

U.S. Office of Personnel Management
Division for Human Capital Leadership & Merit System Accountability
Classification Appeals Program

Atlanta Field Services Group
75 Spring Street, SW., Suite 1018
Atlanta, GA 30303-319

Classification Appeal Decision
Under section 5112 of title 5, United States Code

Appellant: [appellant]

Agency classification: Clinical Nurse
GS-610-9

Organization: [name] Medical Clinic
[name] Naval Hospital
U.S. Department of the Navy
[location]

OPM decision: Clinical Nurse
GS-610-9

OPM decision number: C-0610-09-01

/s/ Virginia L. Magnuson
Virginia L. Magnuson
Classification Appeals Officer

May 30, 2003
Date

As provided in section 511.612 of title 5, Code of Federal Regulations, this decision constitutes a certificate that is mandatory and binding on all administrative, certifying, payroll, disbursing, and accounting officials of the government. The agency is responsible for reviewing its classification decisions for identical, similar, or related positions to ensure consistency with this decision. There is no right of further appeal. This decision is subject to discretionary review only under conditions and time limits specified in the *Introduction to the Position Classification Standards*, appendix 4, section G (address provided in appendix 4, section H).

Decision sent to:

[appellant]
[address]
[location]

HRO Director
[address]
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Mr. Allan Cohen
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Introduction

On February 3, 2003, the Atlanta Field Services Group, formerly the Atlanta Oversight Division, U.S. Office of Personnel Management (OPM), accepted an appeal from [appellant]. Her position is currently classified as Clinical Nurse, GS-610-9. The appellant is requesting that her position be classified as Nurse Educator, GS-610-10. The position is located at the [name] Medical Clinic, [name] Naval Hospital, U.S. Department of the Navy, [location]. We received a complete administrative report on March 5, 2003. The appeal was accepted and processed under section 5112(b) of title 5, United States Code (U.S.C.).

General issues

The appellant takes issue with how the agency analyzed her position description. She also believes she performs the duties of a nurse educator and included a Nurse Educator, GS-610-10, position description from another location. She believes the position description identifies duties and responsibilities similar to hers. By law, we must classify positions solely by comparing their current duties and responsibilities to OPM standards and guidelines (5 U.S.C. 5106, 5107, and 5112). Since comparison to standards is the exclusive method for classifying positions, we cannot compare the appellant's position to others as a basis for deciding her appeal.

In reaching our classification decision, we have carefully reviewed all the information furnished by the appellant and the agency, including information obtained from telephone interviews with the appellant and her immediate supervisor.

Position information

The appellant is assigned to position description number 01461. The appellant and her supervisor have certified the accuracy of the position description. Based on our review of the record, we found that the position description reflects less supervision and work review than the appellant receives. The position description states that the Family Practice Medical Officer does the incumbent's annual evaluation and that the nurse consults with the supervisor and they jointly share in the development of decisions. It also states that the incumbent performs independently, sets priorities, modifies nursing care as indicated, and completes patient care and other assigned tasks within her scope of practice.

However, the record shows that the appellant does not have the full level of independence stated in the position description. For example, the supervisor reviews patient files and gives final approval before the appellant gives contraception program injections. He provides guidance in regard to unusual situations that do not have clear precedents. The work is reviewed for technical soundness, appropriateness, and conformity to policy and nursing requirements. The supervisor and two Physician Assistants are available for advice and assistance concerning areas outside of the appellant's scope of practice.

A position description is the official record of the major duties and responsibilities assigned to a position by an official with the authority to assign work. A position is the duties and responsibilities that make up the work performed by an employee. Position classification appeal regulations permit

OPM to investigate or audit a position and decide an appeal on the basis of the actual duties and responsibilities currently assigned by management and performed by the employee. An OPM appeal decision classifies a real operating position and not simply the position description. Therefore, this decision is based on the work currently assigned to and performed by the appellant and sets aside any previous agency decision.

The appellant is a licensed registered nurse (RN) and provides nursing care in the [name] Medical Clinic at the [name] Center, which is an Ambulatory Care Facility, located in [location]. This facility provides services to eligible civilian, military and eligible family members. The appellant administers medications, promotes better health practices, performs research/review of literature, and consults and advises other members of the medical team.

The appellant performs direct patient care using standards of care and knowledge of normal anatomy and physiology to assess patient needs. She interviews patients and updates their medical history. She develops patient plans of care and evaluates and modifies plans based on patient response to nursing care. The appellant is responsible for a number of technical procedures, e.g., taking vital signs, administering medications, and assessing body systems. Other duties include operating the [name] Clinic on Tuesdays and Thursdays.

The appellant implements, coordinates, and evaluates the comprehensive nursing care provided in the clinical setting and uses scientific and professional nursing principles as the basis for all techniques and procedures performed. She manages the newly diagnosed and stable phases of chronic illnesses such as diabetes, asthma, elevated cholesterol, and hypertension. The appellant provides individual and family counseling and teaching in relation to the patient's condition. She provides educational literature dealing with subjects related to particular health problems and provides physical and psychological support to patients. She explains procedures and treatments. Other duties include ordering and restocking supplies, participating on the wellness council, and providing walk-in counseling to patients in need of medical attention or services.

The official position description contains more information about how the position functions and we incorporate it by reference into this decision.

Series, title, and standard determination

The agency classified the appellant's position in the GS-610 series and titled it Clinical Nurse. The appellant does not contest the series determination and we concur. However, the appellant believes that the title should be Nurse Educator. The GS-610 series covers positions requiring a professional knowledge of nursing. Positions involve providing care to patients in hospitals, clinics, occupational health units, homes, schools, and communities; administering anesthetic agents and supportive treatments to patients undergoing surgery or other medical procedures; promoting better health practices; teaching; performing research in one or more phases of the field of nursing; or consulting and advising nurses who provide direct care to patients. Positions that provide comprehensive nursing services to patients in hospitals, clinics, outpatient clinics and emergency rooms are titled as Clinical Nurse. This includes assignments to specific areas or assignments of a more general nature

involving more than one area. The Nurse Educator title is appropriate for positions *entirely* or *primarily* concerned with training or teaching. Examples of nurse educator duties include assessing educational needs of patients and their families; coordinating, administering, and/or teaching health classes for clinical staff and/or patients; collaborating with clinical staff on health education assessments; preparing lesson and study plans; and assessing training programs and evaluations. Although the appellant provides education, counseling and advisory information to patients and family members, a common duty in most nursing positions, it is not to the extent envisioned by the standard for nurse educators. Based on our review of the record, we determine that the appellant's position is properly titled as Clinical Nurse. The standard for the GS-610 series is used to evaluate clinical nurse positions.

Grade determination

The GS-610 standard uses the Factor Evaluation System (FES) format. Under the FES, positions are evaluated on the basis of their duties, responsibilities, and the qualifications required in terms of nine factors common to non-supervisory General Schedule positions. A point value is assigned to each factor based on a comparison of the position's duties with the factor-level descriptions in the standard. The factor point values mark the lower end of the ranges for the indicated factor level. For a position factor to warrant a given point value, it must be fully equivalent to the overall intent of the selected factor-level description. If the position fails in any significant aspect to meet a particular factor level description in the standard, the point value for the next lower factor level must be assigned unless the deficiency is balanced by an equally important aspect which meets a higher level. The total points assigned are converted to a grade by use of the grade conversion table in the standard.

The appellant contests the agency evaluation of Factor 3. She believes that Level 3-3 should be credited because she uses that level of judgment in interpreting many situations and adapting guidelines daily. We have reviewed the agency determination for Factors 1, 2, 4, 5, 6, 7, 8, and 9 and agree with their evaluation of these factors in all cases except Factor 2. This decision will, therefore, address only Factor 2 and Factor 3, the one contested by the appellant.

Factor 2, Supervisory controls

This factor covers the nature and extent of direct or indirect controls exercised by the supervisor, the employee's responsibility, and the extent of review of completed work. The agency evaluated this factor at Level 2-4 and the appellant agrees. We disagree.

At Level 2-3, the supervisor makes assignments, for example, to wards of a hospital or areas of a city, and assists the nurse with unusual problems. The nurse plans and carries out assignments in accordance with guidance and professional nursing standards. The work is evaluated for adherence to professional standards and requirements.

Level 2-3 is met. The appellant is under the general professional, technical, and administrative supervision of the Senior Medical Officer, who is a physician. The appellant carries out most duties

independently, consulting with superiors on the most complex problems. She plans and carries out assignments in accordance with guidance and professional nursing standards and is evaluated for adherence to professional standards and requirements by the Medical Officer. This type of supervision matches Level 2-3.

At Level 2-4, the supervisor sets overall objectives and resources available. The nurse and supervisor consult on work and develop decisions together. The nurse is an expert, who plans and performs work independently, resolves most conflicts, coordinates with others on teams and in communities. Work is reviewed for effectiveness in meeting requirements. Level 2-4 is appropriate for nurses who serve as experts in very independent assignments or as part of a health care team. The examples given at Level 2-4 illustrate this degree of independence. Nurse specialists at Level 2-4 work alone or on multi-disciplinary teams, treat patients, and solve all but the most acute problems on their own initiative. Community health nurses at Level 2-4 work in clinics, visit homes and schools, counseling, teaching, and adjusts schedules according to community needs. Nurse specialists and community and community health nurses in these settings work within very broad parameters and have an unusual degree of responsibility for planning and performing work in an independent setting.

Level 2-4 is not met. While the appellant works with considerable independence, this is consistent with Level 2-3, at which the nurse is assigned to a hospital ward (or an area of the city) and plans and carries out assignments in accordance with standards, i.e., without assistance from the supervisor except on the most unusual problems. The appellant does not perform assignments requiring the degree of independence intended at Level 2-4 because of the setting in which she works. In the clinic, there is a Senior Medical Officer and two Physician Assistants who are always available for guidance and assistance. Even though she plans and carries out her assignments and resolves most conflicts, she does so in the context of the type of assignments contemplated at Level 2-3, rather than assignments contemplated at Level 2-4, e.g. working alone in a community health facility. For example, the appellant administers the Depo-Provera contraceptive program including assessing the patients medical history, determining if appropriate exams, such as pap smear and pregnancy test, have been completed, and if timing of injection is appropriate. However, before the appellant can give the injection to the patient, the Senior Medical Office must review the file and give his final approval. This demonstrates a greater degree of supervision than what is envisioned for and precludes the crediting of Level 2-4.

Level 2-3 is credited for 275 points.

Factor 3, Guidelines

This factor covers the nature of guidelines and the judgment needed to apply them. The agency evaluated this factor at Level 3-2. We disagree.

At Level 3-2, manuals, nursing and medical orders, physician's instructions and professional ethics govern the conduct of professional nurses at this level. Judgment is required to select and apply guidelines and in making minor deviations to adapt the guidelines to specific cases.

The position exceeds Level 3-2. Guidelines include [name] Naval Hospital and [name] Medical Clinic instructions and policies, specific medical officer orders, nursing procedure manual, NAVMEDCOM instructions, memoranda and standing orders. The appellant works under standards that provide guidance for routine matters and some problems, but guidelines do not cover all cases and she must use considerable judgment in interpreting and determining a course of action.

At Level 3-3, guidelines are available but are not completely applicable to every situation likely to be encountered. The professional nurse uses judgment in interpreting and, with some patient situations, adapting guidelines.

The appellant's position meets Level 3-3. Available guidelines do not provide specific instructions for every situation. In such cases, initiative, judgment, and resourcefulness are required to interpret, apply, and modify guidelines to determine appropriate action. An example of this level is the appellant's work in the [name] Clinic, where guidelines and procedures were not clearly established and the appellant had to develop and adapt guidelines into standard operating procedures. Illustrative of clinical nurse assignments at Level 3-3 are nurses employed in general medical and surgical wards, intensive care units, or outpatient departments. They use judgment in assessing the condition of patients and interpreting guidelines to determine a course of action when any of several may be appropriate. This description is comparable to the appellant's position in that she must assess patients' conditions or needs and determine what action should be taken.

Level 3-4 is not met. At this level, general administrative policies and precedents exist, but are of only limited use in performing the work. The nurse uses initiative and resourcefulness in deviating from traditional methods, or in researching trends and patterns to develop new methods, criteria, or proposed new policies. The appellant works within guidelines that are more specific than administrative policy though some must be interpreted or adapted. The appellant performs research/review of literature primarily to provide appropriate patient assessments rather than to develop new methods, criteria, or propose new policies.

Level 3-3 is credited for 275 points.

Summary

<i>Factors</i>	<i>Level</i>	<i>Points</i>
1. Knowledge required by the position	1-6	950
2. Supervisor controls	2-3	275
3. Guidelines	3-3	275
4. Complexity	4-3	150
5. Scope and effect	5-3	150
6. Personal contacts	6-2	25
7. Purpose of contacts	7-3	120
8. Physical demands	8-2	20

9. Work environment	9-2	20
<i>Total</i>		1985

A total of 1985 points falls within the GS-9 point range of 1855 to 2100 in the standard.

Decision

The appellant's position is properly classified as a Clinical Nurse, GS-610-9.