OFFICE OF PERSONNEL MANAGEMENT

MERIT SYSTEMS OVERSIGHT AND EFFECTIVENESS

DALLAS OVERSIGHT DIVISION

CLASSIFICATION APPEAL DECISION

Under section 5112(b) of title 5, United States Code

Appellant: [appellant's name]

Position: Health Technician, GS-640-07
[Position Number]

Organization: [a department]
VA Medical Center
Department of Veterans Affairs
[city, state]

Decision: GS-640-07
(Title at the discretion of the agency)
(Appeal Denied)

OPM decision number: C- 0640-07-01

Approved by:

/s/ Bonnie J. Brandon
Bonnie J. Brandon
Classification Appeals Officer

4/8/97
Date
Copy of decision sent to:

[name and address of appellant's representatives]

[name and address of appellant's servicing personnel office]

[name and address of higher level personnel office]
INTRODUCTION

The appellant is presently assigned to [a department], Veterans Affairs Medical Center, in [city, state]. The agency classified the position as Health Technician, GS-640-07. The appellant requests that her position be classified as Health Technician, GS-640-09. She filed an appeal with this office under the provisions of chapter 51 of title 5, United States Code.

This decision is the final administrative decision of the Government, subject to discretionary review only under the conditions and time limits specified in sections 511.605 and 511.613 of title 5, Code of Federal Regulations, and appendix 4 of the Introduction to the Position Classification Standards.

In 1996, the appellant’s position description was revised to describe duties which the appellant believed had been added or changed over a period of time. As a result of the revision, the appellant’s duties and responsibilities were reviewed and evaluated on July 23, 1996, as documented by the agency on the current position description. The appellant agrees with the accuracy of this position description, and we find it adequate for classification purposes.

POSITION INFORMATION

The appellant primarily functions as an HIV/AIDS counselor with administrative responsibility associated with the coordination and implementation of the Medical Center’s HIV diagnosis and treatment programs. She works with other health care professionals as part of an integrated AIDS team to ensure that optimal education and care are provided.

The major duties and responsibilities of the appealed position are as follows:

- counsels employees and patients identified as being HIV positive or having AIDS (pre- and post-HIV tests);
- draws blood for AIDS testing and teaches universal precautions and proper infusion and catheterization methods;
- educates persons designated as high risk for AIDS;
- attends and participates in yearly conferences, serves on task forces, and conducts in-service sessions and seminars;
- networks and coordinates with community and resource centers involved in HIV counseling for coordinating activities and program development; and
inputs, maintains, and safeguards data contained in immunology packages required by the [city] County Health Department.

SERIES AND TITLE DETERMINATION

The appellant does not question the series or title of her position. We agree with the agency’s allocation of the appellant’s position to the GS-640 Health Aid and Technician Series. This series is designed as a “catchall” for positions involving nonprofessional health and medical work of such generalized, specialized, or miscellaneous nature that no other appropriate series exists. Thus, this series includes “mixed” positions which involve a combination of two or more technical functions characteristic of other technician series in the GS-600 group. Similarly, the appealed position is a mix of administrative, practical nursing, teaching, and counseling duties which appropriately fall within the GS-640 series definition. Titles are not prescribed for positions in the GS-640 series; however, “Health Technician” is the suggested title for positions at grades GS-04 and above. Therefore, Health Technician is an appropriate title for the appealed position.

GRADE LEVEL DETERMINATION

The appellant believes that her position should be evaluated by comparison to the same criteria used to evaluate GS-603 Physician Assistant positions instead of the GS-620 Practical Nurse standard used by the agency to determine the grade level of her position. Because there is no published classification standard for the GS-603 series, the GS-610 Nurse standard is generally used for grading physician assistant positions. While physician assistants are not required to possess and apply a professional knowledge of nursing, their work is sufficiently similar to professional nursing duties that the GS-610 standard can be used by analogy for grading purposes. Among other duties, physician assistants assist physicians in the examination and observation of patients by performing such duties as taking case histories, conducting physical examinations, and ordering laboratory studies during hospital rounds and clinic visits. Their work requires knowledge of specific observation and examination procedures and ability to perform diagnostic and therapeutic tasks. Positions in the GS-610 series require a knowledge of diversified professional concepts and scientific nursing practices gained through the completion of a professional nursing education program and through supplementary education and experience, and the ability to apply such knowledge with judgment and perception. Although the appellant performs some nursing duties such as drawing blood, starting intravenous injections, and assisting patients or families with infusion procedures, these duties are not comparable to the full range of duties performed by GS-603 physician assistants and GS-610 nurses. Because the appellant is a Licensed Vocational Nurse (LVN), her nursing skills are
sometimes used to draw blood, etc., as previously indicated; however, LVN knowledges and skills are not required for the appealed position. Clearly, the appellant's position does not approach the type of work and knowledge required to warrant use of the GS-603 and GS-610 standards for evaluation of her duties and responsibilities.

The standard for Health Aid and Technician, GS-640, does not provide grade level criteria. Therefore, the appellant's position must be classified by reference to standards that are as similar as possible to the subject position with respect to the kind of work performed, qualification requirements of the work, level of difficulty and responsibility, and the combination of classification factors which have the greatest influence on the grade level. We find that two standards meet these criteria: GS-620 and GS-186. The GS-620 standard is used to evaluate the nursing duties. The appellant's counseling and training activities are comparable to those described in the Social Services Aid and Assistant Series, GS-186, which covers nonprofessional positions that provide counseling and guidance to individuals and their families in an assistance program. Work in this series requires effective communication skills in dealing with the individuals serviced. Such skills are similar to the requirements for the appellant's position. Because the GS-186 standard does not contain grading criteria, the user is directed to the GS-187 standard as a source for evaluating duties and responsibilities. Therefore, we use the GS-187 and GS-620 standards for grading purposes.

**Standard for Practical Nurse Series, GS-620**

The GS-620 standard uses the Factor Evaluation System (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. 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 which the employee must understand to do acceptable work and the nature and extent of the skills needed to apply those knowledges.

Level 1-3 requires, in addition to basic knowledge found at the lower level, knowledge reflected in licensure followed by training as a practical or vocational nurse and demonstrated skill and experience to perform a moderately difficult range of practical
nursing care as a team participant (e.g., therapeutic, rehabilitative, and preventive care for patients in various stages of dependency).

Level 1-4 requires the type knowledge described at Level 1-3 plus knowledge of a wide variety of interrelated or nonstandard assignments reflected in licensure as a practical or vocational nurse and broad work experience that demonstrates skill sufficient to resolve a range of problems with responsibility for carrying assignments to completion. Illustrative knowledge and skill of this type assignment are: (a) knowledge of a large body of nursing care procedures, patients’ illnesses and diseases, patients’ charts, nursing care plans and the requirements of the nursing team and skill to provide care to a selected patient load of critically ill patients, and (b) knowledge of the nursing standards and skill sufficient to assess deviations from normal conditions and immediately modify the patient’s nursing care plan with delayed notification to the nurse for concurrence in modification to the plan.

The appellant exercises her knowledge of clinic procedures and current knowledge of the disease to assist patients. She does not render a final medical assessment on patient. However, the appellant requests lab work and uses judgment in determining whether a patient should be sent to the emergency room or the clinic. The nature of her work is providing care and counseling to potentially critically ill patients from intake or detection of the disease until the patient has expired. She uses her knowledge of disease entities to design a treatment plan to meet the needs of each of her patients. For example, the appellant schedules the patients for weekly counseling sessions as needed and follows up with those who fail to meet appointments. During this time the appellant monitors changes in the patient’s condition by closely observing significant changes in behavior or physical condition. Information that the appellant gathers from conferences and seminars regarding medical interventions (e.g., breakthroughs, adverse reactions) is discussed with patients. The knowledges and skills required to perform these duties are analogous to those described at Level 1-4. The requirements for the appealed position do not exceed this level.

Therefore, Level 1-4 is assigned with credit of 550 points.

**Factor 2. Supervisory Controls**

This factor covers the nature and extent of direct and indirect controls exercised by the supervisor, the employee’s responsibility, and the review of completed work.

At Level 2-3, the supervisor makes the patient assignments in the report at the beginning of the tour by defining the patient cases to the employee who is responsible for a patient load of critically ill patients. The employee establishes priorities and deadlines for the patient care without prompting from the supervisor. The supervisor is available to assist with unusual situations which do not have clear precedents.
The appellant independently plans her own work within the boundaries of the program and the needs of the patients. As part of an integrated AIDS team, she coordinates with other health care professionals, develops procedures to carry out her work, and may suggest alternatives to operational procedures. The appellant independently schedules in-house seminars, counseling sessions, and training for alcohol/drug rehabilitation users and other high risk persons. The supervisor periodically evaluates the program as it evolves and is available for consultation when needed. The appellant seeks supervisory assistance in unprecedented circumstances. The supervisory controls for the appellant’s position equate to Level 2-3.

Consequently, Level 2-3 is assigned for this factor, and 275 points are credited.

Factor 3, Guidelines

This factor covers the nature of guidelines and the judgment needed to apply them. Guides used include established procedures and policies, traditional practices, and reference materials.

Guidelines used by the appellant include Federal and State guidelines, conference guidance (e.g., literature, brochures), and automated data processing security and Privacy Act laws. The appellant uses judgment and discretion in dealing with confidential information restricted by Veterans Affairs (VA) policy and the Privacy Act. The appellant uses these guidelines to develop employee and public education programs such as the “Train the Trainer” program. This is a VA staff education program where risk education behavior and patient care for HIV/AIDS patients is taught.

The guidelines and judgment used by the appellant clearly exceed Level 3-2 where guidelines are in the form of familiar ward policies, practices, and assigned procedures and so well known that the employee rarely needs to refer to them. Since Level 3-2 is the highest level described in the standard, comparison of the appellant’s guidelines was made to Level 3-3 as described in the FES Primary Standard.

At Level 3-3, guidelines are available but are not always applicable to the work. The employee uses judgment in interpreting and adapting guidelines such as agency policies, regulations, precedents, and work directions for application to specific cases or problems. The employee analyzes results and recommends changes. The guidelines and judgment used by the appellant match Level 3-3.

Consequently, Level 3-3 with a credit of 275 points is assigned for this factor.

Factor 4, Complexity

This factor covers the nature, number, variety and intricacy of tasks, steps, processes, or methods in the work performed; the difficulty involved in identifying what needs to be done; and the difficulty involved in performing the work.
At Level 4-3, the nature of assignment is illustrated by responsibility for a patient load of critically ill patients which involves independent performance of nursing care functions alone in a hospital ward during one tour. Patient care requires an understanding of and systematic review and study of the patient’s medical/nursing histories, care plans, needs, present condition, illnesses and/or diseases, and precedents established by the nursing care team. Close concentration is required to detect deviations from normal so that care may be given immediately. As patients’ needs change, the employee modifies patient care and the nursing care plan accordingly.

The complexity of the appellant’s work is very similar to that described at Level 4-3. The appellant has responsibility for a support group that meets monthly to learn about the disease (e.g., complications, medications, breakthroughs). For these group settings or individual counseling sessions, the appellant is trained to notice significant changes in her patient’s physical or emotional state. She readily recognizes deterioration and follows up with changes in counseling/treatment plans or makes referrals to other services. The appellant’s work may be complicated by patients refusing medical compliance or the inability to obtain required information on spouses and/or significant partners.

Level 4-3 is assigned for this factor, and 150 points are credited.

**Factor 5. Scope and Effect**

Scope and effect cover 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. Both the scope and effect of this factor must be met for crediting a particular level.

The appealed position meets Level 5-2 where the purpose of the work is to provide nursing care that includes personal care, diagnostic support procedures, treatment procedures, patient charting, and patient teaching. Work at this level contributes to a base of standard nursing care upon which further nursing care may be planned and/or provided by nurses.

The appellant’s work involves treatment procedures that facilitate the work of other medical professionals. The appellant suggests changes in medications and confers with individuals with pharmaceutical knowledge regarding the effects of medications. She orders appropriate laboratory tests based on assessment of changes in the patient’s condition or to obtain baseline data for the treatment plan. Her ability to recognize significant physical changes or human behavior facilitates her work and the work of nurses, physician assistants, and doctors. The appellant also works with the AIDS team on recruiting patients for research by explaining consent forms, reviewing signs and symptoms of disease, and discussing possible adverse effects of experimental procedures.
Level 5-2 is assigned with a credit of 75 points.

Factor 6. Personal Contacts

This factor includes face-to-face contacts and telephone dialogue with persons not in the supervisory chain.

At Level 6-2, personal contacts are with patients, nursing personnel, and medical staff in the hospital and with the patient’s family members. The appellant’s position is a clear match with Level 6-2. Her contacts are with HIV/AIDS patients and their families and other medical staff (e.g., doctors, physician assistants, registered nurses).

Therefore, Level 6-2 is assigned with a credit of 25 points.

Factor 7. Purpose of Contacts

Purpose of personal contacts ranges from factual exchanges of information to situations involving significant issues.

The purpose of the appellant’s contacts is comparable to Level 7-2 where contacts with patients serve to motivate the patient to accept the illness and persuade the patient to follow prescribed regimens. The employee at this level may also demonstrate to the patient how to provide self-care and advise the patient on proper follow-up care. The purpose of the appellant’s contacts with patients is to provide guidance and counseling and to encourage their participation in their treatment plans. Her contacts with family members are for the purpose of motivating the family to accept the patient and his or her illness. The appellant’s contacts with hospital staff members are for the purpose of coordinating work efforts to provide optimal care to patients.

The purpose of contacts for the appealed position does not meet Level 7-3 where the work involves regular and recurring contact with patients who are unusually difficult to care for or communicate with because of their resistant or abusive behavior. At this level, the employee must exercise skill in influencing and communicating with these patients. In contrast, patients and family members with whom the appellant is in contact are usually cooperative in supporting the nursing care plan prescribed for the patient. Further, the appellant and others on the medical staff work in a cooperative manner.

Therefore, this factor is evaluated at Level 7-2 with a credit of 50 Points.

Factor 8. Physical Demands

This factor covers the requirements and physical demands placed on the employee by the work assignment.
At Level 8-1, no special physical demands are required. The work may entail some moving and transporting of light items such as supplies, papers, books, trays, and equipment on a regular and recurring basis. The physical demands of the appealed position meet this level. For example, the appellant attends conferences, seminars, and periodic counseling sessions where lifting of light items such as books, papers, and medical tools is required. Although her work involves some physical activity, it is not to the extent described at Level 8-2 where the work requires regular and recurring bending, lifting, stooping, stretching, lifting and repositioning of patients, or similar activities.

Level 8-1 with a credit of 5 points is assigned to this factor.

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 safety regulations required.

At Level 9-1, work is performed in an environment which involves everyday risks or discomforts requiring normal safety precautions. Work at Level 9-2 involves regular and recurring exposure to infection and contagious diseases where special gloves, gowns, or masks are required as safety precautions.

Generally, the appellant functions in an office setting where she practices and trains others in safety methods. Although the disease associated with her work activities is infectious and critical, her own involvement is limited to nonthreatening physical contact. The appellant’s work environment does not exceed Level 9-1.

Consequently, Level 9-1 with a credit of 5 points is assigned for this factor.

Summary

A total of 1410 points is assigned. This total falls within the GS-07 range (1355-1600) on the grade conversion table found on page 3-19 of the FES Primary Standard in the Introduction to the Position Classification Standards.

Standard for Social Services Series, GS-187

The GS-187 Social Services Series describes positions which require application of specialized program knowledge and service skills in providing assistance to individuals and families. The work described in the standard includes such functions as obtaining background information through interviews, helping individuals identify needs that can be provided by the agency, explaining and encouraging the use of agency and community resources as means of dealing with identified problems, and making referrals to sources of additional help. These functions may be performed either (a) in conjunction with professional social work or (b) in conformity with agency procedural instructions and standards of service. The appellant performs similar work by providing
guidance, assistance, and training to patients and their families on HIV/AIDS treatment and prevention. The appellant is knowledgeable of the community agencies which provide services to the veterans and their families. She is, therefore, able to make referrals to appropriate mental, social, religious, or legal service agencies.

The GS-187 series identifies two classification factors to evaluate the position: (1) nature and range of assigned cases and (2) level of responsibility.

**Nature and Range of Assigned Cases**

This factor recognizes the differences that are related to the range of cases assigned, the skills and knowledges required to perform the work, the difficulty of personal contacts involved, and the guidelines available in policies and regulations.

At the GS-07 level, the social service representative is responsible for making initial and continuing eligibility determinations in all types of cases. The representative works with individuals who may not be well informed of services available to them. Interviews are conducted with clients in order to gather enough information to identify their needs and to support the recommendation of authorization for assistance. The representative makes frequent visits in order to keep informed of the individuals’ circumstances; to provide them with information, advice, and guidance; and to recommend plans of assistance. The social service representative is aware of the various community agencies which provide services to their clients.

The main function for both the appellant and the social service representative is to provide services to individuals, e.g., patients in a hospital or disadvantaged people. Although some aspects of the appellant’s position are similar to that of a social service representative, the emphasis of the two positions is different. The appellant works in a medical related field and is concerned with counseling and educating patients on HIV/AIDS whereas the social service representative is concerned with social and economic problems of disadvantaged people. Both the social service representative and the appellant conduct interviews to obtain background information. The social service representative interviews clients to obtain information which will help determine the need for assistance. The appellant interviews patients and their families to determine their level of knowledge and understanding of HIV/AIDS and thus determine the best way to counsel or educate the patients. The appellant provides information on the program, explains the need for testing, and explains the test results for participants. When the result is positive, she counsels the individual and encourages testing of family members. Both positions at this level provide information on their respective programs. For example, the appellant provides information on the HIV/AIDS prevention and treatment program while the social service representative provides information on the social assistance programs.

Both the social service representative and the appellant are aware of the services provided by community organizations. The representative refers clients to various resources in an attempt to make them more independent and self-supporting; the
appellant refers patients to different group of agencies that can provide further help. The appellant’s assignments are analogous to those described for the GS-07 social service representative.

At the GS-08 level, social service representative positions are distinguished from those at grade GS-07 by additional responsibility for (a) identifying needs and providing individualized assistance and service appropriate to a variety of specific problems in a wide range of cases, and (b) developing recommendations for planned use of agency resources and auxiliary services that are appropriate in difficult and complicated cases. If established plans are not adequate or sufficient to address the client’s needs and concerns, the social service representative recommends suitable programs for supplementary assistance and service. These unusual and complicated program recommendations are developed independently. If plans for diverse programs need modification, the representative suggests appropriate changes and supports the argument for the changes to the supervisor.

By contrast, the appellant’s position does not function at the level described for the GS-08 representative. The appellant works with patients in a single program area, i.e., HIV/AIDS. Most of the patients are men with common concerns. The appellant interviews the patients to assess their understanding of HIV/AIDS and develops treatment plans. She then counsels and educates the patients in this limited area. The appellant may refer patients to other service agencies when they need assistance that extends beyond the type that her program can offer. Although the appellant may recommend other services to the patient, it is the patient’s discretion whether to seek further assistance. The appellant shares general public information regarding the program and occasionally invites participants from other agencies to come in and educate her patients. The appellant’s assignments are not as varied nor as complicated as those envisioned for a GS-08 social service representative.

Level of Responsibility

This factor takes into account the kind of supervision and guidance received and the degree of authority to make decisions that affect individuals and families using assistance.

Typically, GS-07 social service representatives schedule their own work and time to provide appropriate services in working with individuals assigned. They independently interview, gather and provide information, and make referrals. Further, they make home visits frequently enough to know the family and its members; to keep informed of their circumstances; to help them explore possible solutions to their problems; to give information, advice, and encouragement; and to appraise progress. When problems arise, the representative will recommend plans of assistance for the supervisor’s approval. Technical guidance is received through regularly scheduled conferences to evaluate progress of cases and adapt the service to changing situations.
The appealed position compares favorably to the description for the GS-07 social service representative description in that the appellant works independently in planning her daily work activities. The supervisor oversees and assists in the development of the program and is available for consultation. It is unnecessary to have direct supervision at frequent intervals since the patients are already diagnosed as having HIV/AIDS. An initial standard assessment is administered to ascertain patient level of understanding about HIV/AIDS, and laboratory results indicate which patients are infected. The appellant independently answers the patients’ questions, counsels the patients and their families, observes any significant change in their appearance or behavior, and may suggest a change in medications. There is an established system for the appellant’s work, and the supervisor or other team members are available to provide assistance or advice with any unusual situations which may arise.

At the GS-08 level, the social service representative works with considerable independence. Supervision is usually limited to discussing progress of more serious cases in regularly scheduled conferences and a sampling review of case records and reports. If sufficient progress is not made in a case, the representative explores possible solutions and proposes appropriate changes in plans to the supervisor. After proposed plans are discussed and approved, the representative is responsible for carrying out and reporting progress in periodic conferences.

The characteristics of the appellant’s level of responsibility do not meet the GS-08 level. At this level, the representative works with considerable independence in providing assistance and service in a wide range of cases, usually discussing only the more serious and complex cases with the supervisor. This level of independence exceeds that of the appellant who carries out the work in accordance with previous training, instructions, and policies. The appellant discusses unusual situations which do not have clear precedents with the supervisor. Further, the appellant works with an integrated team in developing, evaluating, and modifying the education program. Overall, the appellant’s level of responsibility does not exceed that described for the GS-07 social service representative.

Summary

We find that the appellant’s counseling and teaching duties and supervisory controls are equivalent to the duties and responsibilities and level of supervisory control described for the GS-07 social service representative.

DECISION

The appealed position is properly classified to the GS-640 Health Technician Series at the GS-07 grade level. The title of the position is at the discretion of the agency.