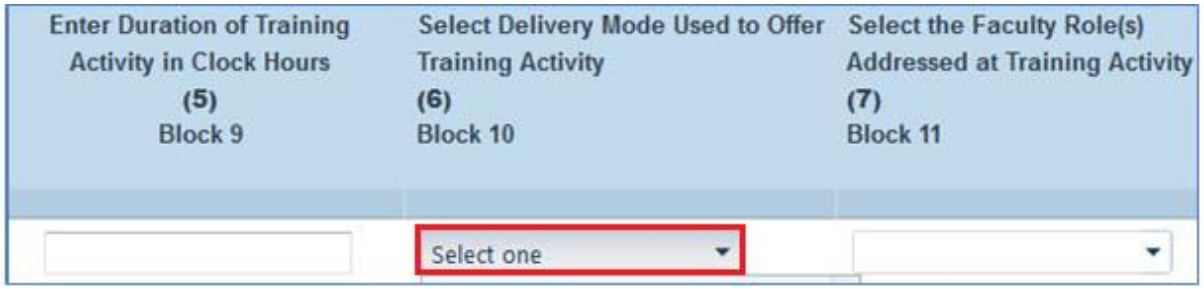


Figure 91. FD-2a - Selecting Delivery Mode

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

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

FD-2a - Selecting Faculty Role(s)

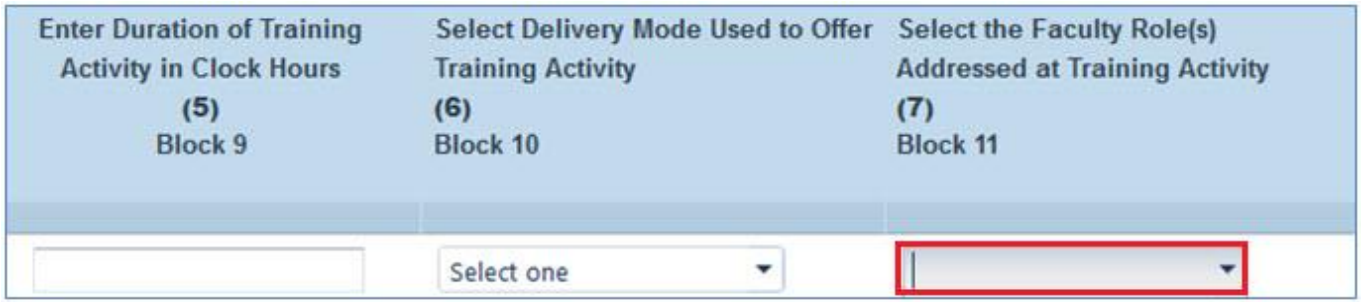


Figure 92. FD-2a - Selecting Faculty Role(s)

Select the Faculty Role(s) Addressed at Training Activity: All Records *(Ongoing and Complete)*: **Select the faculty role(s) addressed** by 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.

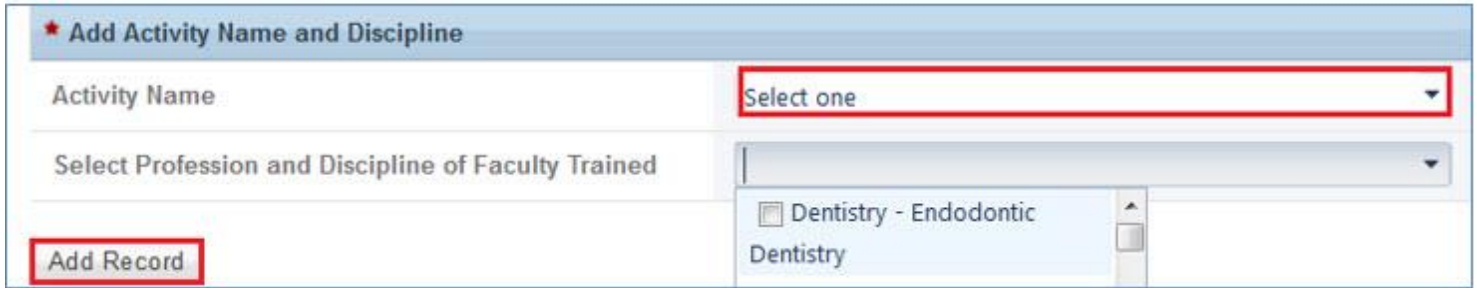


Figure 93. FD-2b - Adding Profession and Discipline for Activities

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

Profession and Discipline of Faculty Trained: Select all of the profession(s) and discipline(s) of faculty members who participated in each faculty development activity during the annual reporting period by choosing **all that apply** from the available options. Next, select **"Add Record". Repeat this process** to capture the profession/discipline of all faculty members who participated in each faculty development activity during the annual reporting period.

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

- Medicine - Colon and Rectal Surgery
- Medicine - Family Medicine
- Medicine - Integrative Medicine
- Medicine - Internal Medicine/Pediatrics
- Medicine - Neurology
- Medicine - Occupational Medicine
- Medicine - Other
- Medicine - Pediatrics
- Medicine - Plastic Surgery - Integrated
- Medicine - Preventive Medicine/Internal Medicine
- Medicine - Radiation Oncology
- Medicine - Thoracic Surgery
- Medicine - Vascular Surgery - Integrated
- Nursing - CNS - Geropsychiatric
- Nursing - CNS - Psychiatric/Mental health
- Nursing - Licensed practical/vocational nurse (LPN/LVN)
- Nursing - NP - Adult
- Nursing - NP - Child/Adolescent Psychiatric/Mental Health
- Nursing - NP - Family Psychiatric/Mental Health
- Nursing - NP - Pediatrics
- Nursing - Nurse anesthetist
- Nursing - Nurse midwife
- Nursing - Registered Nurse
- Other - Chiropractic
- Other - Facility Administrator
- Medicine - Geriatric Psychiatry
- Medicine - Internal Medicine
- Medicine - Medical Genetics
- Medicine - Nuclear Medicine
- Medicine - Ophthalmology
- Medicine - Otolaryngology
- Medicine - Physical Medicine and Rehabilitation
- Medicine - Preventive Medicine
- Medicine - Preventive Medicine/Public Health
- Medicine - Radiology - Diagnostic
- Medicine - Thoracic Surgery - Integrated
- Nursing - CNS - Adult gerontology
- Nursing - CNS - Neonatal
- Nursing - CNS - Women’s health
- Nursing - NP - Acute care adult gerontology
- Nursing - NP - Adult gerontology
- Nursing - NP - Emergency care
- Nursing - NP - Geropsychiatric
- Nursing - NP - Women’s health
- Nursing - Nurse educator
- Nursing - Other
- Nursing - Researcher/Scientist
- Other - Community Health Worker
- Other - First Responder/EMT
- Other - Lay and Family Caregiver
- Other - Midwife
- Other - Office/Support Staff
- Other - Physical Therapy
- Other - Radiologic technology
- Other - Speech Pathology
- Medicine - Internal Medicine/Family Medicine
- Medicine - Neurological Surgery
- Medicine - Obstetrics and Gynecology
- Medicine - Orthopaedic Surgery
- Medicine - Pathology - Anatomical and Clinical
- Medicine - Plastic Surgery
- Medicine - Preventive Medicine/Family Medicine
- Medicine - Psychiatry
- Medicine - Surgery - General
- Medicine - Urology
- Nursing - CNS - Family
- Nursing - CNS - Pediatrics
- Nursing - Home Health Aide
- Nursing - NP - Acute care pediatric
- Nursing - NP - Adult Psychiatric/Mental health
- Nursing - NP - Family
- Nursing - NP - Neonatal
- Nursing - Nurse administrator
- Nursing - Nurse informaticist
- Nursing - Public health nurse
- Other - Audiology
- Other - Direct Service Worker
- Other - Health Education Specialist
- Other - Medical Assistant
- Other - Midwife (non - nurse)
- Other - Optometry
- Other - Podiatry
- Other - Registered Dietician
- Other - Speech Therapy
- Physician Assistant
- Public Health - Environmental Health
- Public Health - Health Policy & Management

- Other - Health Informatics/Health Information Technology
- Other - Medical Laboratory Technology
- Other - Occupational Therapy
- Other - Pharmacy
- Other - Profession Not Listed
- Other - Respiratory Therapy
- Other - Unknown
- Public Health - Biostatistics
- Public Health - Epidemiology
- Public Health - Infectious Disease Control
- Public Health - Other
- Other - Veterinary Medicine
- Public Health - Disease Prevention & Health Promotion
- Public Health - Health Administration
- Public Health - Injury Control & Prevention
- Public Health - Social & Behavioral Sciences
- Public Health - Nutrition

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

No.	Activity Name (1)	Profession and Discipline of Faculty Trained (2) Block 12	Enter # Trained in this Profession and Discipline (3) Block 12
1	Activity 1	Dentistry - General Dentistry	

Figure 94. FD-2b - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline:

For each faculty development activity, **enter the number of faculty members in each profession/discipline** who participated in the program in the textbox in Column 3 (Block 12). **Repeat this step** as necessary to capture the total number of faculty members by profession/discipline who participated in each development activity during the annual 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, click on the "Submit" button in the left hand side of the EHB to begin the submission process of your PRGCA. Please follow the instructions carefully on the following pages. You have not submitted your report to HRSA until you have received a confirmation page with a tracking number.

Printing Your Performance Report

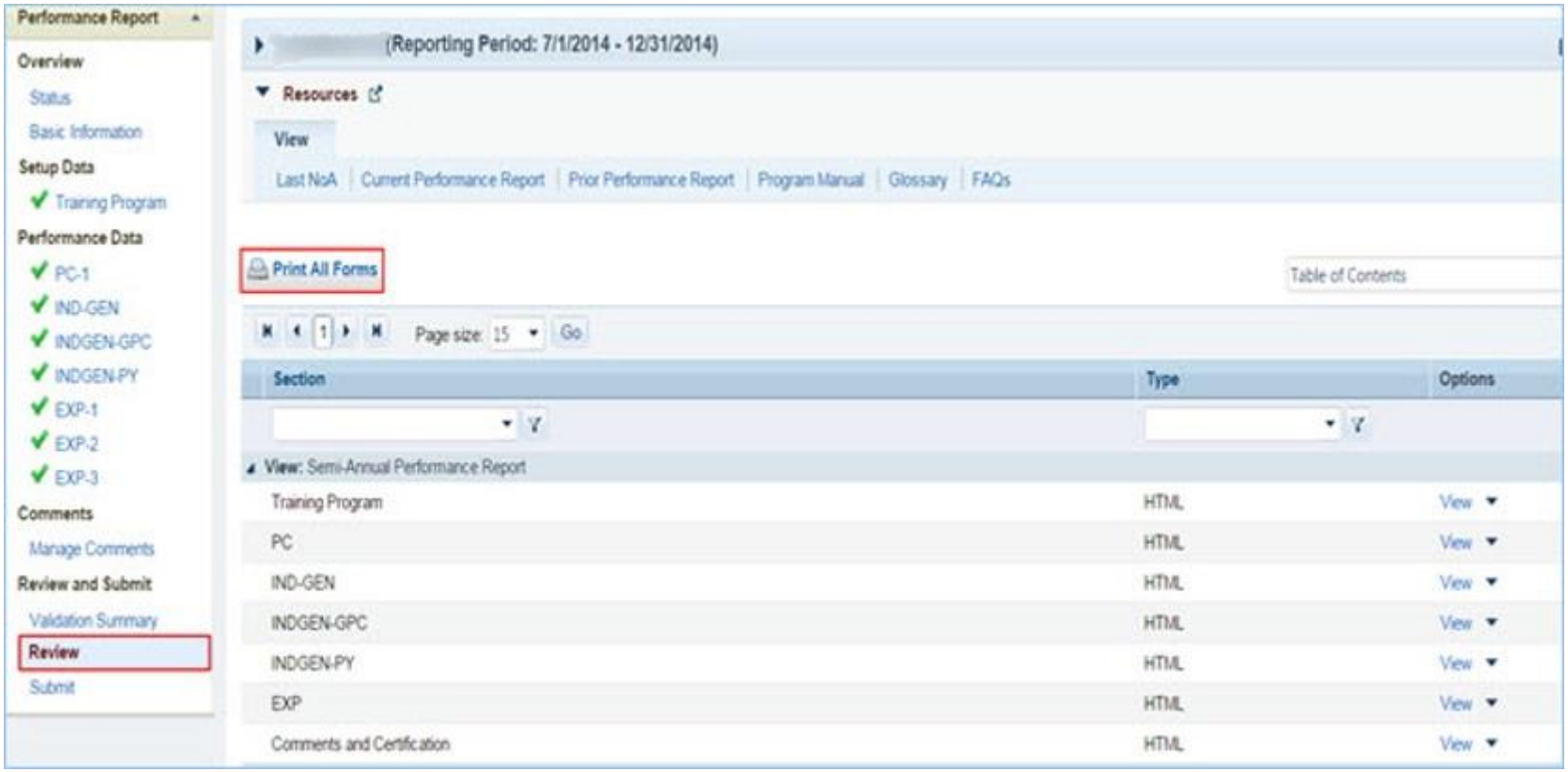


Figure 95. Screenshot of Printing Your Performance Report

1. To print the entire performance report, expand the left side menu of your report and click the 'Review' link under the 'Review and submit' section. You will be directed to the Review page.

2. Next, click the 'Print All Forms' button below the Resources section of the Review Page.

Submitting Your Performance Report

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

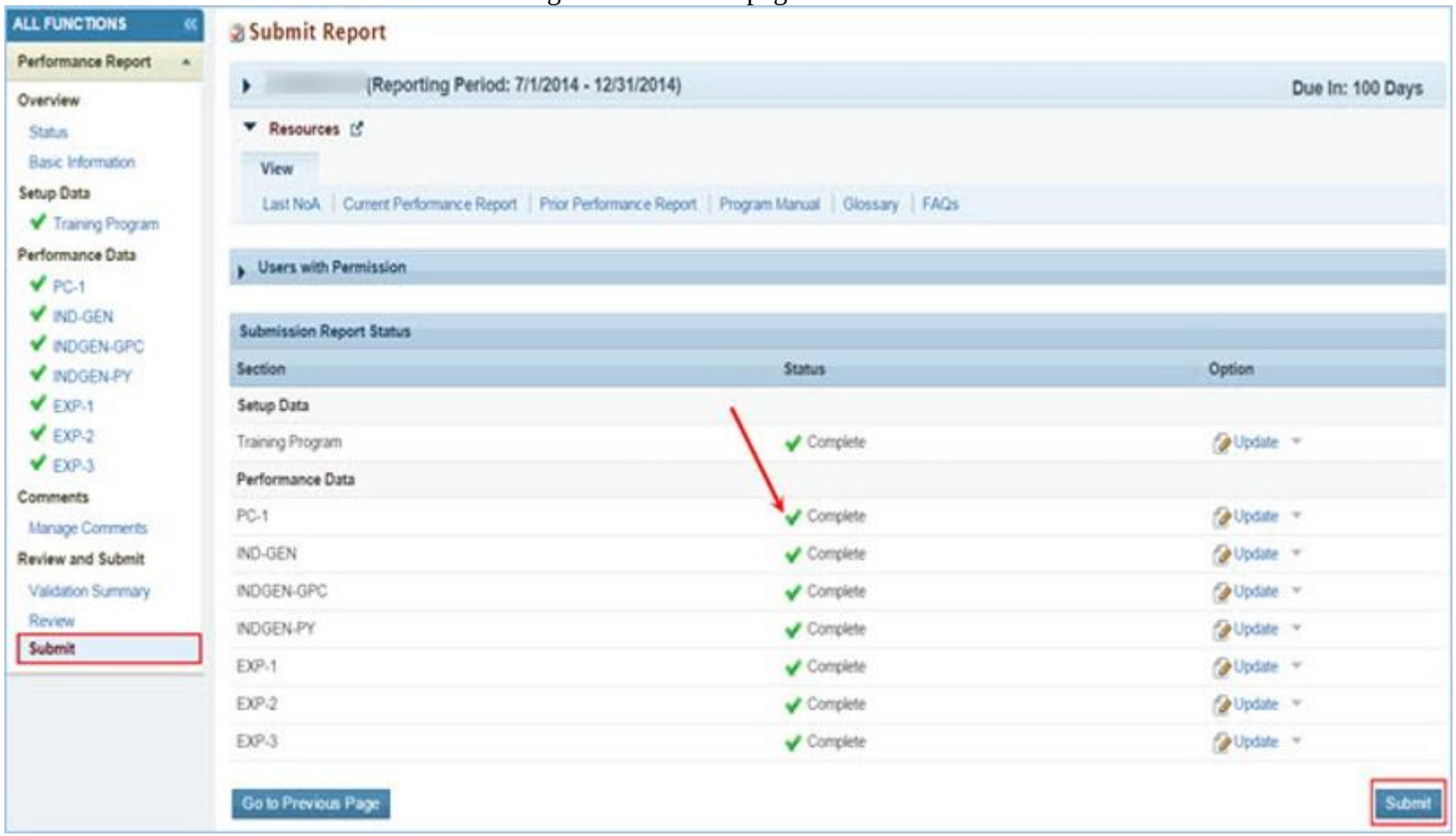


Figure 96. Screenshot of the Submit Report Page

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.

Figure 97. Screenshot of the Submit Report - Confirm Page

Figure 98. Screenshot of the Submit Report - Confirm Page

Appendix A: Glossary

This glossary contains general definitions for terms that are used throughout the BPMH system. Some terms may be defined in multiple ways by different programs due to their authorizing statutes and/or the nature of training activities offered. If you are unsure about how to define a term that is central to your program, please refer to the authorizing statute, the Funding Opportunity Announcement and/or your Government Project Officer for clarification.

Attrition is the act of permanently leaving a training program or training activity before completion. An individual is counted as having attrited if s/he leaves a training program or training activity for any reason before completing all training requirements.

BHW-funded financial awards are monies from a grant funded by BHW that are provided to an individual by a grantee institution or organization for the purposes of defraying costs associated with participation in a training program or training activity. The types and definitions of BHW-funded financial awards are listed below:

1. **Career Award**: A financial award provided to current faculty for the purposes of facilitating professional growth and advancement in the academic setting.
2. **Fellowship**: A financial award provided to a Fellow for the purposes of defraying costs associated with advanced training in a specific content area.
3. **Scholarship**: A financial award provided to a student enrolled in a degree program at an educational institution for the sole purpose of covering expenses associated with tuition.
4. **Stipend**: A financial award provided to an individual for the purposes of defraying costs associated with a training program or training activity.
5. **Traineeship**: A financial award provided to a student enrolled in an advanced training program at an educational institution for the purposes of defraying costs associated with advanced training in a specific content area.
6. **Loan**: A financial award provided to a student enrolled in a degree program at an educational institution for the purposes of defraying costs associated with that degree program. Loans must be repaid in accordance with terms specified in a promissory note.
7. **Loan Repayment**: A financial award provided to an individual that is conditional on their agreement to provide specific types of services for a specified amount of time. Under this agreement, an individual may have part or all of their student loans paid off so long as they meet all specified requirements.

Campus-based degree program is a degree program that requires students to complete all academic coursework at the college or university campus.

Contact hours are the number of hours that an individual receives training in a specific setting.

Continuing education is a training activity or series of training activities offered to members of the **current** workforce who have already completed a training program in their profession. Generally, continuing education sessions are offered to existing professionals and do not include or target students as primary participants.

Curriculum is the aggregate content of multiple learning activities offered by an organization a specific topic area. Commonly, the term curriculum is used to describe the number and type of academic courses within a degree program. The term can also be used to describe the number and type of learning activities for faculty and other non-degree related training programs.

Didactic training is the process of instruction between a designated faculty and an individual or group of individuals.

Direct financial support program is a type of grant that provides individuals, via grantee organizations, with a BHW-funded financial award to help defray costs associated with participation in a training program or training activity.

Disadvantaged background is a citizen, national, or a lawful permanent resident of the United States or the District of Columbia, the Commonwealths of Puerto Rico or the Marianas Islands, the Virgin Islands, Guam, the American Samoa, the Trust Territory of the Pacific Islands, the Republic of Palau, the Republic of the Marshall Islands and the Federated State of Micronesia who either:

- Comes from an environment that has inhibited the individual from obtaining the knowledge, skill, and abilities required to enroll in and graduate from a health professions school, or from a program providing education or training in an allied health profession; OR
- Comes from a family with an annual income below a level based on low income thresholds according to family size published by the U.S. Bureau of Census, adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary, HHS, for use in health professions and nursing programs.

Enhanced course or other training activity is a specific type of training activity that was in existence at the grantee institution or organization and has been modified or restructured as part of the grant project.

Enrollee is an individual who is actively matriculated or registered in a training program or training activity. For the purposes of performance reporting, the training category of "enrollees" does not include graduates, program completers, fellows or residents.

Ethnicity is the ethnic ancestry or origin of an individual or group of individuals. For the purposes of performance reporting, the Office of Management and Budget requires that ethnicity be classified as "Hispanic or Latino Origin" and "Non-Hispanic or Latino Origin". Individuals identifying as "Hispanic or Latino" are of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

Experiential training is the process of instruction between a designated faculty and an individual or group of individuals that includes a component of direct work experience.

Faculty is an individual or group of individuals who have been deemed qualified by an organization to provide instruction to others on a specific topic area.

Faculty development program is a series of curriculum-based training activities that are provided to faculty over a specific amount of time for the purposes of additional training and/or faculty development. Structured faculty development programs can be degree-bearing, certificate-bearing and do not necessarily have to be offered at or by the grantee institution or organization.

Faculty development activity is generally a stand-alone single training activity provided to faculty for the purposes of additional training and/or faculty development. Faculty development activities can include conferences, workshops or grand rounds and do not necessarily have to be offered at or by the grantee institution or organization. It is the same as an "Unstructured faculty development activity".

Faculty instruction are those courses, workshops, seminars, grand rounds or other training activities that are led by faculty for the purposes of providing training to other individuals (e.g., students, fellows, residents). Faculty instruction does not refer to training activities undertaken by faculty for the purposes of additional training or faculty development (see Structured Faculty Development Program and/or Unstructured Faculty Development Activity).

Federally Qualified Health Centers (FQHC) are public and private non-profit health care organizations that meet certain criteria under the Medicare and Medicaid Programs (respectively, Sections 1861(aa)(4) and 1905(l)(2)(B) of the Social Security Act and receive funds under the Health Center Program (Section 330 of the Public Health Service Act).

Fellowship is a training program that provides an individual or group of individuals (known as "fellows") with advanced training in a general content area. Fellows generally receive a financial award to help defray costs associated with advanced training (also referred to as a "fellowship").

Full-time refers to the number of days per week and/or months per year representing full-time effort at the applicant/recipient organization, as specified in organizational policy. For a student, it means a student who is enrolled full-time as defined by the organization. The organization's policy must be applied consistently, regardless of the source of support.

Graduate is an individual who has completed all requirements for a degree-bearing training program at an educational institution.

Hybrid degree program is a degree program that requires students to complete academic coursework at the campus, as well as through distance learning.

Instructional hours are the duration of a training activity or training program in clock hours.

Infrastructure program is a type of grant designed to enhance the scope, quality, and opportunities for health professions training programs or training activities. Infrastructure programs do not provide individuals with any type of BHW-funded financial awards.

Internship is a type of training activity that can either be a(n): a) component of a degree-bearing program or b) entry-level employment that provides an individual with relevant workforce experience.

Interprofessional education is the process of learning among a group of individuals from two (2) or more professions.

Interprofessional practice is the provision of care or services to an individual or group of individuals by workers from two (2) or more professions.

Medically Underserved Community (MUC) is a geographic location or population of individuals that is eligible for designation by a state and/or the federal government as a health professions shortage area (HPSA); medically underserved area (MUA) and/or medically underserved population (MUP). These communities have limited access to primary health care services. The term MUC is an umbrella term that can be used to describe any location that meets one or more of the previously identified designations.

Multipurpose/Hybrid program is a type of grant that is designed to: a) provide individuals, via grantee organizations, with a BHW-funded financial award to help defray costs associated with health professions training; **and b)** enhance the scope, quality, and opportunities for health professions training programs or training activities.

Newly developed course or other training activity is a specific type of training activity that was not in existence at the grantee institution or organization and was developed in its entirety as part of the grant project.

Online degree program is a degree program that requires students to complete all academic coursework through distance learning.

Partner/consortium is an organization or group of organizations that provide(s) resources and/or support to grantees for the implementation of training programs and/or training activities.

Patient encounter is a direct interaction between a designated caregiver and a patient for the purposes of health care.

Practicum is a type of experiential training activity. (See "Experiential training").

Primary care is the provision of integrated, accessible health services by clinicians who are accountable for addressing a large majority of personal health care needs, developing a sustained partnership with patients, and practicing in the context of family and community.

Primary care setting is a facility that is staffed with professionals who provide primary care. (See "Primary Care")

Profession & discipline is a phrase that identifies a general occupation (profession) and, where applicable, a type of specialty within that occupation (discipline).

Program completer is an individual who has completed all requirements for a non-degree bearing training program or training activity. (See "Graduate" for individuals who complete all requirements of a degree-bearing training program)

Publication is a written material that has been submitted to and accepted by a publishing authority as part of a collection of related work.

Race is an individual's self-identified affiliation with one (1) or more of the following origins:

- **White** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- **Black or African American** – A person having origins in any of the Black racial groups of Africa.
- **American Indian or Alaska Native** – A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
- **Asian** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- **Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Residency is a training program that provides an individual or group of individuals (known as "residents") with advanced clinical training in a specialty area.

Residential background is/are the type/s of location/s an individual has established residence in.

Rural is a geographical area that is not part of a Metropolitan Statistical Area (MSA). *Note: To determine if a specific geographical area is considered rural, go to HRSA's Office of Rural Health Policy.*

Structured training program is a series of curriculum-based training activities that are provided to an individual or groups of individuals over a specific amount of time.

Trainee is an individual who participates in a training program or training activity.

Underrepresented Minority (URM) is an individual from a racial and/or ethnic group that is considered inadequately represented in a specific profession relative to the numbers of that racial and/or ethnic group in the general population. **Note: For the purposes of the health professions, BHW considers individuals who are from the following racial and ethnic backgrounds to be underrepresented:**

- Black or African American
- Hispanic (all races)
- Native Hawaiian or Other Pacific Islander

- American Indian or Alaska Native

Unstructured faculty development activity is generally a stand-alone single training activity provided to faculty for the purposes of additional training and/or faculty development. Unstructured faculty development activities can include conferences, workshops, or grand rounds and do not necessarily have to be offered at or by the grantee institution or organization.

Unstructured training activity is generally a stand-alone single training activity that is not part of a curriculum.

Veteran is any person who served in one (1) of the seven (7) uniformed services of the United States. The seven uniform services include: the United States Army, Navy, Air Force, Marines, Coast Guard, Public Health Service, and National Oceanic & Atmospheric Administration Commissioned Officers Corps.

Vulnerable populations are groups of individuals at higher risk for health disparities by virtue of their race or ethnicity, socio-economic status, geography, gender, age, disability status, and other risk factors associated with sex and gender.

Appendix B: FAQs

General FAQs:

Q1: When is the due date for the performance report?

A1: Performance reports are due by **August 01, 2016** for all programs. No extensions will be granted beyond this date. Failure to submit a performance report by your due date may place your grant in a non-compliant status.

Q2: What dates does the performance report cover?

A2: The performance report submitted by grantees should cover all activities conducted through the grant for the period **July 01, 2015 - June 30, 2016**.

Q3: Is it possible to change data entered incorrectly in a prior reporting period?

A3: No. Data entered in a previous reporting period cannot be edited. It is important that grantees endeavor to provide the most accurate data during each reporting period.

FAQs about the Program Characteristics (PC) forms:

Q4: Do I need to set up my training program again if it is being reused in the current reporting period?

A4: No. If you previously reported on a training program, you do not need to set up the program again. All of your previously used training programs will be displayed in your training program setup menu with a record status of 'Prior Record' displayed.

Q5: What are the status options for the different types of programs?

A5: Structured and Unstructured Training programs use program status options of "Ongoing" or "Complete." All other types of training programs (degree/certificate, internships, fellowships, 1-year retraining, practica/field placements, and residencies) use the status options of "Active" and "Inactive."

Q6: In the PC forms, do we count all trainees in our program regardless of the year of study; include full-time/part-time trainees, etc.?

A6: Yes, as long as trainees are enrolled or participating in the training program identified under Block 1.

Q7: Are we required to provide this information only on the trainees in the programs we received funding for?

A7: The PC tables capture information about the universe of trainees regardless of funding status at your school. This is the only form that collects this type of information in aggregate.

FAQs about the LR-1 through DV-3 forms:

Q8: In prior reports, the LR-1, LR-2 and DV tables reported unduplicated counts. In this current reporting format, will we be reporting duplicated counts for those tables?

A8: The new format requires grantees to provide counts by training program. While we understand that an individual may participate in multiple programs offered by grantees, this new approach will allow us to better understand each program separately.

Q9: In the LR- and DV- tables, are the counts for graduates and/or program completers a subset of the total trainee number or are they to be reported separately?

A9: On the LR- and DV- forms, graduates and program completers are not reported as a subset of the current trainee total. Please report aggregate counts of trainees (e.g., enrollees, residents, and fellows) SEPARATELY from the aggregate counts of graduates or program completers.

Q10: What address should we use to determine if an individual is considered to come from a rural residential background? Do we consider a student's high school address, medical school address or childhood home address?

A10: It depends on the information available. The definition of rural residential background is based on whether an individual has ever lived in a rural area. Grantees may choose to use the address prior to matriculation or the institution's address.

FAQs about the INDGEN form:

Q11: Where do we get the Trainee Unique ID?

A11: Grantees are responsible for developing a unique ID for each individual for which an INDGEN entry is required. Grantees must keep a log of these unique IDs in order to provide 1-year follow-up updates through the BPMH system.

Q12: What are the characters of the 7 digit unique ID?

A12: Each unique ID must be made up of 7 alphanumeric characters (meaning that, you may use a combination of both letters and numbers).

Q13: Are INDGEN records from the last reporting period stored in the EHB?

A13: It depends. All INDGEN records that were reported during prior reporting periods will be shown in your INDGEN table as 'Prior Records' until (a) the record is marked as a graduate/ program completer, or (b) the individual permanently discontinues participation in the training program (i.e., attrition). Any INDGEN record that was marked as having graduated or completed will be transferred into INDGEN-PY for the next reporting period. INDGEN records for individuals who permanently discontinued training will not re-populate in EHB in the next reporting period.

Q14: Last year we created individual participant codes (Unique IDs) to be included in the INDGEN table. If any of those participants attend a new training cycle this year, should we use the same code for that participant, or create a new code for that participant? Are those codes needed this year?

A14: The purpose of the Unique ID is to track an individual's training participation over time. If the same individual is simultaneously participating in multiple training programs, you should use the same unique ID. Note that each training program must also have a unique name. The same unique ID-training program combination cannot be present in more than one location (INDGEN/INDGEN-PY).

Q15: What if an individual already listed on INDGEN did not receive a financial award during the six month reporting period?

A15: If an individual from a prior record did not receive a financial award during the current reporting period, please indicate this under Block 11. The record will remain on INDGEN until this individual is marked as a graduate/program completer or a drop-out of the training program.

Q16: Is there an option to report Ethnicity as unknown?

A16: No. While there is an option for "Not Reported" on the INDGEN form, grantees are expected to collect race and ethnicity data on each individual for whom an INDGEN entry is required. If the option of "Not Reported" is selected for an individual's race, ethnicity or any other of the core demographic variables, it is expected that the grantee will collect this information and provide an update by the next reporting period.

Q17: Is reporting the underrepresented Asian distinction no longer included? The loss of the Asian Underrepresented category is a real loss to describing the diversity of our enrollees and their under-representation in medicine – any suggestions on how we can still express this diversity within our report?

A17: The definition of an underrepresented minority (URM) included in the instruction manuals specifically states that a URM is "is an individual from a racial and/or ethnic group that is considered inadequately represented in a specific profession relative to the numbers of that racial and/or ethnic group in the general population". While some professional or accrediting organizations collect detailed information on Asian subpopulations, data sources for the general population (i.e., the Census) do not. Therefore, it is not possible to determine that specific Asian subpopulations are underrepresented relative to the general population. Furthermore, federal agencies have been directed by the Office of Management and Budget to

collect race/ethnicity data in a manner consistent with that used for the Census. As a result, all race and ethnicity categories displayed in the INDGEN sub-form are identical to those used in the Census.

Q18: Can we use our institutions definitions/standards for disadvantaged background?

A18: The BHW definition of disadvantaged background is included in the glossary of each instruction manual. As long as an institution's definition or standard does not contradict the federal definition of disadvantaged, then grantees may choose to count individuals who have been deemed disadvantaged by the institution. Otherwise, you must use the definition for disadvantaged background located in your program manual glossary.

Q19: Do we report full time faculty who receive salary support for teaching or administrative responsibilities?

A19: It depends on whether a specific faculty member is part of the project. For project staff (including faculty), this information is not required as it is captured in your grant's budget documents.

Q20: Do conference registration fees count as financial support?

A20: Yes, but only for non-project staff.

Q21: How do we find out an individual's family income?

A21: The institution's financial aid office should have that information, as part of the required application for financial aid.

Q22: For veteran status, are we asking only for the student or trainee's status, or the trainee's family status (e.g. dependent of veteran, spouse of veteran, etc.)?

A22: Only the trainee's status should be reported.

Q23: How is the academic year funding total calculated?

A23: The academic year total is automatically calculated in EHB as the sum of funding during the academic year. When you enter, save, and validate the funding amount for the current reporting period, the academic year total will automatically populate.

Q24: How is the cumulative funding total calculated?

A24: The cumulative funding total is automatically re-calculated each annual reporting period in EHB. This is the total of each annual amount that has been entered for the individual record either (a) across the life of the grant or (b) since the BPMH system has been in use starting with Academic Year 2012-2013.

FAQs about the INDGEN-PY form:

Q25: How do I use the INDGEN-PY form?

A25: One year after an INDGEN record is marked as a graduate/program completer, you will be asked to provide an update on the individual's employment/enrollment status.

FAQs about the Experiential Training (EXP) forms:

Q26: What training sites do I need to report on this form? Is it all of the sites our program uses?

A26: Grantees should report only on sites used to provide training to students, trainees, or faculty supported by the grant during the current reporting period.

Q27: Our hospital provides multiple training sites for our trainees. Do I list the hospital or the specific clinics and offices within the hospital?

A27: You should list the specific clinics and offices within the hospital that provide training to supported trainees for the EXP forms.

Q28: Do I need to list a site more than once on EXP-2?

A28: You may need to list a site multiple times on the EXP-2 form. For sites that provide training to students, trainees and faculty from different training programs, it should be listed on the form for each training program the grant sponsors.

Q29: How can I report Interprofessional team-based care at the training sites?

A29: Interprofessional team-based care reporting is a three-step process on the EXP-3 form. After identifying the training program and site, the first step is to select ALL of the professions and disciplines represented on the interprofessional team (including the profession of the principal-HRSA sponsored trainees). The second step is to provide the number of trainees (by discipline) who were trained by the HRSA-sponsored program (principal trainees). The final step is to provide the number of other trainees (by discipline) who were trained at the site, alongside the principal trainees, but were not enrolled in the HRSA-sponsored program.

FAQs about the Curriculum Development and Enhancement (CDE) forms:

Q30: What if courses are created with a variety of funding sources?

A30: Grantees should complete a CDE-1 entry for each course or training activity that was developed or enhanced using any amount of HRSA grant funds.

Q31: Why do only some of the courses I entered last time appear in the CDE-1 form this time?

A:31 Only courses that were marked as 'Under Development' or 'Developed but Not Yet Implemented' will pre-populate the CDE-1 table. Courses marked as 'Implemented' will pre-populate the new CDE-1a table.

Q32: For CDE-2, do we report on all attendees or only those directly funded by a BHW-funded program for this reporting period?

A32: For the purposes of the CDE-2 form, count all individuals trained (whether or not the individuals received direct financial support) through courses or training activities developed or enhanced using any BHW funds during the current reporting period.

FAQs about the Faculty Development (FD) forms:

Q33: What is the difference between a structured faculty development program and an unstructured faculty development activity?

A33: Structured and unstructured faculty development programs differ in a few ways. Generally, structured faculty development programs are administered over a longer period of time and involve multiple meetings/sessions. Additionally, structured programs tend to be curriculum-driven, and may lead to the conferral of a degree or certificate. In contrast, unstructured faculty development activities are shorter in duration, and are single, stand-alone trainings. Faculty development activities include conferences, workshops, and grand rounds.

FAQs about the Continuing Education (CE) forms:

Q34: For CE-2, do we report on all attendees or only those directly funded by a BHW-funded program for this reporting period?

A34: For the purposes of the CE-2 form, count all individuals trained (whether or not the individuals received direct financial support) through courses or training activities developed or enhanced using any BHW funds during the current reporting period. Individuals attending CE trainings should be current providers, rather than students.

FAQs about Technical Support & Assistance:

Q35: Who do we contact if we need technical assistance entering data in EHB?

A35: Grantees should contact HRSA's Call Center for any type of questions related to the performance report. The Call Center can be reached via phone at 1-877-464-4772.

Q36: Where will grantees be able to locate the instruction manuals for the performance reports?

A36: Grantees will be able to access their program-specific instruction manual through the EHB. In addition, the manuals will be posted on the BHW grants website at http://bhw.hrsa.gov/grants/reporting/index.html.

Q37: Is there a way to look at the data forms required for my program without logging into EHB?

A37: Yes. Grantees will be able to view a program-specific overview of the required performance measure forms on the BHW grants website at http://bhw.hrsa.gov/grants/reporting/index.html.

Q38: Are reports from prior years stored in the EHBs?

A38: Yes. Grantees can locate reports from prior reporting periods in EHB by using any of the following methods:

a) Clicking the 'view prior period data' link within a form or under your Resources tab;

b) Going into your grant folder and searching for previously completed reports; or

c) Clicking on the "submissions" link in the left side navigation menu.

Q39: Will the information we are submitting in this reporting period be automatically used to populate the forms in the future?

A39: Yes. Depending on the form, certain data fields will prepopulate for future reporting periods based on the data you enter when the record is initially created. For example, information reported on the EXP-1 and EXP-2 forms for training sites used will carry over each reporting period. Similarly, much of the information reported on the INDGEN form will also carry over each reporting period until the individual completes their specific training program or permanently leaves before completion.