

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 30303-3109

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

Appellant: [appellant]

Agency classification: Health Technician
GS-640-6

Organization: [name] Service
[name] Services
[organization]
Department of Veterans Affairs
[location]

OPM decision: GS-640-6
(Title at agency discretion)

OPM decision number: C-0640-06-03

/s/ Robert D. Hendler
Robert D. Hendler
Classification and Pay Claims
Program Manager

October 31, 2005
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:

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Introduction

On April 7, 2005, the Atlanta Field Services Group of the U.S. Office of Personnel Management (OPM) accepted a classification appeal from [appellant]. The appellant's position is currently classified as Health Technician, GS-640-6, and is located in the [name] Service, [name] Services, [organization], Department of Veterans Affairs (VA), in [location]. The appellant requests that his position be upgraded to GS-7. We received the agency's complete administrative report on July 22, 2005. We have accepted and decided his appeal under section 5112 of title 5, United States Code.

General issues

The appellant believes that his position warrants a higher grade due to its complexity and responsibility for patient care and treatment, complex medical equipment, supply/inventory functions, and clinical support coordination to accomplish daily schedules and ensure supplies and equipment are available. However, he did not provide any rationale referring to published OPM position classification standards (PCSs) to support upgrading his position. By law, we must classify positions solely by comparing the current duties and responsibilities to OPM standards and guidelines (5 U.S.C. 5106, 5107, and 5112). In adjudicating this appeal, our only concern is to make our own independent decision on the proper classification of the appellant's position. In reaching our classification decision, we have carefully reviewed all information furnished by the appellant and his agency, including information obtained from telephone interviews with the appellant and his supervisor and the position description (PD) of record. Because our decision sets aside any previous agency decision, the classification determinations made by the appellant's agency in classifying his position are not germane to the classification appeal process.

Position information

The appellant is assigned to PD number [#]. Both the supervisor and the appellant certified the accuracy of the PD. The appellant believes that the PD is accurate but does not detail his level of responsibility for supply support functions, performing urodynamic studies and other procedures, and maintaining clinical records. We found that the PD contains the major duties assigned to and performed by the appellant and we incorporate it by reference into this decision.

The appellant's position is assigned to a health care team at a general medical and surgical VA medical center, part of a very large VHS, which is a tertiary care facility and active teaching hospital. It is assigned to the Gastrointestinal Unit (GU), a specialty clinic, and is responsible for a variety of duties associated with clinical procedures, nursing care and urodynamic studies for approximately 80 percent of the time. The appellant estimates that he performs supply support functions, including identifying and ordering supplies and equipment, for approximately 20 percent of his time.

The appellant's position involves performing complex technician-level urological diagnostic and treatment procedures. Clinic procedures include cystourethroscopy, stent placement and removal, prostate and bladder biopsies and fulguration, cystograms, real-time fluoroscopy, renal

stone location, ultrasounds, etc. He assists with radiologic procedures such as intravenous and retrograde pyelography, cystogram studies, and percutaneous nephrolithotomy procedures. This includes setting up equipment and controls for images and administering contrast dyes. The appellant prepares, organizes, and maintains sterile field set-ups, prepares and positions the patient, and provides necessary equipment, complex recording devices, and accessories to assist the physician with diagnostic procedures and treatments, often providing recommendations to attending physicians and mid-level nursing staff on use of the equipment and instruments. He inputs and retrieves patient and clinical procedure information from the automated central patient records and hospital records systems. The appellant independently performs bladder (noninvasive) ultrasounds, irrigations, catheterizations, and other procedures prescribed by physicians and highly complex urodynamic studies. He performs equipment calibrations, maintains urological and endoscopic equipment and instrumentation, identifies the need for repairs and ensures test reliability. The appellant also provides patient care, patient, family and medical staff training and performs miscellaneous administrative support functions for the clinic.

Series, title, and standard determination

The agency classified the position in the Health Aid and Technician Series, GS-640, and titled it Health Technician. The appellant does not disagree with the series or the title determination. We concur with the agency's series determination. While OPM suggests the title of Health Technician for positions at grades GS-4 and above, the title is optional to the agency.

The GS-640 PCS has no grade level criteria and directs that nonsupervisory positions be evaluated by reference to grade level criteria in standards for other nonprofessional technical positions in the GS-600, Medical, Hospital, Dental, and Public Health Group. The agency used the standards for the Nursing Assistant Series, GS-621, the Medical Instrument Technician Series, GS-649, and the Medical Supply Aide and Technician Series, GS-622, to evaluate the different kinds of work in the appellant's position. It evaluated both the medical instrument technician and the medical supply support work at the GS-4 grade-level.

The agency evaluated the nursing assistant duties at the GS-6 grade-level by referencing the Primary Standard in conjunction with the GS-621 PCS. The Primary Standard is the "standard for standards" for positions covered by PCS using 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, contained in appendix 3 of the *Introduction to the Position Classification Standards*. The agency thus credited two factors, Factor 3, Guidelines, and Factor 4, Complexity, at levels higher than those identified in the GS-621 occupation and provided minimal evaluation rationale for factor-level determinations. In doing so, it evaluated the appellant's nursing assistant work at the GS-6 grade-level.

We used the grading criteria contained in the GS-649 PCS to evaluate the appellant's technical work in calibrating, operating or monitoring the operation of diagnostic medical equipment and instruments. In addition to tasks associated with the equipment and instruments, work covered by this PCS includes securing the patient's confidence, positioning the patient, instructing other technicians, physicians, nurses and patients and coordinating with others on work efforts.

Although the appellant does not operate or monitor most of the types of medical instruments and equipment specifically discussed in the GS-649 standard, he works with all the urological and endoscopic equipment and instruments used in the GU clinic and operates noninvasive ultrasounds and the urodynamic studies equipment. He performs other work characteristic of that series: securing the patient's confidence; preparing the patient for procedures; assisting with diagnostic and treatment procedures; calibrating, adjusting, and maintaining the equipment; and instructing other technicians, physicians, and nurses on equipment and instrument. The appellant's work also requires a practical understanding of the medical data generated and knowledge of anatomy and physiology.

The GS-621 series includes positions which involve 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. We used the GS-621 PCS to evaluate the appellant's work involving patient care, assistance with patients receiving medical, surgical, or outpatient treatment, setting up procedure rooms and equipment, passing instruments and medical supplies, documenting patient and procedure records and teaching patients and families. While nursing assistants perform some equipment setup and adjustment work, the full scope of the appellant's responsibility for the equipment and instruments is evaluated using the GS-649 PCS and will not be discussed within the context of the GS-621 grade-level analysis. Since the medical supply support duties are performed for less than 25 percent of the appellant's time, they do not constitute a major duty and cannot control the grade of the appellant's position.

Grade determination

Evaluation using the GS-649 PCS

The GS-649 series uses the FES which employs nine factors. Under the FES, each factor level description in a standard describes the minimum characteristics needed to receive credit for the described level. Therefore, if a position fails to meet the criteria in a factor-level description in any significant aspect, it must be credited at a lower level. Conversely, the position may exceed those criteria in some aspects and still not be credited to a higher level. The total points assigned are converted to a grade by use of the grade conversion table in the standard. Our evaluation with respect to the nine FES factors follows.

Factor 1, Knowledge required by the position

This factor measures the nature and extent of information or facts that a worker must understand to do acceptable work, such as the steps, procedures, practices, rules, policies, theories, principles, and concepts, and the nature and extent of the skills needed to apply this knowledge.

At Level 1-4, employees have a practical knowledge of instruments used in the specialization to make adaptations and adjustments and interpret test results based on previous experience and observation. This level requires a practical knowledge of intricate examination or treatment procedures, a basic knowledge of anatomy and physiology, and common diseases and their effect associated with the specialization. Employees use skill to apply knowledge in adapting instruments to perform a full range of specialized tests or nonroutine diagnostic or treatment

procedures requiring many steps, and various approaches and procedures to findings from the early steps. They have knowledge of pharmacology and chemistry to understand drug action, effects, and method of administration. They have skill to prepare summaries of test results, workload reports, and related documents.

Level 1-4 is met. Like that level, the appellant performs or assists a team in performing specialized and complex diagnostic and treatment procedures. The work requires a thorough understanding of the procedures and equipment to set up all necessary equipment and to ensure it is sterile and all parts are functioning properly. He calibrates it both to manufacturers' parameters for controls and to accommodate the needs of specific patients. The appellant makes equipment adjustments, e.g., pressure indications and other calibrations, catheter manipulation, changes in wire sizes, etc., for specific tests based on desires of the physician, patient needs, or difficulties encountered during the procedures. As at Level 1-4, the work requires the appellant to recognize the reliability of test results and make equipment or patient position adjustments to ensure more accurate readings or results or to recommend different approaches based on observations and practical knowledge of equipment, testing procedures and patients' physical characteristics. He coaches resident physicians and others not familiar with the clinic's equipment on equipment settings, operation and techniques for use. He also responds to physicians' questions about the test result figures and their normalcy. Comparable to Level 1-4, the work requires knowledge of common diseases and their effect on gastroenterological concerns, a detailed knowledge of the anatomy, physiology, pathophysiology of the lower urinary tract and voiding dysfunction symptoms and operation, and advanced knowledge of medical terminology to understand written requests. The appellant also must prepare and enter detailed procedure documentation into the automated healthcare information system and/or the central patients' record system.

Level 1-5 is not met. At this level, employees perform special complicated examinations or treatments for which there are no standard instructions and procedures. They use knowledge of anatomy and physiology including an in-depth understanding of the functions of the major systems and internal organs to interpret requests and to recognize the need for additional tests or different position. They use this knowledge and knowledge of a variety of related acute disorders and diseases, their effects on the organs and methods of treatment and knowledge of pharmacology to perform relatively new diagnostic or treatment procedures involving very fine distinctions or many delicate and exacting steps. They also have skill in changing and adapting parts of the instruments to meet especially difficult situations. Unlike Level 1-5, the appellant works within established guidelines, procedures and practices in performing or in assisting physicians performing examinations or treatments and in working with the equipment and instruments. The work does not require similar knowledge to perform complicated examinations or treatments for which there are no standard instructions and procedures or skill to routinely change and adapt parts of the instruments.

Level 1-4 is credited for 550 points.

Factor 2, Supervisory controls

This factor covers the nature and the extent of direct or indirect controls exercised by the supervisor, the employee's responsibility and the review of completed work. The supervisor exercises controls in the way assignments are made, instructions are given to the employee, priorities and deadlines are set, and objectives are defined. Responsibility of the employee depends upon the extent to which the employee is expected to work independently as instructed and use of initiative in the performance of routine assignments.

At Level 2-2, the supervisor makes continuing assignments that show what is to be done, possible problems, quality and quantity of work expected, and priority of assignments. The supervisor provides additional instructions or guidance on procedures for new and difficult assignments. The employee independently carries out recurring examinations or treatments without instructions but refers deviations from regular procedures, unanticipated problems, and unfamiliar situations not covered by instructions to supervisor for decision or help.

For work at Level 2-3, the highest level described in the PCS, the supervisor defines work goals, priorities and deadlines. When working as a member of a team, physicians accept the technician's knowledge of complex procedures. Instructions include what is to be done, medical conditions expected and what equipment is available for particular special procedures. The technician uses judgment and initiative that include selecting appropriate instruments and methods, recognizing conditions that cause erroneous results and troubleshooting complex instruments. The supervisor helps the employee with unusual situations that have no clear precedents.

Level 2-2 is met. The appellant works independently in accomplishing the daily workload of scheduled procedures and prescribed patient tests or treatments, following established procedures, policies and accepted practices. The appellant refers unusual situations where there are no clear precedents and technical issues to the clinic nurse or attending physician. The appellant chooses the appropriate equipment and patient treatment area, uses sound judgment in calibrating and adjusting highly specialized equipment, monitoring or using the equipment, determining reliability of tests, and carrying out a variety of complex procedures. Unlike Level 2-3, the work does not allow the independence expected at that level. The appellant's work is more standardized and he does not independently perform the special complicated examinations or treatments requiring selection of methods and equipment as expected at this level to identify expected medical conditions. The appellant performs routine tasks independently but, in contrast to this level, refers technical situations and unusual situations to the clinical nurse or physician.

Level 2-2 is credited for 125 points.

Factor 3, Guidelines

This factor covers the nature of guidelines and the judgment needed to apply them. Guides may include, for example, manuals, established procedures and policies, traditional practices, and reference materials such as dictionaries and operating manuals.

At Level 3-2, well-established procedures for doing the work are available. Specific guidelines include written descriptions of standard tests or treatment procedures, written or oral instruction

from the physician, instrument manuals, instructions for procedural and administrative aspects of the assignment and textbooks and other technical publications. Employees use judgment in identifying and selecting the most appropriate guideline, reference or procedure. They make minor deviations to adapt the guidelines in specific cases, e.g., manipulating or changing instruments to meet requirements of the tests and determining which of several established alternatives to use to check and correct a problem.

At Level 3-3, guidelines are available but are not completely applicable to work. The employee must frequently make searches in textbooks, journals, and technical manual for application to individual cases. The technician uses judgment to adapt and change procedures, adopt or develop new procedures or techniques for individual problems. The procedures and techniques adapted or developed by the technician form the basis for hospital standardization.

Level 3-2 is met. As at this level, the appellant uses written policies, practices, procedures and techniques, accepted material and facility publications as guidelines. The physician or nurse may also provide verbal guidelines. The appellant uses judgment in altering techniques to meet the patients' conditions. Unlike Level 3-3, the guidelines do apply and the appellant does not regularly and recurringly change procedures, adopt or develop new procedures or techniques. He works within equipment control parameters identified by manufacturers or accepted practices in adjusting equipment or making minor deviations. Situations requiring significant deviations from the guidelines are referred to the registered nurse in the clinic or the physician. Significant equipment problems are referred to the biomedical repair staff or manufacturers' service technicians.

Level 3-2 is credited for 125 points.

Factor 4, Complexity

This factor covers the nature, number, variety, and intricacy of tasks, steps, processes, or methods in the work performed; the difficulty in identifying what needs to be done; and the difficulty and originality involved in performing the work.

At Level 4-3, the work includes a variety of duties involving performance of different specialized diagnostic and treatment procedures, methods, and techniques. Decisions about what needs to be done depend on instruments, examination, and treatment procedures, and other variables. Actions taken by the technicians differ with the medical condition of the patient, differences in type of test or treatment ordered by the physician, and differences in patient responses to treatment. The technician must identify and analyze factors related to the equipment operation and patient responses to discern their interrelationships and take action to ensure acceptable results.

In contrast, the work at Level 4-4, typically involves full responsibility for the technical aspects of the specialization and includes a wide variety of duties involving diverse and complex technical problems, e.g., testing, refining and implementing new procedures and developing procedural instructions to insure proper performance of procedures. Decisions involve complicating factors which hinder use of standard procedures and normal alternatives. The work

performed by the technician requires variations of technical factors to accommodate the patient's condition; extending standard test methods; changing conventional methods to produce acceptable results; developing new or revised procedures using standard techniques; or refining existing procedures.

Level 4-3 is met. The appellant's work involves a large number of procedures performed in the clinic and steps and patterns for preparing and caring for the patient and calibrating and adjusting highly technical urological equipment and instruments, such as endoscopic instruments, x-ray, ultrasound, cryosurgical and urodynamic equipment, and various other types. The appellant makes scheduling decisions in response to physician's requests and availability and readiness of equipment. Like Level 4-3, he performs or assists with procedures and monitors patient response to procedures, identifies allergic reaction to drugs and radiological contrast, and makes equipment adjustments as needed. For example, in performing complex urodynamic studies, he sets up the equipment, attaching 20 components which include transducers to monitor electrical activity, makes sure all aspects of the equipment are functioning properly and performs frequent calibrations due the equipment's sensitivity and the patient's condition. He may make adjustments to the equipment to alter acceptable pressure, compensate for a keyboard marking incorrectly, to manipulate the catheters or to run the test as requested by a physician. He determines the patient's condition and adherence to test preparation directions, performs all patient preparation, including insertion of catheter and electrical leads and monitors six bladder activities over the course of two hours. The appellant also interprets a variety of conditions and elements such as patient condition, medication or instrument performance to be sure of test results.

Level 4-4 is not met. Unlike this level, the appellant can refer non-routine technical issues to the attending physician and does not typically encounter the diverse and complex technical problems described at this level or make comparable decisions on procedures for performing work. He makes a variety of equipment adjustments and calibrations and decisions on reliability of the test data, but uses standard procedures and accepted practices in performing or assisting others in performing complex diagnostic tests or treatments.

Level 4-3 is credited for 150 points.

Factor 5, Scope and effect

This factor covers the relationship between the nature of the work, i.e., the purpose, breadth, and depth of the assignment, and the effect of work products or services both within and outside the organization.

At Level 5-2, work involves performance of a variety of specific diagnostic procedures and treatment techniques that represent a significant segment of the total diagnostic and treatment plan for the patient. The work has a significant affect on the accuracy and reliability of further treatment. In contrast, work at Level 5-3 involves performance of a variety of specialized diagnostic and treatment procedures. Positions at this level provide diagnostic and treatment services during regular and recurring critical care situations. The work has a significant impact on the well being of the patient.

Level 5-2 is met. The appellant's work involves performing or assisting a physician in performing a full range of diagnostic tests and procedures, e.g., biopsies, ultrasounds, and urological studies that represent a segment of a patient's diagnostic and treatment plan. Like Level 5-2, the work affects the reliability of test results and provides pertinent medical information for further treatment of the patients. Although the appellant's work contributes to the well being of the patient, the focus of the work, unlike Level 5-3, involves technical assistance to physicians in performing diagnostic procedures. The procedures typically are not performed for independent resolution of problems as in critical care situations.

Level 5-2 is credited for 75 points.

Factors 6 and 7, Personal contacts and Purpose of contacts

Personal contacts include face-to-face contacts and telephone dialogue with persons not in the supervisory chain. Levels described under this factor are based on what is required to make the initial contact, the difficulty of communicating with those contacted, and the setting in which the contact takes place (e.g., the degree to which the employee and those contacted recognize their relative roles and authorities). The purpose of the contacts ranges from factual exchange of information to situations involving significant or controversial issues and differing viewpoints, goals or objectives. The personal contacts that serve as the basis for the level selected for this factor must be the same as the contacts which are the basis for the level selected for Factor 6.

Personal contacts

Level 2 is met. As at this level, the highest level described in the PCS, the appellant's contacts are with patients, patient family members, nursing personnel, both within and outside of the clinic setting, radiology staff, biomedical repair staff, medical and nursing students and resident and attending physicians.

Purpose of contacts

Level a is met. As at this level, the appellant's contacts are primarily to provide information to patients, their family and hospital staff and to coordinate work efforts. Level b is not fully met in that the appellant refers technical problems to the physician or, as pertains to the equipment, to the biomedical staff or diagnostic equipment repair technicians.

The combined factors are credited at Level 2a for 60 points.

Factor 8, Physical demands

This factor covers the requirements and physical demands placed on the employee by the work assignment.

The appellant's work fully meets but does not exceed Level 8-2. At this level, the highest level described in the PCS, work requires regular and recurring physical exertion and includes

walking, frequent bending, reaching and stretching to set up and take apart equipment; lifting and positioning patients; and carrying, pushing, or pulling moderately heavy objects. It may require above average dexterity. His work requires comparable physical exertion, particularly in moving patients onto stretchers, cystoscopy, x-ray, and operating tables, and wheelchairs and in lifting and carrying small to medium sized urological and surgical instruments sets. The appellant uses similar dexterity in handling surgical instruments and supplies without compromising the principles of aseptic technique.

Level 8-2 is credited for 20 points.

Factor 9, Work environment

This factor considers the risks and discomforts in the employee's physical surroundings or the nature of the work assigned and the safety regulations required. Although the use of safety precautions can practically eliminate a certain danger or discomfort, such situations typically place additional demands upon the employee in carrying out safety regulations and techniques.

The appellant's position fully meets but does not exceed Level 9-2. As at this level, the highest level described in the PCS, the appellant has regular and recurring exposure to infections and contagious diseases, odors, and other risks that require special health and safety precautions.

Level 9-2 is credited for 20 points.

Summary

<i>Factor</i>	<i>Level</i>	<i>Points</i>
1. <i>Knowledge required by the position</i>	1-4	550
2. <i>Supervisory controls</i>	2-2	125
3. <i>Guidelines</i>	3-2	125
4. <i>Complexity</i>	4-3	150
5. <i>Scope and effect</i>	5-2	75
6. & 7. <i>Personal contacts/Purpose of contacts</i>	2-a	60
8. <i>Physical demands</i>	8-2	20
9. <i>Work environment</i>	9-2	<u>20</u>
<i>Total Points</i>		1125

A total of 1125 points falls within the GS-6 range, 1105 to 1350 points, according to the Grade Conversion Table in the GS-649 standard.

Evaluation using the GS-621 PCS

Factor 1, Knowledge required by the position

The appellant's position fully meets, but does not exceed, Level 1-3, the highest level described in the PCS. At that level, the work requires knowledge of a body of standardized patient care

and skill, equipment and supply terminology, surgical equipment and instruments, surgical procedure terminology, and standard medical terminology for the human body, physical and emotional reactions. This knowledge enables a nursing assistant to perform procedures such as catheterization, dressing changes, patient charting, setting up equipment and supplies and assisting physicians by and passing them during surgery, and reinforcing proper health care procedures to patient and family members. Like Level 1-3, the appellant uses standard patient care and skill in performing procedures and treatments, such as catheterizing, irrigations, and wound care, patient and diagnostic procedure record keeping and patient/family teaching. The work requires knowledge of established procedures for the set up of the clinic for diagnostic or minor surgical procedures as described at this level. The patient care and assistance with patients during clinical procedures involve recurring assignments which vary in terms of the procedures being performed and patient conditions, but established procedures generally are applicable.

Level 1-3 is credited for 350 points.

Factor 2, Supervisory controls

Level 2-2 is met. As at that level, the appellant carries out recurring assignments, scheduled procedures and physician's prescribed patient treatments independently without specific instructions. Comparable to Level 2-2, the attending physician or specialty clinic nurse is available for unusual problems and the supervisor spot checks work during rounds through the clinic. Level 2-3 is not fully met. This level anticipates that employees set priorities and deadlines for patient care during the course of the day and that the supervisor is available in the hospital but is usually only briefly present during the tour. However, the appellant routinely works as part of a clinical team that includes the physician and registered nurse. Direction and guidance are available for providing patient care and for unusual situations during clinical procedures or minor surgeries.

Level 2-2 is credited for 125 points.

Factor 3, Guidelines

The position meets, but does not exceed, Level 3-2, the highest level described in the PCS. At that level, policies, procedures, and practices are well known by the employee so that reference to the guidelines is rarely necessary. Other guidelines include the tour report, patient care/treatment plan and the patient's medical history. Employees vary the order and sequence of procedures and use judgment in selecting the appropriate application of the guidelines based on the patient's condition and previous instructions. As at Level 3-2, the appellant must use judgment in selecting among and applying the appropriate methods to deal with any situation that would affect the quality and safety of patient care that is provided. The appellant uses various guidelines, such as the nursing manual, universal precautions manual, safety procedures, medical center professional memos, ambulatory care policy and infection control practices. He works within the framework of established procedures which describe the set up for the procedures clinic and anticipates the needs of the physician for specific instruments based on training and experience. Unusual situations or technical issues are referred to the registered nurse in the clinic or the clinic physician.

Level 3-2 is credited for 125 points.

Factor 4, Complexity

The appellant's work meets, but does not exceed, Level 4-2, the highest level described in the PCS. At that level, work consists of duties that involve related steps, processes or methods, requiring the employee to recognize the existence of and difference among a few easily recognized situations. The appropriate actions to be taken or responses to be made differ in such things as the source of information, the kind of transactions or entries or other factual differences. The employee must make choices, such as deciding which personal care task to perform first; selecting the proper instruments or trays for use by the doctor; choosing the appropriate nursing care procedures, and recognizing the differences in patient's diseases and/or illnesses. In each case, the type of nursing care and the type of patient under consideration determine what steps are to be taken.

As at Level 4-2, the appellant's patient care tasks are generally repetitive and involve the recurring use of related procedures which vary somewhat based on differences in procedures and patient characteristics and conditions. Guidelines determine how the procedures clinic is set up and the instruments needed for particular types of procedures. Like Level 4-2, the needs of the patient and prescribed treatment determine the action to be taken or responses to be made.

Level 4-2 is credited for 75 points.

Factor 5, Scope and effect

The appellant's work meets, but does not exceed, Level 5-2, the highest level described in the PCS. At that level, the purpose of the work is to provide nursing care that covers personal patient care, diagnostic support procedures, treatment procedures, patient charting and patient teaching. The work contributes to a base of standard nursing care upon which further nursing care may be planned and/or provided by nurses. As at Level 5-2, the appellant's work in providing basic patient care enables the physicians to perform diagnostic procedures and treatments efficiently and effectively.

Level 5-2 is credited for 75 points.

Factor 6, Personal contacts

The appellant's contacts meet, but do not exceed, those described at Level 6-2, the highest level described in the PCS. At this level, personal contacts are primarily with patients, nursing personnel, appropriate medical staff in the hospital and with the patient's family members. This may include recurring contacts with the patient's family members, nursing personnel within and outside of the various clinics and physicians. Contacts are routine and normally occur in the employee's immediate workplace. As at Level 6-2, the appellant's personal contacts include patients, patients' family members, nursing personnel inside and outside the various clinics and physicians. Contacts are routine and the roles and responsibilities of the parties are easily established.

Level 6-2 is credited for 25 points.

Factor 7, Purpose of contacts

Comparable to Level 7-2, the appellant's personal contacts with patients are to gain the patient's confidence, to explain procedures, and to instruct them on self-care and provide follow up directions. The appellant also has contact with clinic and other medical staff for the purpose of coordinating work efforts. Unlike Level 7-3, the record shows that the appellant's patient contacts do not routinely involve patients who are unusually difficult to care for or communicate with and require skill in influencing and communicating with them.

Level 7-2 is credited for 50 points.

Factor 8, Physical demands

As at Level 8-2, the appellant's work requires him to lift, on a recurring basis, any patient who is unable to get up on the examination table, assist any patient to and from their wheelchair and push carts full of supplies. Further, the appellant is required to maintain a work pace according to the physician's appointment schedule and the number of patients in the clinic. These physical demands, in conjunction with the long periods of time standing, meet Level 8-2. Unlike Level 8-3, the appellant does not have to defend himself against emotionally ill patients.

Level 8-2 is credited for 20 points.

Factor 9, Work environment

At Level 9-2, the work involves regular and recurring exposure to infection and contagious diseases. Special gloves, gowns, or masks are required as safety precautions. As at this level, the appellant works with an extremely ill patient population in the various clinics and have to follow strict safety procedures such as wearing gloves. Unlike Level 9-3, the work environment does not involves a high risk of regular and recurring exposure to potentially dangerous situations such as noxious gases, fumes and explosives or physical attack by patients.

Level 9-2 is credited for 20 points.

Summary

<i>Factor</i>	<i>Level</i>	<i>Points</i>
1. <i>Knowledge required by the position</i>	1-3	350
2. <i>Supervisory controls</i>	2-2	200
3. <i>Guidelines</i>	3-2	125
4. <i>Complexity</i>	4-2	75
5. <i>Scope and effect</i>	5-2	75
6. <i>Personal contacts</i>	6-2	25

7. <i>Purpose of contacts</i>	7-2	50
8. <i>Physical demands</i>	8-2	20
9. <i>Work environment</i>	9-2	<u>20</u>
<i>Total Points</i>		940

A total of 940 points falls within the GS-5 range, 855-1100 points, according to the Grade Conversion Table in the GS-621 PCS.

Summary

Evaluation of the position's medical instrument operation duties results in a GS-6 determination and evaluation of the position's nursing assistant duties results in a GS-5 determination.

Decision

Based on mixed grade principles, the appellant's position is properly classified as GS-640-6. The position title is at the discretion of the agency.