

Payment Program

HRSA 100-3-A: Training in the Health Care Needs of Different Populations

Program Name:	
Medicare Provider Number:	
Date of Report:	(mm/dd/yy)

Types of Training

For each of the following types of training, please indicate which types of training approaches/methods are used in training residents about the unique needs of children who are underserved due to financial, sociocultural, geographic or medical circumstances. Please use the drop down boxes to indicate whether this training is required, elective, or not currently used in your program **and, if currently used**, whether the training applies to those who are underserved due to financial, sociocultural, geographic or medical reasons or combinations of these reasons. **See detailed guidance for complete instructions.**

Type of Training	Required/Elective/ Not Currently Used	Underserved Population
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Didactic Approaches

Formal courses	<input type="text"/>	<input type="text"/>
Lectures	<input type="text"/>	<input type="text"/>
Workshops	<input type="text"/>	<input type="text"/>
Standardized patients	<input type="text"/>	<input type="text"/>
Case-based experiential learning (e.g., morning report, noon case presentation, morbidity & mortality)	<input type="text"/>	<input type="text"/>
Grand Rounds	<input type="text"/>	<input type="text"/>
Medical simulations	<input type="text"/>	<input type="text"/>

Clinical Experiences

Bedside Training	<input type="text"/>	<input type="text"/>
Patient Rounds	<input type="text"/>	<input type="text"/>
Identify/mobilize medical home	<input type="text"/>	<input type="text"/>
Coordination of health care and community resources	<input type="text"/>	<input type="text"/>
Coordination of mental health care services	<input type="text"/>	<input type="text"/>
Interdisciplinary patient care conferences	<input type="text"/>	<input type="text"/>

Type of Training	Required/Elective/ Not Currently Used	Underserved Population
Assist families with transition of children into child care and educational settings	<input type="text"/>	<input type="text"/>

Type of Training	Required/Elective/ Not Currently Used	Underserved Population
Pediatric Palliative Care/ Pediatric Hospice		
Transition to adult care		
Community-based Experiences		
Community health center		
Public health department		
Drug rehabilitation program		
Homeless shelter		
Day care settings, including Head Start		
Home visits to patients		
Mobile health van		
School health		
Juvenile detention facilities		
Migrant Health Center		
Indian Health Center Sites		
National Health Service Corps sites		
Area Health Education Center (AHEC) sites		
Rural health centers		
Cultural immersion experiences		
Other, specify		
Research		
Other		
Advocacy Training		
Language Training		
Cultural Efficacy Training		

Children's Hospital Graduate Medical Education Payment Prog HRSA 100-3-B: Underserved Populations

Program Name:	0
Medicare Provider Number:	0
Date of Report:	(mm/dd/yy)

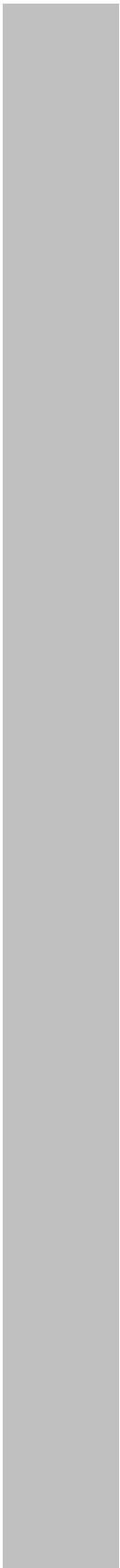
Training Content

For each of the following topic areas, please use the check boxes to indicate the types of training used to address the topic in the training program. Check all that apply. For example, if your program offers a lecture on homelessness as well as a community rotation in a homeless shelter, check both didactic and clinical experiences. **See detailed guidance for complete instructions.**

	Didactic	Clinical Experiences/ Patient Care	Research	Not Currently in the Curriculum
Underserved for Financial Reasons				
Poverty, including causes, consequences, & implications for child health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uninsured and Underinsured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicaid and SCHIP and related programs such as EPSDT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public sources of care (e.g., community health centers, public health departments)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other social services, such as WIC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homelessness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Migrant worker families and children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community-based medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advocacy Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Didactic	Clinical Experiences/ Patient Care	Research	Not Currently in the Curriculum
Domestic violence/child abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Underserved for Socio-cultural Reasons				
Foreign language instruction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Issues related to use of interpreter services (both professional and ad hoc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cultural beliefs and attitudes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of community based programs such as cultural centers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Immigration/Deportation issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Underserved for Geographic Reasons				
Telemedicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation and travel barriers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of allied health providers (PT/OT/Speech Pathology, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public sources of care in rural areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Underserved for Medical Reasons				
Medical Home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care coordination with other health care providers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interfacing with community organizations such as schools and day cares)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Palliative care for terminally ill children / Pediatric hospice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individualized education plans (IEPs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Didactic	Clinical Experiences/ Patient Care	Research	Not Currently in the Curriculum
Americans with Disabilities Act	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dental Care				
Oral health screening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Counseling for oral hygiene, diet (e.g., baby bottle use), and fluoride use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fluoride guidelines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Referral for dental care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access to dental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of public sources of dental services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Children's Hospital Graduate Medical Education Payment Program

HRSA 100-3-C: Changes in Residency Training, A25 Changes in Curricula Training Experiences and Resulting Benefits

Program Name:	0
Medicare provider number:	0
Date of Report:	(mm/dd/yy)

Please indicate the changes in your curriculum that have occurred since you began receiving CH GME payments. For each of the topics listed below, please use the check boxes to indicate whether any of the changes apply. Check all that apply for each item. Also, briefly provide the reasons for any change(s) briefly describe resulting benefits from change(s) in the space provided following each broad subheading. **If you wish to provide greater detail about the benefits resulting from changes in the curricula, you may do so by adding a sheet to the Excel workbook or attaching a separate document.**

[Benefits may include, for example, increases in medical knowledge; improvements in clinical competence; increased awareness of psychosocial and behavioral aspects of health and illness; increased awareness of the availability of community resources; increased ability to function as a medical home provider; improvements in patient care and outcomes and promotion of leadership skills.]

If no changes have occurred, you need not complete the rationale and "benefits" sections. See detailed guidance for complete instructions.

	Area addressed in most recent academic year	Newly offered since 1999-2000 academic year	Training Expanded or Improved	No change in curricular area
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Didactic Training

<i>Basic Science</i>				
Genomics/Proteomics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neuroscience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developmental biology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Translational Research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effects of physical environment (toxins, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effects of social environment (crime, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tailoring therapy to the individual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are the reasons for the change(s), if any, made and the benefits resulting from the changes noted above in the didactic training in basic science? Please respond in the space below.

	Area addressed in most recent academic year	Newly offered since 1999-2000 academic year	Training Expanded or Improved	No change in curricular area
Health Promotion				
Promoting positive health behaviors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health promotion/ Illness Prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screening/referral for maternal depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screening/referral for parental substance abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screening/referral for domestic violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tobacco prevention and control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obesity-directed care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anticipatory guidance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What are the reasons for the changes, if any, made and the benefits resulting from the changes noted above in the didactic training in health promotion? Please respond in the space below.				
Other Topics in Didactic Training				
Family-centered pediatrics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interdisciplinary care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Home model	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cultural competency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Competency-based training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physician-patient communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Area addressed in most recent academic year	Newly offered since 1999-2000 academic year	Training Expanded or Improved	No change in curricular area
Patient advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership training (conflict resolution, self-awareness, vision-entrepreneurship, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpretation of research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care of domestically adopted children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care of internationally adopted children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are the reasons for the changes, if any, made and the benefits resulting from the changes noted above in the other didactic training topics? Please respond in the space below.

Dental Care

Oral health screening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Counseling for oral hygiene, diet (e.g., baby bottle use), and fluoride use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fluoride guidelines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Referral for dental care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access to dental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of public sources of dental services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are the reasons for the changes, if any, made and the benefits resulting from the changes noted above in the didactic training of dental care? Please respond in the space below.

Community health system topics

Substance abuse treatment system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic violence resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental/behavioral health care system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Area addressed in most recent academic year	Newly offered since 1999-2000 academic year	Training Expanded or Improved	No change in curricular area
Social service system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Welfare system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foster care system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Migrant health system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Indian health service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community-level advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legislative/ policy advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are the reasons for the changes, if any, made and the benefits resulting from the changes noted above in the training of community health system topics? Please respond in the space below.

Clinical Training

Community based pediatric rotations/clinical experiences

Local and state health departments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community health centers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Day care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Juvenile detention facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advocacy (communicating with elected officials, providing legislative testimony, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Private practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child protective teams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Area addressed in most recent academic year	Newly offered since 1999-2000 academic year	Training Expanded or Improved	No change in curricular area
Head Start	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homeless Shelters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobile health van	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What are the reasons for the changes, if any, made and the benefits resulting from the changes noted above in the training of community based rotations/experiences? Please respond in the space below.				
Other clinical experiences/rotations				
Scholarly activities (performing basic, clinical, translational, or health services research)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use of transformative learning techniques, e.g., role plays, reflective exercises	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resident project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What are the reasons for the changes, if any, made and the benefits resulting from the changes noted above in the training of other clinical rotations/experiences? Please respond in the space below.				
Changes in Training Evaluation				
Observed structured clinical examination (OSCE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
360 evaluations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standardized patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Record reviews	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chart-stimulated recall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Checklists of observed behaviors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Global ratings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Procedure logs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Area addressed in most recent academic year	Newly offered since 1999-2000 academic year	Training Expanded or Improved	No change in curricular area
Case logs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient surveys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reflective exercises	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What are the reasons for the changes, if any, made and the benefits resulting from the changes noted above in the training evaluation? Please respond in the space below.				

Children's Hospital Medical Education Payment Program

HRSA 100-3-D: Changes in Training Related to Measurement and Improvement in Quality

Program Name:	0
Medicare Provider Number:	0
Date of Report:	(mm/dd/yy)

For each of the following topics related to training in the quality of care, please use the check boxes to indicate the changes in your curriculum or training program that have occurred since you began receiving CH GME payments. Check all that apply for each item and provide reasons for any change(s) and describe resulting benefits from change(s) in the space provided below each list. If you wish to provide greater detail about the benefits resulting from changes in the curricula, you may do so by adding a sheet to the Excel workbook or attaching a separate document.

[Benefits may include, for example, increases in medical knowledge; improvements in clinical competence; increased awareness of psychosocial and behavioral aspects of health and illness; increased awareness of the availability of community resources; increased ability to function as a medical home provider; improvements in patient care and outcomes and promotion of leadership skills.]

If no changes have occurred, you need not complete the rationale and "benefits" section. See detailed guidance for complete instructions.

	Area Addressed in Most Recent Academic Year	Newly Offered Since 1999-2000 Academic Year	Training Expanded or Improved	No Change in Curricular Area
Health Care Quality				
Quality characteristics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence-based medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ambulatory care sensitive conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Volume-outcomes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Small area variation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care disparities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Systematic literature reviews/meta-analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practice guidelines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Area Addressed in Most Recent Academic Year	Newly Offered Since 1999-2000 Academic Year	Training Expanded or Improved	No Change in Curricular Area
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What are the reasons for the changes, if any, made and the benefits resulting from the changes noted above in training on health care quality? Please respond in the space below.

Quality Measurement

Benchmarking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Assessments of Health Plans (CAHPS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health Plan Employer Data and Information Set (HEDIS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agency for Health Care Research and Quality (AHRQ) Pediatric Quality Indicators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AHRQ Clinical Performance Measures for Ambulatory Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Structure/Process/Outcomes Measures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance measurement and indicators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Severity/risk adjustment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sentinel event	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interdisciplinary care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are the reasons for the changes, if any, made and the benefits resulting from the changes noted above in the training on quality measurement? Please respond in the space below.

	Area Addressed in Most Recent Academic Year	Newly Offered Since 1999-2000 Academic Year	Training Expanded or Improved	No Change in Curricular Area
Quality Improvement				
Physician reminder systems (e.g., prompts in paper charts or computer-based reminders)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilitated relay of clinical data to providers (e.g., use of faxes to send information between PCP and specialists)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Audit and feedback approaches (e.g., performance review, report cards, benchmarking)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physician education (e.g., conferences, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient education (e.g., pamphlets, classes, self-care instruction, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promotion of disease self management (e.g., workshops, monitoring devices, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient reminder systems (e.g., telephone or postcard reminder systems)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizational changes (e.g., total quality management, continuous quality improvement, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial incentives (e.g., pay for performance)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use of practice guidelines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What are the reasons for the changes, if any, made and the benefits resulting from the changes noted above in the training on quality improvement? Please respond in the space below.				

Program

HRSA 100-3-E: Changes in the Numbers of Residents and Faculty Members and Resulting Benefits

Program Name:	0
Medicare Provider Number:	0
Date of Report:	(mm/dd/yy)

For your training program answer the following questions. **See detailed guidance for complete instructions.**
 In which year was this training program first offered?

In the following table, please indicate the total number of trainees and faculty involved in your program in the first year of CHGME funding and in the most recent year of funding:

Year 1 of CHGME Funding (1999/2000 academic year)		Most Recent Year of CHGME Funding	
Number of Residents	Number of Faculty	Number of Residents	Number of Faculty

How have the changes in the number of residents and/or the number of faculty in your program yielded benefits to your residents, institution, or patients?
 [Benefits may include, for example, increases in medical knowledge; improvements in clinical competence; increased awareness of psychosocial and behavioral aspects of health and illness; increased awareness of the availability of community resources; increased ability to function as a medical home provider; improvements in patient care and outcomes and promotion of leadership skills.] Please respond in the space below.

Children's Hospital Graduate Medical Education Payment Program Training

Program Name:	0
Medicare Provider Number:	0
Date of Report:	(mm/dd/yy)

For each resident (who was in a hospital-sponsored program or who spent 75% of his/her training time in your hospital in the last academic year) who completed training in the 2006/2007 academic year, please provide information regarding his or her first place of employment lasting at least 6 months: city, state, zip code, and type of employment for their current position. **See detailed guidance for complete instructions.**

Resident No.	City	State	Zip Code	Type of Employment
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				

Resident No.	City	State	Zip Code	Type of Employment
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				
36				
37				
38				
39				

Required
Elective
Not Currently Used

The annual number of trainees
The annual number of trainees
The annual number of trainees

The number of faculty increases
The number of faculty decreases
The number of faculty stays the same

Private Practice
Non-academic medical center
Non-academic medical center - Hospital
Non-academic medical center - Outpatient
Academic medical center - Add-on
Academic medical center - Hospital
Academic medical center - Staff
Academic medical center - Faculty
Academic medical center - Other
Public setting - Community/rural
Public setting - Health department
Government - Federal (CDC, FDA, NIH)
Government - State government
Government - National Health Service
Government - Military
Private industry - Pharmaceutical
Other
Not currently employed

Financial
Sociocultural
Geographic
Medical
2 or 3 Populations
All of the above