

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration STAFFING IMPACT FORM	FOR HRSA USE ONLY	
	Grant Number	Application Tracking Number

Instructions

- Enter all personnel FTE (direct hire staff and contractor/agreement) that BHSE funding will support. Do not include staff that will be supported with non-federal funds.
- Allocate staff time by function across the positions listed. An individual's full-time equivalent (FTE) should not be duplicated across positions. Do not exceed 1.0 FTE for any individual. Do not include staff supported by your Health Center Program award (H80) if they will not also be supported by BHSE funding.
- Refer to the [2023 Uniform Data System Manual](#) (PDF) for staffing position definitions.
- Refer to the BHSE NOFO for detailed guidance on completing this form.

Mental Health Services

Staffing Positions by Major Service Category	Direct Hire FTEs	Contract/Agreement FTEs
Psychiatrists		<input type="checkbox"/> Yes <input type="checkbox"/> No
Licensed Clinical Psychologists		<input type="checkbox"/> Yes <input type="checkbox"/> No
Licensed Clinical Social Workers		<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Licensed Mental Health Providers Please Specify (maximum 40 characters): _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Mental Health Personnel Please Specify (maximum 40 characters): _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
Physicians (other than Psychiatrists)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Nurse Practitioners		<input type="checkbox"/> Yes <input type="checkbox"/> No
Physician Assistants		<input type="checkbox"/> Yes <input type="checkbox"/> No
Certified Nurse Midwives		<input type="checkbox"/> Yes <input type="checkbox"/> No

Staffing Positions by Major Service Category	Direct Hire FTEs	Contract/Agreement FTEs
Nurses		<input type="checkbox"/> Yes <input type="checkbox"/> No
Substance Use Disorder Services		
Staffing Positions by Major Service Category	Direct Hire FTEs	Contract/Agreement FTEs
Substance Use Disorder Personnel		<input type="checkbox"/> Yes <input type="checkbox"/> No
Physicians (other than psychiatrists)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Nurse Practitioners (medical)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Physician Assistants		<input type="checkbox"/> Yes <input type="checkbox"/> No
Certified Nurse Midwives		<input type="checkbox"/> Yes <input type="checkbox"/> No
Nurses		<input type="checkbox"/> Yes <input type="checkbox"/> No
Psychiatrists		<input type="checkbox"/> Yes <input type="checkbox"/> No
Licensed Clinical Psychologists		<input type="checkbox"/> Yes <input type="checkbox"/> No
Licensed Clinical Social Workers		<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Licensed Mental Health Providers		<input type="checkbox"/> Yes <input type="checkbox"/> No
Professional Services		
Staffing Positions by Major Service Category	Direct Hire FTEs	Contract/Agreement FTEs
Other Professional Health Services Personnel (including behavioral health aides and practitioners) Please Specify (maximum 40 characters): _____		<input type="checkbox"/> Yes <input type="checkbox"/> No

Enabling Services

Staffing Positions by Major Service Category	Direct Hire FTEs	Contract/Agreement FTEs
Case Managers		<input type="checkbox"/> Yes <input type="checkbox"/> No
Patient/Community Education Specialists		<input type="checkbox"/> Yes <input type="checkbox"/> No
Outreach Workers		<input type="checkbox"/> Yes <input type="checkbox"/> No
Transportation Staff		<input type="checkbox"/> Yes <input type="checkbox"/> No
Eligibility Assistance Workers		<input type="checkbox"/> Yes <input type="checkbox"/> No
Interpretation Staff		<input type="checkbox"/> Yes <input type="checkbox"/> No
Community Health Workers		<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Enabling Services Personnel Please Specify (maximum 40 characters): _____		<input type="checkbox"/> Yes <input type="checkbox"/> No

Other

Staffing Positions by Major Service Category	Direct Hire FTEs	Contract/Agreement FTEs
Quality Improvement Personnel		<input type="checkbox"/> Yes <input type="checkbox"/> No
Management and Support Personnel		<input type="checkbox"/> Yes <input type="checkbox"/> No
Facility Personnel (including security)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Fiscal and Billing Personnel		<input type="checkbox"/> Yes <input type="checkbox"/> No
Information Technology Personnel		<input type="checkbox"/> Yes <input type="checkbox"/> No
Patient Support Personnel		<input type="checkbox"/> Yes <input type="checkbox"/> No

Staffing Positions by Major Service Category	Direct Hire FTEs	Contract/Agreement FTEs
Other Programs and Services Personnel Please Specify (maximum 40 characters): _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
Total FTEs		
Totals	Direct Hire FTEs	Contract/Agreement FTEs
Totals	<i>EHBs will auto-calculate</i>	N/A

Public Burden Statement: Health centers (section 330 grant funded and Federally Qualified Health Center look-alikes) deliver comprehensive, high quality, cost-effective primary health care to patients regardless of their ability to pay. The Health Center Program application forms provide essential information to HRSA staff and objective review committee panels for application evaluation; funding recommendation and approval; designation; and monitoring. The OMB control number for this information collection is 0915-0285 and it is valid until 4/30/2026. This information collection is mandatory under the Health Center Program authorized by section 330 of the Public Health Service (PHS) Act ([42 U.S.C. 254b](#)). Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.