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

Appellant: [The appellant]

Agency classification: Nurse Educator
GS-610-10

Organization: [The appellant's organization]

OPM decision: Nurse Educator
GS-610-10

OPM decision number: C-0610-10-01

Carlos A. Torrico
Classification Appeals Officer

May 24, 2000
Date
As provided in section 511.612 of title 5, Code of Federal Regulations, this decision constitutes a certificate that is mandatory and binding on all administrative, certifying, payroll, disbursing, and accounting officials of the government. The agency is responsible for reviewing its classification decisions for identical, similar, or related positions to ensure consistency with this decision. There is no right of further appeal. This decision is subject to discretionary review only under conditions and time limits specified in the *Introduction to the Position Classification Standards*, appendix 4, section G (address provided in appendix 4, section H).

**Decision sent to:**

**Appellant:**

[The appellant’s address]

**Agency:**

[The appellant’s servicing personnel office]  
U.S. Department of Navy

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Introduction

On November 1, 1999, the San Francisco Oversight Division of the U.S. Office of Personnel Management (OPM) received a classification appeal from [the appellant]. Her position is currently classified as Nurse Educator, GS-610-10. However, she believes her position should be graded at the GS-11 level. Prior to appealing to OPM, [the appellant] filed an appeal with her agency. In a letter to her dated August 20, 1999, the agency sustained the current classification. The position is located in the [appellant’s organization and installation]. We have accepted and decided the appeal under section 5112 of title 5, United States Code (U.S.C.).

General issues

The appellant states that Nurse Educator positions are typically graded GS-11 and requested that her position be classified at that level. She cites OPM form 1170/10 and job announcements from USAJOBS as supporting evidence. The appellant also states that during the agency’s evaluation of her position she was not given credit for her certifications in pediatrics, lactation and diabetes.

By law, we must classify positions solely by comparing their duties and responsibilities to OPM standards and guidelines (5 U.S.C. 5106, 5107, and 5112). Since comparison to standards and guidelines is the exclusive method for classifying positions, we cannot compare the appellant’s position to forms, job announcements, or other positions as a basis for deciding the appeal. Therefore, we have considered the appellant’s statements only insofar as they are relevant to making that comparison.

Qualifications are considered in classifying positions. However, these are qualifications required to perform current duties and responsibilities, not qualifications that appellants personally possess. Therefore, we could not consider the appellant’s personal qualifications such as certifications, except insofar as they were required to perform her current duties and responsibilities. To the extent that they were needed for this purpose, we carefully considered them along with all other information furnished by the appellant and her agency.

This appeal decision is based on a careful review of all information furnished by the appellant and the agency. In addition, to help decide the appeal an Oversight Division representative interviewed the appellant and her immediate supervisor by telephone. Both the appellant and the supervisor have certified to the accuracy of the appellant’s official position description (PD) number QKM8057.

Position information

The appellant provides education and intervention programs to [the appellant’s installation] beneficiaries with chronic and acute illnesses. Her major responsibilities include assessing health education needs of patients and their families, coordinating health education classes for patients and staff, collaborating with clinical staff on health education assessments, and planning and implementing evaluations. She also provides limited supervision over enlisted personnel
and functions as team leader for activities in the [appellant's organization] and the Health Promotion Resource Center.

The appellant’s PD, results of our interviews, and other material of record furnish much more information about her duties and responsibilities and how they are performed.

**Series, title, and standard determination**

The agency has classified this position in the Nurse Series, GS-610, and the appellant does not disagree. We concur with the agency’s determination. As stated in the classification standard for the Nurse Series, GS-610 (dated June 1977), that series covers positions requiring professional knowledge of nursing that involve providing care to patients in hospitals, clinics, occupational health units, homes, schools and communities; administering anesthetic agents and supportive treatments to patients undergoing surgery or other medical procedures; promoting better health practices; teaching; performing research in one or more phases of the field of nursing; or consulting and advising nurses who provide direct care to patients. Positions like the appellant’s that are primarily concerned with training or teaching are titled Nurse Educator. The GS-610 standard contains appropriate grading criteria that we have applied to the appellant’s position.

In addition to her training and teaching responsibilities, the appellant’s position also involves limited supervisory/leader responsibilities. She is the only civilian worker in the [the appellant’s organization] and is considered the “Division Officer” with limited supervisory responsibilities over one military petty officer and up to three military corpsmen. Our fact-finding disclosed that currently these duties only occupy between 10% to 20% of her work time, and they are expected to diminish to 10% after a temporary staffing problem within the Division is resolved. In order to be evaluated under the General Schedule Supervisory Guide (GSSG), a position’s supervisory duties must constitute a major duty occupying at least 25% of the position's time. The appellant’s supervisory duties do not meet that criterion; therefore we have not evaluated them in this decision.

The appellant’s PD states that for 20% of her time she functions as a team leader, assuming responsibility for directing activities in the [appellant’s organization] and the Health Promotion Resource Center. However, these duties do not meet the coverage requirements for application of the General Schedule Leader Grade Evaluation Guide (GSLGEG). According to the PD, her “leadership” duties are more concerned with providing leadership as a health educator in her assigned program including consulting with medical staff, developing and revising nursing care plans, preparing plans of instruction for the staff, and participating in quality improvement multi-disciplinary teams. These duties do not encompass those typically performed in positions evaluated by application of the GSLGEG where the team leader ensures that work assignments of the other employees of the team are carried out by performing the range of duties described in the GSLGEG.
Grade determination

The GS-610 standard uses the Factor Evaluation System (FES) that 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 at a higher level.

Our evaluation with respect to the nine FES factors follows:

Factor 1, Knowledge required by the position – Level 1-6, 950 points

Factor 1 measures the nature and extent of information or facts which a nurse must understand to do acceptable work (e.g., steps, procedures, practices, rules, policies, theories, principles and concepts) and the nature and extent of the skills needed to apply that knowledge. To be used as a basis for selecting a level under this factor, knowledge must be required and applied.

At Level 1-6 (described on pages 13-14 of the standard), positions require professional skills and knowledge of established concepts, principles and practices to perform professional nursing assignments of moderate difficulty requiring training equivalent to an educational program leading to a bachelor's degree and additional training or experience in assessing the conditions of patients, in providing nursing care, and in advising on health care needs, all with full consideration of mental, emotional, cultural, social and physical factors.

The knowledge and skills required of the appellant to perform her assigned duties and responsibilities best meets Level 1-6. Like Level 1-6, the appellant's position requires professional knowledge and skills in nursing principles, practices and procedures required to make independent judgments regarding health education needs of patients and their families, including implementation and assessment of plan of care for beneficiaries, review and evaluation of teaching material for educational adequacy, and assessment of effectiveness of group educational programs in meeting desired health outcomes and nursing interventions of adult, geriatric and pediatric patients. In crediting the appellant’s position under Level 1-6, her knowledge and certifications as a pediatrics and lactation specialist, and as a diabetic educator, demonstrates the type of “additional training or experience” typical of this level. That knowledge is applied in assessing the conditions of her pediatric or diabetic patients when she provides advice on health care needs, or implements health education plans.

At Level 1-7 (page 14), positions require professional knowledge of a wide range of nursing concepts, principles, and practices to perform highly specialized nursing assignments of advanced nature and considerable difficulty requiring extended specialized training and experience. Illustrations of highly specialized nursing assignments include initiating and modifying selected therapies, planning and evaluating local health delivery systems, and recommending, administering and managing anesthesia for patients undergoing surgical procedures.
The knowledge and skills required by the appellant’s assignments do not meet Level 1-7. While the appellant may occasionally be assigned patients to educate who have slightly more complex chronic disease conditions, the majority of her clients have diseases which are less complex and are similar in nature and condition. Likewise, the training courses provided by the appellant relate to limited chronic disease conditions (i.e., diabetes, asthma, CVD, or fibromyalgia) for which much published education material, intervention resources, and established monitoring procedures are available. Thus, while professional nursing principles, practices and procedures are required by the position to develop and implement health educational plans, this position does not require the appellant to have knowledge of a wide range of nursing concepts, principles, and practices to perform highly specialized nursing assignments of advanced nature. Unlike Level 1-7, her position does not require extended specialized training and experience to compile training material, and to deliver intervention education programs and monitor the success of such programs.

This factor is evaluated at Level 1-6 and 950 points are credited.

*Factor 2, Supervisory controls - Level 2-4, 450 points*

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

At level 2-4 (page 16), the supervisor sets overall objectives and resources available, and the nurse is an expert who plans and performs work independently, resolves most conflicts, and coordinates with others on teams and in communities. The nurse and supervisor consult on work and develop decisions together. Work is reviewed for effectiveness in meeting requirements.

The appellant’s position fully meets Level 2-4. Like Level 2-4, she independently plans and carries out her work, and makes nursing judgments to provide comprehensive care within the framework of established policies. Although work is done independently, it is done under the consultative guidance of her supervisor. Work accomplishments are monitored for effectiveness in meeting requirements and adherence to professional standards established by her supervisor.

At level 2-5 (pages 16-17), the supervisor provides administrative direction with assignments in terms of broadly defined missions or functions. The nurse has responsibility for planning, designing, and carrying out programs, projects, studies, or other work independently. Results of the work are considered as technically authoritative and are normally accepted without significant change. If the work should be reviewed, the review concerns such matters as fulfillment of program objectives, effect of advice and influence of the overall program, or the contribution to the advancement of technology. Recommendations for new projects and alteration of objectives are usually evaluated for such considerations as availability of funds and other resources, broad program goals or national priorities.

This position does not fully meet Level 2-5. Although the appellant has responsibility for planning, designing, and carrying out programs, projects, or other work independently, she does so under the consultative guidance of the supervisor. Our fact-finding disclosed that while the supervisor may set broad objectives for some assignments, like Level 2-4 the appellant and
supervisor usually consult on such assignments and arrive at final decisions together. Thus, unlike Level 2-5 where the supervisor provides administrative direction with assignments in terms of broadly defined missions or functions, the appellant’s supervisor provides consultative guidance and administrative direction within a framework of established policies.

This factor is evaluated at Level 2-4 and 450 points are credited.

**Factor 3, Guidelines - Level 3-3, 275 points**

This factor covers the nature of guidelines and the judgment necessary to apply them.

At Level 3-3 (page 18), guidelines are available but are not completely applicable to every situation likely to be encountered. The professional nurse uses judgment in interpreting and, with some patient situations, adapting guidelines.

Similar to Level 3-3, a variety of guidelines are available for use by the appellant. These guidelines include but are not limited to Standards of Nursing Practice, NAVHOSP polices, regulations, procedure manuals, physician’s orders, BUMED directives, instructions specific to the assigned area, and standard recommended practices from various chronic or acute disease foundations/associations. However, guidelines do not provide specific instructions for every situation. In such cases, initiative, judgment, and resourcefulness are required to interpret, apply and modify guidelines to determine the appropriate action.

At Level 3-4 (page 18), general administrative policies and precedents exist, but are of only limited use in performing the work. The nurse uses initiative and resourcefulness in deviating from traditional methods, or in researching trends and patterns to develop new methods, criteria, or proposed new policies.

Level 3-4 is not met because guidelines for performing the appellant’s work are not confined to only general administrative policies and precedents, nor are they of limited use in performing her assignments. While the appellant uses initiative and resourcefulness to interpret, apply or modify guidelines to determine appropriate actions, she does not use initiative and resourcefulness to deviate from traditional methods or research trends and patterns to develop new methods, criteria, or proposed new policies.

This factor is evaluated at Level 3-3 and 275 points are credited.

**Factor 4, Complexity - Level 4-4, 225 points**

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 4-4 (page 20), the nurse performs independent assignments. The assessment of patient conditions includes, for example, interpreting physical examination and laboratory reports,
developing nursing plans and evaluating need for improved health care. The work requires making decisions concerning the implementation of data, and planning and refining methods.

Similar to Level 4-4, the appellant independently applies professional knowledge to coordinate the patient’s medical and nursing regimens, identify patient’s health care needs, interpret medical orders and clinical laboratory reports, develop education plans, initiate nursing interventions, and evaluate response to care. The appellant develops an in-house training program for a limited number of hospital-wide training programs based on staff interest or knowledge needs.

At Level 4-5 (page 20), the work includes varied duties requiring many different and unrelated processes and methods applied to a broad range of activities or substantial depth of analysis. Decisions regarding what needs to be done include major areas of uncertainty in approach, methodology, or interpretation and evaluation processes resulting from such elements as continuing changes in nursing programs, technological developments in the nursing or medical field, unknown phenomena, or conflicting requirements. The work requires originating new techniques, establishing criteria, or developing new information.

The appellant’s work does not meet Level 4-5. The assigned work does not require originating new techniques or establishing criteria. Decisions regarding what needs to be done in this position do not involve major areas of uncertainty in approach, methodology, or interpretation and evaluation processes resulting from continuing changes in nursing programs, unknown phenomena, or conflicting requirements.

This factor is evaluated at Level 4-4 and 225 points are credited.

**Factor 5, Scope and effect - Level 5-3, 150 points**

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 the work products or services both within and outside the organization.

At Level 5-3 (page 21), the purpose of the nurse's work is to plan and provide nursing care for patients. The work affects the physical and psychosocial well being of the patients and of their families.

At Level 5-4 (pages 21-22), the purpose of the work is to establish criteria and assess effectiveness of patient treatment. The product affects a wide range of agency activities or how the agency is perceived or regarded by the community or population served.

Similar to Level 5-3, the appellant plans and provides quality health care and education for patients and their families, contributing to the physical, social well being of the staff, patients, and patients’ families. The appellant’s position does not meet Level 5-4 because the purpose of the appellant’s work is not to establish criteria and assess effectiveness of patient treatment, but rather to determine the appropriate educational needs of patients and staff. Also, the work product does not affect a wide range of agency activities.

This factor is evaluated at Level 5-3 and 150 points are credited.
Factor 6, Personal Contacts - Level 6-2, 25 points

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

At Level 6-2 (page 23), personal contacts are with patients and their families, and/or employees in the agency outside the immediate organization.

At Level 6-3 (page 23), personal contacts are with individuals or groups from outside the employing agency in a moderately unstructured setting (e.g., the contacts are not established on a routine basis; the purpose and extent of each contact is different and the role and authority of each party is identified and developed during the course of the contact). Typical of contacts at this level are those with persons in their capacities as tribal officials, manufacturers, contractors, professors, attorneys, scientists, representatives of professional or trade organizations, the news media, and organized or ad hoc public action groups.

The appellant’s position meets Level 6-2, but falls short of Level 6-3. Like Level 6-2, her contacts are primarily with patients and their families, as well as professional and non-professional employees in the agency working outside her immediate organization. Unlike Level 6-3, although the appellant occasionally has contacts with persons outside the employing agency, (e.g., drug manufacturers), this is not on a regular and recurring basis, and in contrast to the higher level, her contacts are typically made in a structured setting.

This factor is evaluated at Level 6-2 and 25 points are credited.

Factor 7, Purpose of Contacts - Level 7-3, 120 points

In General Schedule occupations, purpose of personal contacts ranges from factual exchanges 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 that are the basis for the level selected for Factor 6.

At Level 7-3 (page 24), the purpose is to influence or motivate persons or groups. Persons contacted may be fearful or hesitant requiring great skill in approaching the person or group to obtain the desired effect.

Level 7-3 is fully met as contacts with patients and family members are for the purpose of providing and promoting health through teaching, counseling, persuading, encouraging and motivating them to care for themselves.

At Level 7-4 (page 24), the purpose is to justify, defend, negotiate, or settle matters involving significant or controversial issues. Work at this level usually involves active participation in conferences, meetings, hearings, or presentations involving problems or issues of considerable consequence or importance. The persons contacted typically have different viewpoints, goals, or
objectives requiring convincing them, arriving at a compromise solution, or considering suitable alternatives.

Level 7-4 is not met. The purpose of contacts in this position is not to justify, defend, negotiate, or settle matters involving significant or controversial issues.

This factor is evaluated at Level 7-3 and 120 points are credited.

**Factor 8, Physical Demands - Level 8-2, 20 points**

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

At Level 8-2 (page 25), the work requires some physical exertion such as long periods of standing; walking over rough, uneven, or rocky surfaces; recurring bending, crouching, stooping, stretching, reaching, or similar activities; recurring lifting of moderately heavy items such as typewriters and record boxes; or occasional lifting of heavy items (over 50 pounds). The work may require specific, but common, physical characteristics and abilities such as above average agility and dexterity.

The physical demands on the appellant meets Level 8-2 since the work requires some physical exertion such as long periods of standing during training sessions, recurring bending, crouching, stooping, stretching, reaching or similar activities; recurring lifting of moderately heavy items such as audiovisual equipment and record boxes; or occasional lifting of heavy items (over 50 pounds) or transporting of patients. When visiting shipyards to conduct health fair education programs, she may walk over rough or uneven surfaces. The work may require specific, but common, physical characteristics and abilities such as above average agility and dexterity.

At Level 8-3 (page 25), the work requires considerable and strenuous physical exertion such as frequent climbing of tall ladders, lifting heavy objects over 50 pounds, crouching or crawling in restricted areas, and defending oneself or others against physical attack.

Level 8-3 is not met as the appellant’s work does not require considerable and strenuous physical exertion such as frequent climbing of tall ladders, lifting heavy objects over 50 pounds, crouching or crawling in restricted areas, or defending oneself or others against physical attack.

This factor is evaluated at Level 8-2 and 20 points are credited.

**Factor 9, Work Environment - Level 9-2, 20 points**

This factor considers the risks and discomforts that may be imposed by various physical surroundings or job situations.

At Level 9-2 (page 25), the work involves moderate risks or discomforts which require special safety precautions, e.g., working with risk of exposure to contagious disease, radiation, or
infection or in working with emotionally disturbed patients. Precautions are routine for nearly all situations. Nurses may be required to use protective clothing or gear.

At Level 9-3 (pages 25-26), the work environment involves high risks with exposure to potentially dangerous situations or unusual environmental stress that require a range of safety and other precautions, where conditions cannot be controlled.

The appellant’s work environment is evaluated at Level 9-2. Like that level, hazards and discomforts are those usually found in a clinical setting involving moderate risks requiring special safety precautions. Health promotion activities may also take place in various indoor and outdoor facilities and onsite Navy work centers including shipboard. Clinical environment can involve risk of exposure to potentially dangerous situations and health hazards from in-house patients. However, unlike Level 9-3, the appellant’s clinical work environment does not involve unusual environmental stress or risk requiring a range of safety and other precautions where conditions cannot be controlled. This factor is evaluated at Level 9-2 and 20 points are credited.

Summary

In summary, the appellant’s position is evaluated using the GS-610 standard as follows:

<table>
<thead>
<tr>
<th>Nurse Series, GS-610 (dated June 1977)</th>
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<tbody>
<tr>
<td>Factor</td>
</tr>
<tr>
<td>1. Knowledge required by the position</td>
</tr>
<tr>
<td>2. Supervisory controls</td>
</tr>
<tr>
<td>3. Guidelines</td>
</tr>
<tr>
<td>4. Complexity</td>
</tr>
<tr>
<td>5. Scope and effect</td>
</tr>
<tr>
<td>6. Personal contacts</td>
</tr>
<tr>
<td>7. Purpose of contacts</td>
</tr>
<tr>
<td>8. Physical demands</td>
</tr>
<tr>
<td>9. Work environment</td>
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<tr>
<td>Total Points:</td>
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The appellant’s position warrants 2235 total points, falling within the GS-10 range (2105-2350). Therefore, in accordance with the grade conversion table on page 12 of the standard, the position is properly graded at GS-10.

Decision

The appellant’s position is properly classified as Nurse Educator, GS-610-10.