

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

Appellant: [10 appellant et al.]

Agency classification: Health Technician
GS-640-6

Organization: Domiciliary Residential Rehabilitation
Treatment Program
Mental Health Care Line
Clinical Services
Veterans Affairs Medical Center
Department of Veterans Affairs
[city and state]

OPM decision: Therapy Assistant
GS-636-6

OPM decision number: C-0636-06-01

Kevin E. Mahoney

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Deputy Associate Director
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Human Capital Leadership
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May 26, 2006

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).

Since this decision changes the classification of the appealed position, it is to be effective no later than the beginning of the fourth pay period after the date of this decision (5 CFR 511.702). The servicing human resources office must submit a compliance report containing the corrected position description and Standard Form 50 showing the personnel action taken. The report must be submitted within 30 days from the effective date of the personnel action.

Decision sent to:

[10 appellants]
Domiciliary Residential Rehabilitation
Treatment Program
Mental Health Care Line,
Veterans Affairs Medical Center
Department of Veterans Affairs
[address]
[address]
[city and state]

[name]
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Non Professional Unit
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Introduction

On July 28, 2005, the Chicago Field Services Group of the U.S. Office of Personnel Management (OPM) accepted a group classification appeal for [appellants]. They occupy identical additional positions (hereinafter referred to as position), currently classified as Health Technician, GS-640-6, in the Domiciliary Residential Rehabilitation Treatment Program, Mental Health Care Line, Veterans Affairs Medical Center, Department of Veterans Affairs, in [city and state]. The appellants believe their position should be reclassified as Health Technician, GS-640-7. [one of the appellants] was originally designated as representative and lead appellant, but he works the night shift, so [another appellant] was subsequently designated by his co-appellants as lead appellant on September 1, 2005. We received partial agency administrative reports on August 26, 2005, and October 3, 2005, and the complete report on January 31, 2006. We accepted and decided this appeal under section 5112 of title 5, United States Code (U.S.C.).

To help decide the appeal, we conducted a telephone audit with the lead appellant, who was assisted by one of the other appellants, on December 28, 2005, and a telephone interview with their immediate supervisor on December 30, 2005. In reaching our decision, we carefully considered the audit and interview findings and all information furnished by the appellants and the agency.

General issues

The appellants occupy position description (PD) #####-A. Their supervisor certifies that the PD is an accurate description of the work performed. The appellants agree that it is accurate but believe that the amount of driving required to perform their duties was not properly credited in determining their grade.

A PD is the official record of the major duties and responsibilities assigned to a position by a responsible agency official; i.e., a person with authority to assign work to a position. A position is the work made up of the duties and responsibilities performed by an employee. Classification appeal regulations permit OPM to investigate or audit a position and decide an appeal based on the duties assigned by management and performed by the employee. We classify a real operating position, and not simply the PD. Therefore, this decision is based on the actual work assigned to and performed by the appellants.

The appellants point out that the Federal Wage System (FWS) Job Grading Standard (JGS) for Motor Vehicle Operating, 5703, at grade 6 states "Some drivers at this grade level drive ambulances or patient transport vehicles to pick up and transport patients under nonemergency conditions from one location to another such as from an airport to a hospital or from one hospital to another." The appellants believe their position was not correctly classified because it was not properly credited for the amount of miles (collectively, over 39,000 miles during the past year) that they were required to drive in order to perform their duties. They believe the agency's evaluation was inaccurate, even though the agency only applied the 5703 JGS for pay comparisons.

As indicated in the *Introduction to the Position Classification Standards* (Section IV (A) (b)), operation of motor vehicles is covered under the General Schedule (GS) when the equipment operation is incidental to performing the primary duty of the position, and the paramount qualification requirements are those of a GS occupation. The agency states that the driving tasks are incidental to performing the primary duties of the position and made the pay category determination (Sections 5101, 5102, and 5103 of 5 U.S.C.) to insure the position falls within in the GS. Furthermore, while the appellants stressed the importance of the driving responsibilities during the telephone audit, they acknowledged (and her supervisor agreed) that their patient care duties were paramount. Therefore, the position is properly classified in the GS.

By law, we must classify GS positions solely by comparing current duties and responsibilities to OPM's position classification standards (PCSs) and guidelines (5 U.S.C. 5106, 5107, and 5112). We find the agency's application of the 5703 JGS to determine the grade of the driving duties was neither necessary nor appropriate. Once a pay category determination has been made that a position is covered by the GS, only GS PCSs and guidelines may be applied for classification purposes.

Because our decision sets aside any previous agency decision, the classification determinations made by the appellants' agency in classifying their position are not germane to the classification appeal process.

Position information

The appellants function as members of the treatment team for the Domiciliary Residential Rehabilitation Treatment Program, the Addictions Recovery Program, and the Vocational Recovery Program. The patients are primarily in multilevels of psychosocial care and present a variety of physical, social, and psychiatric problems, making return to the community difficult without rehabilitation and/or psychosocial stabilization.

The appellants participate in the initial interview of new patients along with other members of the multidisciplinary team. The purpose of the initial interview is to identify problems that relate to areas including, but not limited to, the emotional, vocational, and physical aspects that could affect the patient's successful rehabilitation. The appellants are responsible for taking detailed notes during the interviews. They prepare treatment plans based on the compilation of information obtained during the interview and discussed with members of the team. Once the treatment plans are in place, the appellants work with the patients to implement the actions items in promoting the patients' physical, social, and emotional readjustment; conducting individual and group therapy, securing the patient's confidence, instructing patients, and coordinating with others on work efforts. The appellants conduct discussion groups, as well as individual counseling sessions, to resolve issues and problems that arise. They are led by a Lead Health Technician, GS-640-7, and supervised by a Registered Nurse, GS-610-9. The appellants state they serve as case coordinators for patients assigned to them. They assist in assessing the needs of the patient, developing the treatment plan, documenting

accurately both positive and negative responses to treatment, and discussing the plan with the treatment team, including discharge planning and aftercare.

The appellants' position requires knowledge of mental health terminology and mental health skills, including knowledge of general medications, knowledge of psychosocial rehabilitation principles and methods, and knowledge of one-to-one interaction practices and accepted methods of conducting group therapy. The work also requires the ability to observe and record patients' behavior and to recommend appropriate changes in the patients' treatment plans.

Based on our review, we find the official PD contains the major duties and responsibilities assigned to and performed by the appellant and we incorporate it by reference into our decision.

Series, title and standards determination

The agency classified the position in the Health Aid and Technician Series, GS-640, and titled it Health Technician, and applied the Primary Standard in conjunction with the (PCS) for Nursing Assistant Series, GS-0621, using cross-series comparison, to evaluate the position. The GS-621 series includes positions involving a variety of personal care, nursing care, or related procedures which do not require the licensure of practical and vocational nurses or fully professional nurse education. The Primary Standard is the "standard for standards" for GS positions and uses the Factor Evaluation System (FES) format. Under FES, positions which significantly exceed the highest factor level or fail to meet the lowest factor level described in a PCS must be evaluated by reference to the Primary Standard, as discussed in appendix 3 of the *Introduction to the Position Classification Standards (Introduction)*.

Based on careful review of the record, we find the appellants' position is best placed in the Rehabilitation Therapy Assistant Series, GS-0636, because the grade-controlling knowledge and skills needed to function as a member of a treatment team working with patients are comparable. This series covers positions that involve treating, instructing, or working with patients in carrying out therapeutic activities prescribed for their physical or mental rehabilitation. Rehabilitation therapy assistants work in such fields of therapy as occupational, physical, corrective, manual arts, and educational. The work requires the ability to apply a practical knowledge of therapeutic methods and techniques but does not require a full professional knowledge of the concepts, principles, and practices of the specialized field of therapy.

The GS-636 PCS prescribes the following specialized titles for positions at grades GS-4 and above that involve application of a practical knowledge of the treatment methods and techniques of the specialized field of therapy in the rehabilitation of the patient: Occupational Therapy Assistant, Physical Therapy Assistant, Kinesiotherapy Assistant, Manual Arts Therapy Assistant, and Educational Therapy Assistant. It also allows for the title, Therapy Assistant, for positions at grades GS-4 and above that involve the application of the treatment methods and procedures of a specialized field of therapy not

covered by the authorized specializations. The appellants' primary work is in promoting the patients' physical, social, and emotional readjustment; conducting individual and group therapy, securing the patient's confidence, instructing patients, and coordinating with others on work efforts. Since the appellants work in a specialized field of therapy not covered by one of the specialty titles authorized above, the proper title and series of this position is Therapy Assistant, GS-636. The grade level of the position must be determined by using the directly applicable grading criteria in the GS-636 PCS.

Grade determination

The GS-636 PCS is written in narrative format. Grade levels are determined and defined under two broad factors: Nature of assignment (which includes the knowledge required and complexity of the work) and Level of responsibility (which includes supervisory controls, guidelines, and contacts).

Nature of assignment

This factor measures the difficulty and complexity of the work performed by the therapy assistants. It includes the skills and knowledge required to perform treatment activities, the personal contacts involved in working with patients, and the judgment needed to assess patients' reactions and progress and to motivate them constructively. At lower grade levels, the assistant receives on-the-job training and gains experience in observation and in working with patients in simple activities. At higher grades, the assistant applies highly specialized practical skills and knowledge in the treatment of a wide variety of patients who include the acutely and chronically ill.

GS-5 assistants plan and carry out the full range of treatment for patients with conditions which respond to the application of the standard treatment procedures or require minor modifications in these procedures to achieve beneficial results. They adapt various treatment activities to meet the specific needs of individual patients. They observe, assess, and report on the progress and reactions of patients whose physical or mental condition presents major obstacles to the achievement of therapeutic goals.

GS-6 assistants, as a regular and recurring duty, plan and carry out highly specialized and diversified treatment for patients whose physical and mental condition requires the application of standard and nonstandard treatment procedures and approaches. GS-6 assistants make frequent and extensive changes in procedures and approaches to enable patients to overcome their disabilities and continue the treatment. They must judge whether the treatment is causing a negative or adverse effect on other conditions not under treatment. On the basis of these observations and conclusions, GS-6 assistants change or modify treatment procedures, the content of the treatment plan, and approaches used in treating the patient. GS-6 assistants draw upon a broad practical knowledge of the characteristics of physical and mental illness in judging the conditions of patients, in recognizing the relationships between patients' disabilities and the effects of treatment, and in assessing accurately both positive and negative responses to treatment. The appellants' position meets but does not exceed the GS-6 level, the highest level described in the PCS. Similar to GS-6 assistants, the appellants draw upon a broad

knowledge of therapy in recognizing the physical and mental characteristics of their assigned patients, in recognizing the relationships between patient's disabilities and the effect of treatment, and in reporting accurately both positive and negative responses to treatment. For example, the appellants assess each patient's progress in relation to the rehabilitation treatment plan and utilize this knowledge to stimulate progress in the patient. The appellants also adjust prescribed treatment to meet patients' needs, preferences, and tolerances. They monitor the needs of the patients, developing the treatment plan, documenting accurately both positive and negative responses to treatment, discussing the plan with the treatment team, including discharge planning and aftercare. This tailoring of prescribed treatment is comparable to the extensive changes that GS-6 assistants make when using nonstandard treatment procedures to help patients overcome their disabilities. The appellants' position requires knowledge of mental health terminology and mental health skills, including knowledge of general medications, knowledge of psychosocial rehabilitation principles and methods, and knowledge of one-to-one interaction practices and accepted methods of conducting group therapy. The work also requires the ability to observe and record patients' behavior and to recommend appropriate changes in the patients' treatment plans. Consistent with the GS-6 level, the appellants apply and use knowledge of group activities and motivation techniques to promote individual patient's physical, social, and emotional readjustment. As at the GS-6 level, the appellants evaluate patients' records, prescribed treatment plans, and patient's response to therapy in order to modify treatment procedures and approaches used in rehabilitating the patient.

Therefore, this factor is credited at the GS-6 grade level.

Level of responsibility

This factor covers the nature and availability of the guidelines which control the work; the direction, control, and guidance received from professional personnel; the kind and degree of supervision over the work during its performance; and the degree of review of actions, decisions, and authority delegated to the therapy assistant to modify treatment procedures and to advance patients to higher levels of activity. At higher grade levels, therapy assistants independently apply highly specialized skills and an extensive practical knowledge of treatment activities. At the highest levels, supervision is limited to guidance and review on matters that require professional advice or judgment.

GS-5 assistants plan and carry out a full range of treatment for their patients using standard treatment procedures to which they make minor modifications as necessary. The supervisor of the GS-5 assistant assigns patients for treatment, indicates the treatment objectives, and reviews treatment plans prior to execution. The assistant develops progressive treatment plans based on his or her evaluation of the patient, which are reviewed prior to execution, and have the authority to alter treatment procedures when patients fail to respond favorably. The supervisor observes work occasionally for compliance with the medical prescription and objectives of treatment; for effectiveness of the assistant in planning, developing, and administering treatment; and for adequacy of patients' progress and participation.

GS-6 assistants work with a high degree of independence in planning and carrying out highly specialized and complex treatment in working out treatment routines, adapting treatment procedures, and changing or modifying the content of treatment plans. They adapt or make changes in procedures and approaches without prior approval of the supervisor and plan treatment without review for patients who are not critically or acutely ill. Reports of patients' condition, responses, progress, and completion of treatment are reviewed by the supervisor for general adequacy and for effectiveness in achieving objectives.

The appellants' level of responsibility meets but does not exceed the GS-6 level, the highest level described in the PCS. Like GS-6 assistants, the appellants carry out their assignments independently, applying both standard and nonstandard treatment procedures and approaches. They are often the only staff on duty and are expected to make independent judgments within program guidelines. They serve as case coordinators for patients assigned to them. They assist in assessing the needs of the patient, developing the treatment plan, documenting accurately both positive and negative responses to treatment, and discussing the plan with the treatment team, including discharge planning and aftercare. The level of review is comparable to the GS-6 level where assistants make changes, modifications, or adaptations in treatment plans. While reports documenting patients' progress for adequacy and the changes made to the treatment plans by the appellants must be reviewed by the Domiciliary Coordinator or the multidisciplinary team, the review is cursory. In addition, the level of responsibility concerning the guidance available to the appellants and the level of independence from supervision closely matches that described at the GS-6 level.

Therefore, this factor is credited at the GS-6 grade level.

Summary

Since both factors are evaluated at the GS-6 grade level, the final grade of the position's rehabilitation therapy assistance duties is GS-6.

Decision

The appellants' position is properly classified as Therapy Assistant, GS-636-6.