**Classification Appeal Decision**

*Under Section 5112 of Title 5, United States Code*

<table>
<thead>
<tr>
<th>Appellant:</th>
<th>[appellant’s name]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency classification:</td>
<td>Secretary (Office Automation) GS-318-5</td>
</tr>
<tr>
<td>Organization:</td>
<td>U.S. Department of Veterans Affairs Medical Center Anesthesiology Service [activity location]</td>
</tr>
<tr>
<td>OPM decision:</td>
<td>Secretary (Office Automation) GS-318-5</td>
</tr>
<tr>
<td>OPM decision number:</td>
<td>C-0318-05-05</td>
</tr>
</tbody>
</table>

Robert D. Hendler  
Classification Appeals Officer  
3-4-98  
Date
As provided in section 511.612 of title 5, Code of Federal Regulations (CFR), 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’s name]  
[appellant’s address]  
Chief, Classification Section  
U.S. Department of Veterans Affairs Medical Center  
[activity location]  
Deputy Assistant Secretary for Human Resources Management  
U.S. Department of Veterans Affairs  
Washington, DC  20420
Introduction

On November 13, 1997, the Philadelphia Oversight Division of the U.S. Office of Personnel Management (OPM) accepted a classification appeal from [appellant's name]. Her position is classified currently as Secretary (Office Automation), GS-318-5, position description (PD) #5507-0. The appellant, however, believes the classification should be Secretary (Office Automation), GS-318-6. The position is in the U.S. Department of Veterans Affairs Medical Center (VAMC), Anesthesiology Service, [activity location]. We have accepted and decided her appeal under section 5112 of title 5, United States Code (U.S.C.).

General issues

The appellant believes that her PD is not completely accurate in that “key duties are not clearly defined.” In her opinion it does not recognize that she: (1) screens and verifies all anesthesiology resident applications and credentials for completeness, accuracy, and documentation; (2) determines the appropriate Program Grade Year (PGY) for the residents according to VA regulations and if change is needed, informs the parent department at the New York University (NYU) Medical Center; (3) assists anesthesiology residents during their clinical rotation at the VAMC with obtaining computer access, uniforms, and meals when on call; (4) “appoints” residents and staff physicians for Medical Officer of the Day (MOD) positions in anesthesiology service “necessitated by the availability of residents for night duty”; (5) computes the hours worked, and all monies earned each pay period; (6) assists the Chief, Anesthesiology Service in preparing slides using Power Point software; and, (7) compiles the statistics on pre-bed consultations reviewed by the staff on a daily basis.

In her November 6, 1997, appeal letter to OPM, and an earlier March 13, 1997, internal VAMC classification appeal letter, the appellant stressed that because the New York VAMC has been designated the center for excellence for Cardiac and Neurosurgery, there has been a marked increase in Anesthesiology Service workload and staff.

These submissions have raised procedural issues warranting clarification. All positions subject to the Classification Law contained in title 5, U.S.C., must be classified in conformance with published position classification standards (PCS's) of OPM or, if there are no directly applicable PCS's, consistently with PCS's for related kinds of work. Therefore, other methods or factors of evaluation, such as comparison to other positions that may or may not be classified correctly, such as the appellant’s position before the addition of the above enumerated duties and responsibilities, are not authorized for use in determining the classification of a position. PCS grading criteria measure the difficulty, complexity and responsibility of work, and the qualifications required to perform that work. Implicit in the appellant’s rationale is that the increase in the number of staff supported and workload should support the upgrading of her position. The assigning of more work, however, does not necessarily mean the additional work is more difficult and complex.

The appellant has stressed that her PD is not classified correctly. A PD is the official record of the major duties and responsibilities assigned to a position by a responsible management official, i.e., a person with authority to assign work to a position. A position is the combined duties and responsibilities that make up the work performed by an employee. Title 5, U.S.C., section 5106
prescribes the use of these duties and responsibilities, and the qualifications required by these duties and responsibilities, as the basis for determining the classification of a position. The Introduction to the PCS’s (Introduction) further provides that "As a rule, a position is classified on the basis of the duties actually performed." Additionally, 5 CFR 511.607(a)(1), in discussing PD accuracy issues, provides that OPM will decide classification appeals based on the actual duties and responsibilities assigned by management and performed by the employee. The point here is that it is a real operating position that is classified, and not simply the PD.

The application of OPM PCS's must be accomplished within the confines of the position classification theories, principles, and practices established by OPM. The Introduction states that:

Some positions involve performing different kinds and levels of work which, when separately evaluated in terms of duties, responsibilities, and qualifications required, are at different grade levels. . . .

In most instances, the highest level of work assigned to and performed by the employee for the majority of time [emphasis added] is grade-determining. When the highest level of work is a smaller portion of the job, it may be grade controlling only if:

- The work is officially assigned to the position on a regular and recurring basis;
- It is a significant and substantial part of the overall position (i.e., occupying at least 25 percent of the employee's time); and
- The higher level of knowledge and skills needed to perform the work would be required in recruiting for the position if it became vacant.

The classification appeal process is a de novo review that includes a determination as to the duties and responsibilities assigned to the appellant’s position and performed by the appellant, and constitutes the proper application of PCS's to those duties and responsibilities. Our analysis of the position is based on information obtained during a telephone audit with the appellant on January 28, 1998, a telephone interview with her immediate supervisor, [supervisor’s name], Chief, Anesthesiology Service on February 3, 1998, and our independent review and analysis of the entire appeal record. Our interviews with the appellant and her supervisor confirmed that the PD of record contains the major duties and responsibilities performed by the appellant and is hereby incorporated by reference into this decision.
Position information

The appellant serves as the secretary to the Chief, Anesthesiology Service and in addition provides clerical support to the Anesthesiology Service staff. The organization in which she works consists of her direct supervisor, an assistant chief, eight full-time anesthesiologists, three full-time nurse anesthetists, one or two residents and numerous medical officers of the day (MOD’s). (The MOD’s are a pool of contract anesthesiologists from which one is selected for evening duty at the VAMC. Only one MOD is on duty per evening). The appellant serves as receptionist for the Anesthesiology Service and in that capacity provides a channel of communication between the Chief and the Anesthesiology staff. She receives and screens all telephone calls, visitors, and incoming mail. She arranges for the monthly anesthesiology staff conferences, e.g., reserves the conference room, notifies the attendees of the times and dates, and records, types and distributes the minutes of the meetings. She maintains a log of conferences and meeting dates and does follow-up on all action items. The appellant prepares travel documents, and makes hotel reservations, as requested by the staff. She responds to requests for information concerning anesthesiology functions. The appellant is expected to anticipate requests for information and prepare material so that it is immediately available for the Chief’s needs.

The appellant is responsible for obtaining, typing, organizing and filing the proper papers for the appointment of residents, MOD’s, and other service staff. She ensures current licenses are on file for all staff and attending physicians. She serves as primary timekeeper for the Anesthesiology Service. The appellant prepares timekeeping cards for all Anesthesiology Service personnel, and maintains records pertaining to various types of leave. She is responsible for all resident and MOD payroll and timekeeping cards when resident and MOD’s are employed by the Anesthesiology Service. She maintains all files, handbooks, and personnel records for the full-time Anesthesiology Service staff as well as the residents and MOD’s. The appellant prepares a variety of administrative documents in accordance with established procedures. She types all correspondence and other records originating from the professional staff of the Anesthesiology Service. The appellant also types initial and final drafts of interoffice memos, special and recurring reports, meeting minutes, travel orders and vouchers, Notification of Personnel Action (SF 50), VA form 10-2850b, Application for Residents Preliminary Appointment Information, and other necessary forms and documents. The position requires competitive keyboarding skills on a personal computer which includes using WordPerfect 6.0, Excel, Power Point and other software packages. The appellant utilizes a computer for inputting and retrieving data, for documents, reports, letter preparation, and development of presentation materials such as charts, tables, and graphs.

Series, title, and guide determination

The agency determined the appellant’s position is covered by the Secretary Series, GS-318, is titled Secretary (Office Automation), and is graded using the Secretary, GS-318 PCS with which the appellant has not disagreed. The appellant also agreed with the agency’s determination that she performs office automation duties. The Office Automation (OA) Grade Evaluation Guide (OAGEG) states that the OAGEG can be used in combination with other standards or guides to evaluate
positions classified in other series when OA duties, which include word processing, are assigned to those positions. The parenthetical title OA is added to the title of positions when such positions require significant knowledge of office automation systems and a fully qualified typist to perform word processing duties. Based upon our review of the appeal file and our telephone interviews, we concur with the determination that the GS-318 PCS covers the non-OA work of the appellant.

Grade determination

The Secretary Series, GS-318 PCS is written in Factor Evaluation System (FES) format. Positions graded under the FES format are compared to nine factors. Levels are assigned for each factor and the points associated with the assigned levels are totaled and converted to a grade level by application of the Grade Conversion Table contained in the PCS. Under the FES, factor level descriptions mark the lower end; i.e., the floor, of the ranges for the indicated factor level. If a position fails in any significant aspect to meet a particular level in the standard, the next lower level and its lower point value must be assigned unless the deficiency is balanced by an equally important aspect that meets a higher level.

The appellant disagrees with the evaluation of Factor 1, Knowledge Required by the Position, Factor 5, Scope and Effect, Factor 6, Personal Contacts, and Factor 7, Purpose of Contacts. The appellant agrees with her agency’s crediting of Levels 2-3, 3-2, 4-2, 8-1, and 9-1. We reviewed carefully the levels assigned to the other factors by the agency and the accompanying rationale with which the appellant has not taken issue. We found these determinations to be appropriate for Factors 2, 3, 4, 8, and 9 and have so credited the position. Accordingly, our appeal analysis focuses on the evaluation of the remaining factors.

Factor 1, Knowledge required by the position

This factor measures the nature and extent of information or facts which the secretary must understand to do acceptable work and the nature and extent of the skills needed to apply those knowledges. In addition, the extent of knowledge required is related, in part, to the work situation in which the position is found. Consequently, in order to assign a factor level, our analysis includes the determination of both the Knowledge Type (KT) and the Work Situation (WS).

KT-II is defined as knowledge of an extensive body of rules, procedures, or operations applied to clerical assignments, and knowledge of the organization and functions of the office in order to perform the procedural work of the office. This includes knowledge to carry out and coordinate, in a timely and effective manner, many different procedures, each of which might have numerous steps, such as all of those needed to: (1) obtain and monitor a full range of office support services such as printing, maintenance, and supply services; (2) request various types of personnel, training actions or services; and, (3) prepare a wide variety of recurring reports and documents from information obtained from staff, files, and other sources.
KT-III is defined as a level of knowledge which includes all of the knowledge included in KT-II with the additional requirement that the incumbent possess knowledge of duties, priorities, commitments, policies, and program goals of the staff sufficient to perform nonroutine assignments such as: independently noting and following-up on commitments made at meetings and conferences by staff members; shifting clerical staff in subordinate offices to take care of fluctuating workloads; or locating and summarizing information from files and documents when this requires recognizing which information is or is not relevant to the problem at hand. The secretary is fully responsible for coordinating the work of the office with other offices, and for recognizing the need for such coordination in various circumstances, which may include advising secretaries in subordinate organizations concerning such matters as the information to be provided by the subordinate organizations for use in conferences and reports.

The PD of record, our fact finding, and work samples provided at our request, confirmed that the position reflects the application of skills and knowledges that minimally meet the intent of KT-III. These include knowledge of the duties, priorities, and commitments of the staff sufficient to arrange travel and accommodations; prepare all types of documents and forms incident to office personnel administration; and ability to search and locate records and information needed for immediate response or for later action by the supervisor. The appellant is responsible for maintaining the office record system in accordance with VAMC requirements; preparing a wide variety of recurring reports by extracting information from the office automated systems; applying knowledge of the work of the office sufficient to screen requests for information, personally provide authorized information from files and records, advise on established procedures, and refer nonroutine requests to the appropriate staff member. She applies knowledge of standard processing procedures and formats, and the distribution and retention policies for correspondence or reports produced.

The appellant is required to independently deal with patients and/or their families on issues that do not warrant attention by professional staff members, e.g., escorting patients and/or family members to the lounge areas, directing them to the cafeteria and restroom facilities, and providing general information concerning the operation of the Anesthesiology Service. She notifies staff members on more serious patient requests, questions, or concerns. Based on the appeal record, we find the growth of the office staff and program functions stressed by the appellant in her appeal rationale support the conclusion that work entailing the application of KT III currently occupies more than 25 percent of the appellant’s work time.

The position does not require performance as required in KT-IV. The PCS states that employees at this level must have as a continuing requirement a basic foundation of administrative concepts, principles, and practices sufficient to perform independently such duties as eliminating conflict and duplication in extensive office procedures; determining when new procedures are needed; systematically studying and evaluating new office machines and recommending acceptance or rejection of their use; studying the clerical activities of the office and subordinate offices and recommending a specific restructuring of the way activities are carried out; skill in adapting policies or procedures to emergency situations and establishing practices or procedures to meet new situations; and skill in recognizing how and when certain policies, procedures, or guidelines will be
confusing to others. In addition, the work requires a comprehensive knowledge of the supervisor's policies and views on all significant matters affecting the organization that would enable the secretary to perform duties such as: developing material for supervisor's use in public speaking engagements, including developing background information and preparing the outline for speeches; and, briefing or advising staff members or persons outside the organization on supervisor's views on current issues facing the organization, e.g., views that a proposed reorganization would increase the effectiveness of the program because it reduces some administrative burdens.

The position does not require the incumbent to do studies or to make significant adaptations to current procedures. The limited size of the Anesthesiology Service has a restricting impact on the knowledge and skill required for performing clerical and administrative support duties, e.g., there are no clerical activities and other administrative support program areas in subordinate offices to study, and the limited size of the Anesthesiology Service would not require knowledge of such matters as major program procedural changes or extensive organizational changes for the size and scale of the organization supported at KT-IV.

To complete the analysis of Factor 1, the WS in which the employee works must be considered. The WS is defined by three levels: A, B, and C. This element measures the complexity of the clerical and administrative demands placed on the secretarial position. The PCS states that in WS-A "although the organization may include several subordinate sections or sub-groups, the employee's supervisor directs the staff primarily through face-to-face meetings, and internal procedural and administrative controls are simple and informal." Work Situation B, however, is one that has "a system of formal internal procedures and administrative controls, and a formal production or progress reporting system. Coordination among subordinate units is sufficiently complex as to require continuous attention."

Also at WS-B are organizations described at WS-A in terms of internal coordination when they have extensive responsibility for coordinating work outside of the organization and the co-ordination of that work requires procedural and administrative controls equivalent to those typical of WS-B. Interpretive guidance on the GS-318 PCS indicates that organizations which potentially reflect these characteristics include Congressional liaison offices, public affairs' offices, and offices of general counsel that have extensive contact outside organizations, and organizations at higher levels within the agency.

The incumbent reports directly to the Chief, Anesthesiology Service. The Anesthesiology Service is composed of the appellant, the Chief, Anesthesiology Service, an assistant chief, eight full time physicians, three nurse anesthetists, two rotating residents and numerous part-time MOD's. Based on the organization chart there are no subordinate units. The systems and procedures for administration are routine and generally informal. The supervisor, who is located on-site, directs the staff through face-to-face contacts.

The PCS states that WS-A covers organizations that are small and of limited complexity. Although the organization may include several subordinate sections or subgroups, the employee's supervisor
directs the staff primarily through face-to-face meetings. Internal procedures and administrative controls are simple and informal. Within the supervisor’s organization, there are few complicated problems of coordination requiring formal procedures and controls for adequate solution.

This is in contrast to the example at WS-B in which the staff is organized into subordinate segments which may in turn be further divided. Direction of the staff is exercised through intermediate supervisors, and the subordinate groups differ from each other in such aspects as subject matter, functions, relationships with other organizations, and administrative requirements in ways that place demands upon the secretary that are significantly greater than those described in WS-A. The organization of the Anesthesiology Service and the work of the appellant does not meet the requirements for WS-B.

With the combination of KT-III and WS-A, the position is credited properly at Level 1-3 (350 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. Only the effect of properly performed work is considered.

We find that the scope and purpose of the clerical and administrative support work performed by the appellant compare closely to Level 5-2. At Level 5-2, the work performed affects the accuracy and reliability of further processes accomplished by the staff. In addition to the routine processes found at Level 5-1, e.g., timekeeping, preparing correspondence, referring callers, maintaining files, preparing reports, and other functions, the appellant also allocates a significant portion of the work time, to duties that reflect the performance of a wide range of routine administrative and clerical work supporting the accuracy and reliability of further processes found at Level 5-2. These functions include arranging meetings, coordinating administrative support for residents and MOD’s, and providing routine patient and family support services.

The position does not meet Level 5-3 in that the work does not require that the appellant “modify and devise methods and procedures that significantly and consistently affect the accomplishment of the mission of the office.” The appellant does not “appoint” residents and staff physicians for MOD positions in anesthesiology. She schedules or makes appointments for the residents at the direct request of the Service Chief. The appellant’s responsibility for the residents’ payroll extends to inputting information into the system after calculations of the number of hours worked by the hourly rate. The determinations of the PGY levels are done by the residency program at NYU, not at the Anesthesiology Service. Before the data is entered into the system, the PGY levels are verified by the Chief, Anesthesiology Service. As discussed above, the work is preponderantly performed within the parameters of defined methods, procedures, and internal policies. Additionally, the appellant is not required, on a regular and recurring basis and for a sufficient portion of the time for classification purposes, to “identify and resolve various problems and situations that affect the orderly and efficient
flow of work in transactions with parties outside the organization." This work does not entail the depth and breadth of problem solving and similarly significant mission impact found at Level 5-3. Consequently, the position is evaluated properly at Level 5-2 (75 points).

**Factor 6, Personal Contacts**

This factor includes face-to-face contacts and telephone and E-mail correspondence with persons not in the supervisory chain. The levels for this factor are based on what is required to make the initial contact, the difficulty in communicating with those contacted, and the setting in which the contacts take place, e.g., the degree to which the employee and those contacted recognize their relative roles and authorities.

The PD indicates that contacts include professional and nonprofessional employees of the anesthesiology, medical, and surgical services; high level officials both within the agency and other agencies who deal with the Anesthesiology Service on a wide variety of matters. Our fact finding revealed the appellant has contact with Bellevue Hospital and New York University Medical Centers. Contacts are maintained with patients and family members of patients and various sales representatives. The contacts are performed within the moderately structured setting of Level 6-2, e.g., personal contacts occur at the employee's work place, and are generally routine, although the role and authority of each party may need to be clarified.

The position does not meet the intent of Level 6-3 which includes contacts with individuals or groups from outside the employing organization in a moderately unstructured setting, e.g., contacts are not established on a routine basis requiring the secretary to identify and locate the appropriate person to contact. The purpose and extent of each contact are different and the role and authority of each party must be identified and developed during the course of the contacts, e.g., attorneys, contractors, the news media, or public action groups, when the office deals with them on a variety of issues. The record does not reflect that appellant’s contacts with persons outside the agency are on the diversity of matters or with the difficulty of establishing roles and authorities found at Factor Level 6-3. Accordingly, this factor is evaluated properly at Level 6-2 (25 points).

**Factor 7, Purpose of Contacts**

This factor measures the purpose of the contacts made with the contacts discussed in Factor 6. The purpose of personal contacts can range from strictly exchanges of factual information to resolving problems affecting the efficient operation of the office. The purpose of the contacts that serve as a basis for this factor must be the same as the contacts that are the basis for the level awarded for Factor 6.

In addition, the appellant obtains, clarifies and gives facts and information typical of Level 7-1, e.g., telephone and receptionist services. The purpose of her contacts is to plan, coordinate and expedite the work of the Chief of Anesthesiology Service including the rotations of residents and medical students; to ensure good public relations with the general public, patients and their family members;
to give and obtain information; to schedule meetings or arrange travel; and to ensure that correspondence and reports are completed promptly, accurately and submitted by the staff on time and in the proper format. The contacts outside the office are to provide, exchange, or obtain information directly related to the work. This fully meets, but does not exceed, Level 7-2 which is the highest level described in the GS-318 PCS. Accordingly, the position is evaluated properly at Level 7-2 (50 points).

Summary of Secretary Series, GS-318

In summary, we have credited the appellant’s position as follows:

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<th>Factor</th>
<th>Level</th>
<th>Points</th>
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<tr>
<td>1. Knowledge required by the position</td>
<td>WS-A, KT III 1-3</td>
<td>350</td>
</tr>
<tr>
<td>2. Supervisory controls</td>
<td>2-3</td>
<td>275</td>
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<tr>
<td>3. Guidelines</td>
<td>3-2</td>
<td>125</td>
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<td>4. Complexity</td>
<td>4-2</td>
<td>75</td>
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<tr>
<td>5. Scope and effect</td>
<td>5-2</td>
<td>75</td>
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<tr>
<td>6. Personal contacts</td>
<td>6-2</td>
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<tr>
<td>7. Purpose of contacts</td>
<td>7-2</td>
<td>50</td>
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<tr>
<td>8. Physical demands</td>
<td>8-1</td>
<td>5</td>
</tr>
<tr>
<td>9. Work environment</td>
<td>9-1</td>
<td>5</td>
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<tr>
<td><strong>Total points:</strong></td>
<td><strong>985</strong></td>
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The total of 985 points falls within the GS-5 grade level point range of 855-1,100 points on the Grade Conversion Table in the GS-318 PCS.

Our analysis of the office automation duties by application of the OAGEG results in a lower grade level than the GS-318 work and, therefore, does not impact the final grade level worth of the position.

**Decision**

Based on the above analysis, we find the appellant’s position is classified properly as Secretary (Office Automation), GS-318-5.