

STAFFING

1. **REASON FOR ISSUE:** To issue Department of Veterans Affairs (VA) procedures regarding staffing and recruitment.
2. **SUMMARY OF CONTENTS/MAJOR CHANGES:** This handbook contains mandatory VA procedures on appointment and advancement of full title 38 occupations. The pages in this issuance replace the corresponding page numbers in VA Handbook 5005, Staffing. Revised text is contained in [brackets]. This change will be incorporated into the electronic version of VA Handbook 5005, Staffing, that is maintained on the [Office of the Chief Human Capital Officer website](#) and [VA Publications website](#). Significant changes include:
 - a. Elimination of Professional Standards Boards for title 38 occupations.
 - b. Changes in approval coordination for facility chief of staff nominations.
 - c. Updated position titles for Nurses and Advanced Practice Registered Nurses.
 - d. Clarification of the maximum number of hours part-time and intermittent employees can work during a calendar year.
 - e. Updated procedures for conducting mid-probationary periodic reviews.
 - f. Updated procedures for the recruitment, appointment, advancement, change in assignment, and reassignment of Nurses and Advanced Practice Nurses in assignments at grades IV and V.
 - g. Added examples of Advanced Practice Nurse assignments at grades IV and V.
 - h. Elimination procedures in Appendix II-H7 for appointing physician assistants at chief grade.
 - i. Added responsibilities for HR offices and supervisory officials as it relates to promotions, change in assignments, and internal placement of title 38 employees.
3. **RESPONSIBLE OFFICE:** Office of Human Resources and Administration/ Operations, Security and Preparedness (HRA/OSP) (006), Office of the Chief Human Capital Officer (05), Recruitment and Placement Policy Service (059).
4. **RELATED DIRECTIVE:** VA Directive 5005, Staffing.
5. **RESCISSION:** None.

Department of Veterans Affairs
Washington, DC 20420

VA HANDBOOK 5005/161
Transmittal Sheet
January 29, 2024

CERTIFIED BY:

**BY DIRECTION OF THE SECRETARY
OF VETERANS AFFAIRS:**

/s/
Guy T. Kiyokawa
Assistant Secretary for
Enterprise Integration

/s/
Cassandra M. Law
Assistant Secretary for
Human Resources and Administration/
Operations, Security, and Preparedness

DISTRIBUTION: Electronic only

PART II. APPOINTMENTS
CHAPTER 3. TITLE 38 APPOINTMENTS
SECTION A. GENERAL

1. SCOPE.

- a. **General.** This chapter contains administrative requirements and procedures relating to the appointment of individuals to occupations identified in 38 U.S.C. § 7306, 7401(1), and 7401(3); and employees in those occupations who are appointed under 38 U.S.C. § 7405. This section also applies to medical support personnel appointed under authority of 38 U.S.C., chapter 73 or 74.

NOTE: All references throughout this handbook to occupations identified in 38 U.S.C. § 7401(3) includes those occupations not specifically listed in Section 7401(3) but approved for hybrid status by the Assistant Secretary for Human Resources and Administration/Operations, Security and Preparedness in accordance with the provisions of paragraph 2 below. See Part III, appendix III-O for a complete list of hybrid occupations. []

- b. **Veterans Health Administration (VHA) Central Office Appointments (VHACO).** Provisions of this section apply to Central Office employees in the occupations indicated in subparagraph a. who are appointed under 38 U.S.C. §§ 7306, 7401(1), 7401(3) or 7405. The terms “medical center officials” and “facility director or designee” in Central Office refer to the Under Secretary for Health or designee.
- c. **Residents.** Medical and dental residents appointed under 38 U.S.C. § 7406 and podiatry, optometry and chiropractic residents and trainees appointed under 38 U.S.C. § 7405 are included within the scope of this section. The term resident as used in this chapter includes interns.
- d. **Exception from the Competitive Service and the Provisions of 5 U.S.C. Chapter 51.** The appointments of persons under 38 U.S.C. §§ 7306, 7401(1), 7405, and 7406 are excepted from the competitive service and from 5 U.S.C. chapter 51. VA has the authority to exempt persons appointed under 38 U.S.C. § 7401(3) from 5 U.S.C., chapter 51 in specific instances.

2. AUTHORITY AND RESPONSIBILITY.

- a. **Designation of Hybrid Title 38 Status for Health Care Occupations**
- (1) The Assistant Secretary for Human Resources and Administration/Operations, Security and Preparedness, subject to the concurrence of the Under Secretary for Health, is delegated the authority to approve health care occupations for conversion to hybrid title 38 status under 38 U.S.C. § 7401(3) provided such health care occupations:

- (a) Are not occupations relating to administrative, clerical or physical plant maintenance and protective services;
 - (b) Would otherwise receive basic pay in accordance with the General Schedule under section 5332 of title 5;
 - (c) Provide direct patient care services or services incident to direct patient care services; and
 - (d) Would not otherwise be available to provide medical care or treatment for Veterans.
- (2) Not later than 45 days before the effective date of an appointment or conversion to a hybrid occupation established under subparagraph (1) above, the Secretary must submit notice of the new hybrid occupation to Congress under the provisions of 38 U.S.C. § 7401(3)(B). The Recruitment and Placement Policy Service (059) is responsible for preparing this notice for approval of the Secretary.
- (3) Prior to submitting notice under subparagraph (2) above, comments shall be solicited from applicable labor organizations and such comments will be included in the notice.
- b. **Effecting Appointments.** Appointments will be effected only by appointing officers (responsible Human Resources Officer). These appointing officers will effect appointments after the approval of the qualifications and the selection for appointment has been made by the approving official designated below.
- c. **Approval of Qualification and Selection for Appointment.** [] The approving officials for appointment to positions in VHA under 38 U.S.C., chapter 73 or 74, will be as follows:
- (1) **The Secretary.**
 - (a) On advice of the Under Secretary for Health, the approval of the qualifications and selection of all persons to be appointed under the authority of section 7306.
 - (b) The approval of all network and facility directors appointed under the authority of 38 U.S.C. § 7401(1).
 - (c) The approval of network directors appointed under 38 U.S.C. § 7306 (for network directors appointed in the Senior Executive Service, see 5 U.S.C. § 3393 and VA Handbook 5027, Senior Executive Service).
 - (d) The approval of Veterans Integrated Service Network (VISN) Chief Medical Officers appointed under the authority of 38 U.S.C. § 7401(1).

- (2) **Under Secretary for Health or Designee in Central Office.** Except as limited by subparagraph (1) above, the Under Secretary for Health or designee is the approving official for the appointment of all individuals who are appointed in Central Office under 38 U.S.C., chapter 74, irrespective of the type of appointment, title or grade.
- (3) **Network Directors.** Network directors have the authority to appoint facility chiefs of staff. Facility officials will forward chief of staff nominations to the [VISN Chief Human Resources Officer]. The [VISN Chief Human Resources Officer] will provide a technical review of the nomination [] and forward the completed nomination to the network director for approval. [Notification of a nomination will be forwarded to VHA Executive Resources and Staffing].
- (4) **Facility Directors.** Except as limited by subparagraphs (2) and (3) above, the facility director is the approval authority for the following appointment and assignments.
 - (a) **Physicians.** The approval of the qualifications and selection of physicians appointed under the authority of 38 U.S.C. §§ 7401(1) and 7405, including associate chiefs of staff and physicians in service chief or comparable positions. See appendices II-G2 and II-H1 for procedures for qualifying and appointing physicians to service chief and comparable positions.
 - (b) **Dentists.** The approval of the qualifications and selection of dentists appointed under the authority of 38 U.S.C. §§ 7401(1) and 7405, including chiefs of dental service or comparable positions and staff dentists. See appendices II-G3 and II-H2 for procedures for qualifying and appointing dentists.
 - (c) **[Nurses and Advanced Practice Nurses (APNs) (Certified Nurse Practitioners, Clinical Nurse Specialists and Certified Nurse Midwives)].** The approval of the qualifications and selection of RNs and APNs appointed under the authority of 38 U.S.C. §§ 7401(1) and 7405. See appendices II-G6 and II-H5 for procedures on qualifying and appointing RNs and APNs. In addition, the facility director may delegate authority to the nurse executive to approve the appointment of RNs and APNs up to and including Nurse III.
 - (d) **[APN (Certified Nurse Anesthetists (CNAs)).** The approval of the qualifications and selection of CNAs, including Chiefs of Nurse Anesthesiology under the authority of 38 U.S.C. §§ 7401(1) and 7405. Refer to appendices II-G6d and II-H6 for procedures for qualifying and making appointments to Chief, Nurse Anesthesiology positions.]

- (e) **Podiatrists.** The approval of the qualifications and selection of all podiatrists appointed under authority of 38 U.S.C. §§ 7401(1) and 7405. Refer to appendices II-G4 and II-H3 for procedures for qualifying and appointing podiatrists.
- (f) **Optometrists.** The approval of the qualifications and selection of all optometrists appointed under authority of 38 U.S.C. §§ 7401(1) and 7405. Refer to appendices II-G5 and II-H4 for procedures for qualifying and appointing optometrists.
- (g) **Physician Assistants (PA)** The approval of the qualifications and selection of all PAs, [] under authority of 38 U.S.C. §§ 7401(1) and 7405. Refer to appendices II-G8 [] for procedures for qualifying and making appointments of PAs. [In addition, the facility director may delegate authority to the facility chief of staff or PA (facility lead or equivalent, at PA IV or V) to appoint PAs up to and including PA III.]
- (h) **Expanded-Function Dental Auxiliary (EFDA).** The approval of the qualifications and selection of all EFDAs appointed under the authority of 38 U.S.C. §§ 7401(1) or 7405. Refer to appendices II-G9 and II-H2 for procedures for qualifying and appointing EFDAs. The [facility] director may delegate approval authority for appointments of EFDAs to the facility chief of staff.
- (i) **Pharmacists.** The approval of the qualifications and selection of all pharmacists, including Chiefs of Pharmacy Service (all grades), clinical pharmacists/pharmacy specialists and program specialists [] appointed under the authority of 38 U.S.C. §§ 7401(3) and 7405. Refer to appendix II-G15 [] for qualifications. In addition, the [facility] director may delegate authority to the facility chief of staff or to the Chief, Pharmacy Service, to approve the appointment of pharmacists at GS-12 and below and of Assistant Chiefs, Pharmacy Service at GS-13.
- (j) **Physical Therapist (PTs) and Occupational Therapist (OTs).** The approval of the qualifications and selection of PTs and OTs for section chief positions and positions at GS-12 appointed under the authority of 38 U.S.C. §§ 7401(3) and 7405. The [facility] director may delegate approval authority for appointments of other PTs and OTs to the facility chief of staff. Refer to appendices II-G12, II-G14, and II-H9 for procedures for qualifying and making appointments to section chief positions.
- (k) **Respiratory Therapists (RTs).** The approval of the qualifications and selection of all RTs. The [facility] director may delegate approval authority for appointments of RTs to the facility chief of staff

appointed under the authority of 38 U.S.C. §§ 7401(3) and 7405. Refer to appendix II-G11 for qualifying RTs.

- (l) **Licensed Practice Nurse/Licensed Vocational Nurse (LPNs/LVNs).** The approval of the qualifications and selection of all LPNs/LVNs appointed under the authority of 38 U.S.C. §§ 7401(3) or 7405. The [facility] director may delegate approval authority for appointments of LPNs/[LVNs] to nurse executive. Refer to appendix II-G13 for qualifications.
- (m) **Chiropractors.** The approval of the qualifications and selection of all chiropractors appointed under authority of 38 U.S.C. §§ 7401(1) and 7405. The [facility] director may delegate approval authority for appointments of chiropractors to the facility chief of staff. Refer to appendices II-G16 and II-H10 for procedures for qualifying and appointing chiropractors.
- (n) **Other occupations appointed under the authority of 38 U.S.C § 7401(3) or 7405.** The approval of the qualifications and selection of all individuals appointed in occupations listed in 38 U.S.C. § 7401(3) or approved for 38 U.S.C. § 7401(3) hybrid status by the Assistant Secretary for Human Resources and Administration[/Operations, Security and Preparedness] in accordance with the provisions in paragraph 2a of this section. The facility director may delegate approval authority for appointment of employees in the hybrid occupations. (See chapter 3, section A, this part.)

[]

(5) **Human Resources Officer Responsibilities.** The Human Resources Officer will be responsible for:

- (a) Adhering to administrative and regulatory requirements;
- (b) Reviewing each case for completeness before forwarding to VHA Central Office;
- (c) Advising supervisory officials on administrative and regulatory requirements pertaining to appointments, advancements and probationary reviews;
- (d) Notifying prospective appointees of their selection.

3. APPOINTMENT REQUIREMENTS AND DETERMINATIONS.

a. Preference to Veterans.

- (1) The primary consideration in making appointments of physicians, dentists, podiatrists, optometrists, chiropractors, [registered nurses, advanced practice nurses], PAs and EFDAs under 38 U.S.C., chapter 73 or 74, will be the professional needs of VHA. Consistent with this policy however, Veterans will be given preference when qualifications of candidates are approximately equal. This includes qualified disabled Veterans and preference eligible as defined in 5 U.S.C. § 2108.
- (2) When candidates for positions identified in 38 U.S.C. § 7401(3), are determined to be approximately equally qualified for a particular opening, hiring preference will be given to Veterans and preference eligibles as defined in 5 U.S.C. § 2108. Selections from candidates determined to be approximately equal will be made in the following order:
 - (a) Disabled Veterans who have a service-connected disability of 10 percent or more.
 - (b) Preference eligible under 5 U.S.C. § 2108(3)(C) through (H) other than those above (e.g., disabled Veteran; unmarried widow or widower of a Veteran who served on active duty in wartime or other designated service period; spouse of a service-connected disabled Veteran not qualified for civil service employment; mother of a Veteran who lost his/her life in wartime or other designated service period; mother of a service-connected permanently and totally disabled Veteran.)
 - (c) Preference eligible under 5 U.S.C. § 2108(3)(A) and (B) (i.e., Veterans who served on active duty in wartime or other designated service period.)
 - (d) All other candidates.
- (3) When qualified Veterans apply for appropriate vacancies, it is important that VA health care facilities establish and maintain documentation within Human Resources (HR) files to demonstrate that qualified preference eligible and other Veteran applicants received appropriate consideration for positions being filled, and to address the relative qualifications of preference eligible and other Veteran applicants. At a minimum, facilities must be able to demonstrate from the written record why the qualifications of non-selected preference eligible and other Veterans are not approximately equal to those of selected candidates who either lack preference or are non-Veterans, respectively.

NOTE: The VA is required to follow title 5 Veterans' preference rules when hiring individuals for hybrid title 38 positions (*Graves v. VA* 117 M.S.P.R. 697 (2012). See VA Handbook 5005 Part I, Chapter 4.)

b. Dual Employment and Dual Compensation Restrictions.

- (1) Except as provided in the subparagraphs below, no full-time employee appointed under authority of 38 U.S.C., chapter 73 or 74, will concurrently hold any other type of paid appointment in VA.
- (2) The following personnel may hold more than one appointment provided it is not contrary to 5 U.S.C. § 5533 and VA Directive and Handbook 5007, Appendix F, Paragraph 3, Pay Administration: full-time personnel appointed under 38 U.S.C. § 7401(3), personnel in occupations listed in 38 U.S.C. § 7401(3) who are appointed on a full-time or part-time basis under 38 U.S.C. § 7405(a)(1)(B) and medical support personnel appointed on a full-time or part-time basis under 38 U.S.C. § 7405(a)(1)(D). A medical resident may serve as an admitting physician on a fee-basis in accordance with the criteria in VA Handbook 5007, Pay Administration. Paid trainees in medical support programs funded through the Office of the Chief Academic Affiliations may simultaneously hold part-time, intermittent or fee-basis appointments provided there is no violation of dual compensation restrictions, the trainee is determined to be the best qualified applicant and the utilization as a trainee is consistent with the provisions of VHA Manual M-8, Academic Affairs. All other personnel appointed under authority of 38 U.S.C., chapter 73 or 74 are covered by the provisions of subparagraph b (2) through b (4). Pharmacy residents appointed under 38 U.S.C. § 7405(a)(1)(D) may be appointed to another position under 38 U.S.C. § 7405 without regard to the restrictions in 5 U.S.C. § 5533.
- (3) Facility directors may appoint, on a lump-sum fee-basis, full-time employees from other VA facilities employed in occupations listed under 38 U.S.C. § 7401(1), provided the criteria in paragraph b (4) are met and such an appointment would not be contrary to Department conflict of interest regulations (38 C.F.R., part 0). Such appointments permit the use of full-time employees on a fee-basis at a second VA facility, provided management officials at both facilities agree that the arrangement permits them to meet staffing needs; fees are paid on other than a time basis; and the arrangement results in an employer-employee relationship. (5 C.F.R., part 304.) Facilities wishing to use this authority should identify the task they need accomplished and compensate the employee on a fee-basis for the completion of that task. Appointment of full-time employees covered by 38 U.S.C. § 7401(1) on a fee-basis at the same VA facility is not permitted. No consultant, attending, fee-basis, part-time or intermittent employee will simultaneously hold more than one compensable appointment in VHA unless the outlined criteria are met. The restriction in the preceding sentence applies to appointment at the same facility or at more than one facility.

- (4) For individuals identified in subparagraph b (2), dual appointments may be approved by the facility director, subject to the following conditions and restrictions:
 - (a) Services are essential to the health care needs of patients.
 - (b) No other equally qualified individual in the specific specialty is available in the locality.
 - (c) There is no violation of dual compensation statutes or VA policies.
 - (5) For individuals identified in subparagraph b (2), the following dual appointments will be approved by the facility director only in exceptional circumstances and if requirements in subparagraph b (4) are met. Officials will ensure that these appointments will not present or lead to a conflict of interest or the appearance thereof. Questions concerning conflict of interest matters may be directed to the Regional Counsel.
 - (a) Utilization as a consultant or attending in combination with employment on a part- time or intermittent basis at the same facility.
 - (b) On-facility fee-basis appointment under the schedule of fees in combination with utilization as a consultant or attending at the same facility. (**NOTE:** This subparagraph does not apply to outpatient services of off-facility fee-basis personnel in a private office or private clinic, even though consultant or attending services may be performed on the same day.)
 - (c) Part-time or intermittent employees, or currently employed consultants and attendings, in combination with an on-facility fee-basis appointment to perform an operation, give treatment or perform special duty nursing.
 - (6) Recommendations to approving officials should include sufficient information to indicate that dual employment is justified.
- c. **Equal Opportunity for Employment.** Employment actions will be taken on the basis of merit and without discrimination for such reasons as age, race, color, religion, national origin, sex, lawful partisan political affiliation, marital status, physical, or mental disability (when the individual is qualified to do the work) or membership or non- membership in a labor organization.
 - d. **Member of Family Restrictions.** Employment actions will conform to the restrictions governing the employment of family members as provided in 5 C.F.R., part 310. (For further guidance, refer to chapter 2, this part).

- e. **Restrictions Regarding Political Activity.** Employees appointed under authority of 38 U.S.C., chapter 73 or 74, are subject to the political activity restrictions in 5 U.S.C., chapter 73 and VA Handbook 5025, Legal.
- f. **Qualification Standards.**
 - (1) **General.** The basic qualification requirements for individuals appointed under 38 U.S.C., chapters 73 and 74, in occupations identified in under 38 U.S.C. §§ 7401(1) and 7401(3), are contained in VA Qualification Standards approved, under the delegated authority, by the Assistant Secretary for Human Resources and Administration/Operations, Security and Preparedness upon recommendations of the Under Secretary for Health. These standards apply to all appointments in these occupations under authority of 38 U.S.C., chapter 73 or 74, regardless of the nature or tenure of the appointment.
 - (2) **Qualification Standards for Occupations.** The qualification standards for individual occupations are contained in appendix II-G of this chapter.
 - (3) **Education.**
 - (a) Approved schools and satisfactory internships or their equivalents for the purpose of 38 U.S.C. § 7402, will be those designated in the appropriate qualification standards. The accrediting agency or body for verifying education of applicants is also identified in the qualification standards.
 - (b) Provisions of 38 U.S.C., chapter 73 or 74, require that individuals have education and licensure, registration or certification as specified in the appropriate qualification standard in order to qualify for assignment of patient care responsibility. Unless otherwise indicated in the qualification standard, an unlicensed candidate may not use professional education as a substitute for the accredited education and/or training required by the qualification standards of another occupation. For example, an unlicensed physician may not be appointed as a PA by using graduation from medical school as a substitute for completion of an approved PA training program. Likewise, an unlicensed dentist may not be appointed as an EFDA by using graduation from dental school as a substitute for completion of approved dental assistant or hygienist training.
 - (4) **Grade Level Determinations.** The grade to which an applicant is appointed will be determined by the individual's qualifications and assignment. Under the Title 38 "rank-in-person" system, candidates are to be appointed at the highest grade or level within the grade for which they are fully qualified up to the full performance level. For positions above the

full performance (journey level) the complexity of the assignment and scope of responsibility are considered in determining grades.

g. Citizenship.

- (1) To be eligible for appointment in VHA, an applicant must be a citizen of the United States (U.S.), except as provided in 38 U.S.C. § 7407(a) and subparagraph (2). The acquisition of “first papers” or the “owing of allegiance to the United States” does not satisfy the basic requirement of citizenship. Naturalized citizens must furnish evidence of citizenship.
- (2) After a determination is made that it is not possible to recruit qualified citizens, necessary personnel may be appointed on a temporary basis under authority of 38 U.S.C. § 7405 without regard to the citizenship requirements of 38 U.S.C. § 7402 or any other law prohibiting the employment of or payment of compensation to a person who is not a citizen of the United States. Candidates must meet all other requirements for the grade and position concerned.
- (3) Requests to petition the U.S. Department of State (DOS) for waiver of the 2-year home residence requirement under 22 C.F.R., part 514 must be approved VHA Workforce Management and Consulting Office (106A1). Requests to petition DOS will be submitted in accordance with instructions contained in appendix II-J of this chapter and [VHA Handbook 5005.1](#), “Requests to Petition the United States Department of State for a Waiver of the Two-Year Home Residency Requirement on Behalf of an Exchange Visitor”. No appointment may be effected or commitment made until the required approval is received from the U.S. Citizenship and Immigration Service’s (USCIS), formerly the Immigration and Naturalization Service.
- (4) Officials of VHA will not commit positions to noncitizens not legally entitled to reside in this country.
- (5) Consistent with provisions in this paragraph, the appointment of noncitizens may be approved by the following officials:
 - (a) The facility director is the approval authority for appointment of:
 - i All noncitizens as residents.
 - ii Immigrants (aliens who have been admitted for permanent residence.) As of September 20, 1994, all immigrants are required to have an Alien Registration Receipt Card, Form I-551. Form I-551 has the lawful holder’s photograph, fingerprint and signature on a white background; it is commonly known as the “green card.”

NOTE: The Form I-151 and all previous forms are no longer valid after September 19, 1994.

- iii All nonimmigrants (e.g., exchange visitors, alien students, visiting professors), provided employment is authorized by the USCIS. This includes authority to sponsor an individual for a nonimmigrant visa or an extension of such visa. The authorization for employment may be cited on the nonimmigrant's visa or the nonimmigrant may possess an Employment Authorization Form (I-688B). In cases where the authority to accept compensated or non-compensated employment by the nonimmigrant is not clearly evident, a report of contact with USCIS officials verifying the employment authorization must be made. A copy of the document used to verify the employment authorization of the nonimmigrant is to be filed in the appointee's personnel folder.
- (b) The Under Secretary for Health or designee is the approval authority for the appointment of noncitizens to centralized positions.
- (c) The paid appointment of noncitizen associated health trainees is not generally permitted. Any exception requires the approval of the Under Secretary for Health or designee. (See section G, paragraph 8, this chapter.)
- h. **Credentialing Requirements (Including License Registration or Certification).** See section B of this chapter.
- i. **List of Excluded Individuals and Entities (LEIE) and Healthcare Integrity and Protection Data Bank (HIPDB) Sanction List.** See chapter 1, section B, paragraph 2 of this part.
- j. **English Language Proficiency.** No person will be appointed under authority of 38 U.S.C., chapter 73 or 74, to serve in a direct patient care capacity in VHA who is not proficient in written and spoken English. (See appendix II-I of this chapter.)
- k. **Physical Requirements.**
 - (1) **General.**
 - (a) Guidelines for physical and mental fitness for appointment and retention in VHA shall be established by the Under Secretary for Health. (See VA Directive and Handbook 5019, Part II, [Employee] Occupational Health [Service].)

- (b) Only those persons who are physically and mentally capable of satisfactorily performing the duties of their assignments are to be employed and retained in VHA.
- (c) Determinations of physical and mental fitness will be made without discrimination for such reasons as age, race, color, religion, national origin, sex, lawful partisan political affiliation, marital status, physical or mental disability (when the individual is qualified to do the work) or membership or non-membership in a labor organization.

(2) **Pre-employment Physical Examinations.**

- (a) **General.** See VA Directive and VA Handbook 5019, Employee Occupational Health Service. Pre-employment physical examination is not required of residents and interns who furnish evidence of satisfactory physical condition based on a physical examination within the past 12 months. An examination is required for any action moving an employee from a position not requiring an examination to one requiring an examination.
- (b) **Scope and Conduct of Examination.** See VA Directive and Handbook 5019, [Employee Occupational Health Service], Part II.

I. **Oath, Affidavit and Declaration of Appointee.**

- (1) All employees of VHA appointed under authority of 38 U.S.C., chapter 73 or 74 (except those utilized on a fee-basis) are required to take the oath of office and execute the affidavit (subversive activity), affidavit (striking against the Federal Government) and the declaration of appointee. Noncitizens shall be required to execute only those affidavits on Standard Form (SF) 61, Appointment Affidavit, outlined in the OPM Guide to Processing Personnel Actions. The SF 61 shall be executed in accordance with the requirements set forth in chapter 2, section A, paragraph 5e of this part.
 - (2) Only employees delegated the authority will administer the oaths necessary for effecting appointments in VHA.
- m. **Security Requirements for Employment.** See VA Directive and Handbook 0710, Personnel Security and Suitability Program, for VA instructions concerning security requirements.
 - n. **Effective Date of Appointment.** Appointments will be effective on the entrance-on-duty day, except as follows:

- (1) **Full-Time Physicians, Dentists, Podiatrists, Optometrists, Chiropractors, and Other Personnel Appointed Under 38 U.S.C. § 7306.** When an appointee is to enter on-duty on Monday, the appointment will be effective on the preceding Sunday provided the employee is available for duty on that day. Sunday will be considered an administrative non-duty day. If Monday is a holiday, the appointment will be effective on the entrance-on-duty-day.
- (2) **RNs, APNs, PAs, EFDAs, and Hybrid Title 38 occupations.** When the appointee is to enter on-duty on the first Monday in a pay period, the appointment will be effective on the first Sunday of the pay period. If Monday is a holiday, the appointment will be effective on the entrance-on-duty-day.
- (3) **Restoration After Military Service or Compensable Injury.** An exception to these effective dates may be made if required to satisfy statutory or regulatory provisions such as restoration after military service or compensable injury.
 - o. **Overseas Employment.** See chapter 1, section C of this part.
 - p. **Grade and/or Step Adjustments.** If, on review of an appointment by the appropriate supervisory official, in collaboration with Human Resources staff, it is determined that an employee has been appointed at a grade or level within the grade which is not commensurate with qualifications, the approving authority for initial appointment may approve an adjustment in the grade, level, and/or step rate within the grade. (See section E, paragraph 2, this chapter, for limitations on adjusting step rates within the grade for this purpose). These adjustments in grade and/or step rate will be effected as of the beginning of the next pay period following approval. The nature of action on SF 50-B will be "Promotion" or "Change to Lower Grade," as appropriate. In the case of step rate adjustments, the nature of action on SF 50-B will be "Administrative Pay Increase" or "Administrative Pay Decrease," as appropriate. The authority for such actions will be "38 U.S.C. § 7403." The following statement will be placed in "Remarks" on SF 50B for such actions: "Adjustment for consistency with standardized qualification requirements."

NOTE: Service in a lower step rate prior to adjustment of step(s) within the grade will not be credited toward meeting the required waiting period for periodic step increase.

4. PROBATIONARY PERIOD.

- a. **Requirement to Serve a Probationary Period.**

- (1) Full-time permanent appointments of physicians, dentists, podiatrists, optometrists, chiropractors, RNs, APNs, PAs and EFDAs made under authority of 38 U.S.C. § 7401(1) are subject to a two-year probationary period requirement as specified in 38 U.S.C. § 7403(b)(1). **NOTE:** Full-time temporary appointments under 38 U.S.C. § 7405(a)(1) are excluded from the requirement to serve a probationary period, and service in this time-limited capacity is not creditable towards a probationary period as specified in 38 U.S.C. § 7403(b)(1).
- (2) Individuals appointed as of May 5, 2010, as part-time or intermittent RNs under 38 U.S.C. § 7405(a)(1), are subject to a two-year probationary period requirement, except as provided below. Upon completion of the probationary period, the appointment is no longer considered temporary. The following appointments are considered temporary, thus are not subject to a probationary period. These appointments are on a time-limited basis of three years or less:
 - (a) Part-time or intermittent appointments resulting from an academic affiliation or teaching position in a nursing academy of the Department;
 - (b) Appointments as a result of a specific research proposal or grant; or
 - (c) Appointments of non-United States citizens under 38 U.S.C. § 7407(a).
- (3) Full-time permanent appointments of hybrid title 38 employees made under authority of 38 U.S.C. § 7401(3) are subject to the one-year title 5 probationary period requirements (see chapter 2, section A, paragraph 9, of this part).
- (4) Employees who satisfactorily completed the probationary period required by 38 U.S.C. § 7403(b) will not serve a new probationary period upon reappointment unless their separation was for cause.

b. Purpose of Probationary Period.

- (1) The probationary period is an extension of the appointment process. It provides the final test of the appointee's qualifications, i.e., actual performance on the job. During the probationary period, the employee's conduct and performance will be closely observed. The employee may be separated from the service if not found fully qualified and satisfactory. Thus, the probationary period provides a safeguard against retention of any person who, despite having met legal and regulatory requirements for appointment, is found in actual practice to be unsuited for retention in the Veterans Health Administration (VHA). Retention of employees during the

probationary period shall be contingent upon demonstrating that they are fully qualified and satisfactory. Only those employees who satisfactorily complete the probationary period shall acquire status as permanent employees in VHA.

- (2) The probationary period also affords an opportunity for fostering the interest of the employee in a VA career. Thoughtful and considerate treatment during the probationary period will have a lasting effect on the employee's career.

c. Length of Probationary Period.

- (1) The probationary period for employees appointed under 38 U.S.C. § 7401(1), as well as employees appointed as part-time or intermittent RNs/APNs under 38 U.S.C. § 7405(a)(1), on or after May 5, 2010, is two years. The probationary period for part-time RNs/APNs are computed based on calendar time, in the same manner as for full-time employees.
- (2) The probationary period for intermittent RNs/APNs is computed based on one day of credit for each day or part of a day in pay status. Individuals appointed as intermittent RNs/APNs must serve 520 days in a pay status to complete the required 2-year probationary period. The probationary period, however, cannot be completed in less than two calendar years.
- (3) Probationary requirements for hybrid employees appointed under 38 U.S.C. § 7401(3) is the same as those for title 5 employees and can be found in chapter 2, section A, this part. The calculation for part-time and intermittent creditable service is the same as above.

d. Last Day of Probationary Period.

- (1) For full-time employees paid on a daily basis (physicians, dentists, podiatrists, optometrists, and chiropractors), the probationary period ends at midnight on the last calendar day before the employee's anniversary date, whether or not the employee is in a duty status that day. For example, a probationary period beginning November 1, 2011, would normally end at midnight on October 31, 2013.
- (2) For full-time and part-time employees paid on an hourly basis (RNs, APNs, physician assistants, and expanded-function dental auxiliaries) the probationary period is completed at the end of the last scheduled tour of duty before the employee's anniversary date. For the purposes of this paragraph, scheduled duty includes normal and overtime duty, leave, excused absence, including holidays and absence without leave. For

example, an employee subject to a two-year probationary period beginning November 1, 2011, is completed as follows:

- (a) For an employee, whose last tour of duty prior to November 1, 2013, occurs at 4:30 p.m. on October 31, 2013, the probationary period is completed at 4:30 p.m. on October 31, 2013.
 - (b) For an employee, whose last tour of duty prior to November 1, 2013, is from 11:00 p.m., October 31, 2013, to 7:00 a.m., November 1, 2013, the probationary period is completed at midnight on October 31, 2013.
 - (c) For an employee, whose last tour of duty prior to November 1, 2013, (because of days off) is October 29, 2013, [the probationary period is completed at midnight on October 29, 2013.]
 - (d) For an employee, whose last tour of duty prior to November 1, 2013, is 4:30 p.m. on October 29, 2013, but he/she calls in sick for scheduled tours of duty on October 30 and October 31, 2013, the probationary period is completed at 4:30 p.m. on October 31, 2013.
 - (e) If completed satisfactorily, the employee will automatically complete the required probationary period at the end of the last tour of duty worked or scheduled to work.
- e. **Creditable Service.** The following service is creditable toward completion of the probationary period:
- (1) Continuous service in an appointment under 38 U.S.C. §§ 7401(1), 7306 or part-time or intermittent (including temporary) service for RNs/APNs appointed under 38 U.S.C. § 7405(a)(1).
 - (2) Prior satisfactory probationary service of at least six months duration followed by a break(s) in service totalling one year or less if the break was not due to separation for cause. A break in service is defined for the purpose of this subparagraph as a period during which no service is rendered under 38 U.S.C. §§ 7306, 7401(1), or 7405(a)(1) for part-time or intermittent RNs/APNs.
 - (3) Time spent in a probationary period served under 38 U.S.C. § 7403(b) prior to holding some other type of appointment in VHA, if the employee is subsequently appointed under 38 U.S.C. § 7401(1), provided all other conditions of subparagraph d are met. Example: A full-time RN/APN appointed under 38 U.S.C. § 7401(1) in July 2011 accepts a position of Supervisory Health System Specialist (Domiciliary Administrator) under title 5 in December 2012. The individual returns to an RN/APN position under

38 U.S.C. § 7401(1) in October 2014. The previous time served as an RN/APN from July 2011 through December 2012 is not creditable towards the completion of the probationary period because the time served under the title 5 appointment was longer than one year.

- (4) All leave with pay during creditable service.
- (5) Leave without pay during the probationary period is considered creditable service when it does not exceed a total of 40 calendar days for physicians, dentists, podiatrists, optometrists or chiropractors, or 235 hours for RNs, APNs, physician assistants, and expanded-function dental auxiliaries and 110 hours for part-time RNs. **NOTE:** When determining this total, each hour of leave without pay taken by an RN or APN on the Baylor Plan is to be multiplied by 1.667.
- (6) Time before restoration during which a probationary employee received work injury compensation from the Office of Workers' Compensation Programs.

f. [Mid-Probationary Periodic Review and Probationary Review Board (PRB)]

- (1) **Employees Covered.** A mid-probationary periodic review will generally be conducted by a Probationary Review Board (PRB) for covered title 38 probationary employees after they receive their first proficiency rating or performance appraisal. These procedures apply to the following employees serving a probationary period: employees appointed under 38 U.S.C. § 7401(1); and part-time RNs and APNs, including intermittent, serving on a temporary permanent appointment under 38 U.S.C. § 7405(a)(1)(A). These procedures do not apply to: employees appointed under 38 U.S.C., Chapter 3 or §§ 7306, 7401(2), 7401(3), 7401(4), 7405 (except part-time RNs and APNs serving on a temporary or permanent employment) or 7406; or employees occupying positions described in 38 U.S.C. § 7405(g)(3).
- (2) **Establishing PRBs.** The need to establish a PRB on an ongoing or ad hoc basis will be dependent upon the needs of the occupation or facility. In some cases, the number of probationary employees at a facility may call for establishing an ongoing/standing PRB for the occupation, e.g., for registered nurses or physicians. In other cases, the number of probationary employees in the occupation may be so limited or rare that the PRB will be established on an ad hoc basis, e.g., chiropractors or ophthalmologists. The authorizing official has discretion regarding the establishment of PRBs.
- (3) **Authorizing Officials and PRB Membership.** The following identifies the appropriate authorizing officials. Authorizing officials are responsible for coordinating and establishing standing or ad hoc PRBs, as needed, and

appointing PRB members, pursuant to the probationary employee's occupation or organizational assignment. For probationary employees in the Veterans Health Administration Central Office (VHACO) the authorizing official is the appropriate service director (or equivalent) position or above.

- (a) For probationary VISN Directors, the authorizing official is the Assistant Under Secretary for Health for Operations (AUSHO).
 - (b) For probationary VISN Chief Medical Officers (CMO), Quality Management Officers (QMO) or Chief Nursing Officers (CNO) or equivalent, the authorizing official is the VISN Director.
 - (c) For probationary employees in a VISN, except the CMOs, QMOs, CNOs or equivalent, the authorizing official is the CMO, QMO, CNO or equivalent, depending on the probationary employee's organizational alignment.
 - (d) For probationary VHA Facility/Medical Center Directors or Deputy VISN Directors appointed under [38 U.S.C. § 7401\(1\)](#), the authorizing official is the VISN Director.
 - (e) For probationary VHA Medical Center Chief of Staffs (COS) or equivalents, the authorizing official is the Facility Director.
 - (f) For probationary Associate Directors for Patient Care Services (ADPCS) or equivalents, the authorizing official is the Facility Director.
 - (g) For probationary Assistant/Associate Chiefs, Nursing Services and RNs/APNs, Grade IV, the authorizing official is the ADPCS or equivalent.
 - (h) For all other VHA probationary facility employees, the authorizing official is the appropriate service chief or equivalent, depending upon the probationary employee's organizational alignment.
- (4) **Composition of the PRB.**
- (a) The authorizing official should attempt to convene a PRB with three board members, appointed under title 38 in the same occupation as the probationary employee being reviewed. However, if that is not possible or practical, at least one PRB member will be in the same title 38 occupation at the same grade or higher than the probationary employee being reviewed. In the case of RNs/APNs, at least two PRB members will be in the same occupation.

- (b) Persons selected to serve on the PRB will be fair, impartial, and objective.
 - (c) Other Considerations.
 - i If an authorizing official determines a local PRB cannot be properly established, the authorizing official and the servicing HR Office will facilitate the process for obtaining members from facilities other than the reviewing employee's facility to serve on an PRB.
 - ii Persons in a position to prejudice the action of a PRB, such as an employee's immediate or second level supervisor, may not serve on an PRB.
- (5) **Mid-Probationary Periodic Review.** The PRB has responsibility for periodically reviewing the services of probationary employees for those hired in occupations under 38 U.S.C. § 7401(1). At a minimum, at least one formal periodic review will be done during the probationary period, in accordance with the below.
- (a) The servicing HR Office will establish monitors to ensure completion of mid-probationary periodic reviews.
 - (b) The mid-probationary periodic review will be initiated by the supervisor, typically following completion of the employee's first Proficiency Report or Performance Appraisal, but not later than 18 months after the employee's appointment to the occupation. If the supervisor believes the employee is satisfactory and there is a standing PRB for the occupation at their facility, they will submit the employee's performance record (proficiency report or performance appraisal, whichever is applicable) and qualifications record (VetPro qualification verification or application/resume) to the PRB for further review. If there is no applicable standing PRB, the supervisor should alert the appropriate authorizing official so that one can be appointed. If the supervisor believes the employee is unsatisfactory, they will request that a Summary Review Board (SRB) review the employee in accordance with the procedures set forth in VA Handbook 5021, Employee/Management Relations.
 - (c) The PRB will review the employee's performance and qualification record submitted by the supervisor, and determine whether the employee is fully qualified and satisfactory to continue to work for the VA. After review of the performance and qualification record, the PRB members will convene at least once in person, telephonically or via video teleconference to discuss their review of the performance and qualification record, findings, and recommendations.

- (d) If the PRB determines the employee's conduct, performance, and/or qualifications are satisfactory, the PRB will record that finding by endorsing the current Proficiency Report or by preparing a separate memorandum report. The supervisor will advise the employee of the satisfactory finding. The PRB's findings and recommendation will be recorded on [VA Form 10-2543](#), Board Action.
 - (e) If the PRB does not determine that the employee's conduct, performance, and/or qualifications are satisfactory, the PRB will submit their recommendation on the Board Action, notifying the supervisor that an SRB must be convened. The supervisor must submit the PRB's recommendation to the authorizing official to convene an SRB in accordance with the procedures set forth in VA Handbook 5021, Part III, Chapter 1. The PRB's recommendation on the Board Action to the supervisor will include any records reviewed and their assessment supporting this determination. The supervisor's submission to the authorizing official will also include this information.
- (6) Ongoing Reviews.
- (a) Supervisors will review the services of employees through observation and evaluation of their performance and conduct during the probationary period. When the employee has had an opportunity to understand performance expectations, the supervisor should consider any inadequacies in performance. The employee's weaknesses should be discussed objectively with the employee and suggestions made for improvement. If the employee's performance is considered good or outstanding in some aspect, this fact should be made known to the employee.
 - (b) If at any time during the probationary period, the employee's performance or conduct are not satisfactory, the employee's immediate or higher-level supervisor will submit a written request for immediate review by an SRB in accordance with VA Handbook 5021, Employee/Management Relations.]

SECTION B. CREDENTIALING AND LICENSURE

1. GENERAL.

a. Scope.

- (1) This section contains administrative requirements and procedures relating to the credentialing and licensure of applicants and employees appointed to occupations identified in 38 U.S.C. §§ 7306, 7401(1), and 7401(3); and employees in those occupations who are appointed under 38 U.S.C. 7405, including individuals utilized on an on-facility fee-basis, on-facility contract or on-facility sharing agreement basis. This includes such employees as physicians, dentists, podiatrists, optometrists, chiropractors, nurses, nurse anesthetists, physician assistants (PAs), expanded-function dental auxiliaries (EFDAs), and Hybrid Title 38 occupations. Provisions of this section apply to Central Office employees who are employed in the occupations indicated above under 38 U.S.C. §§ 7306, 7401(1), 7401(3), or 7405. Individuals appointed under 38 U.S.C. § 7405, whether paid or without compensation, on an intermittent or fee-basis, including consultants and attendings, must be fully credentialed in accordance with provisions of this section, although they are considered employees only during periods when actually engaged in VA service.
- (2) The provisions of this section should be used in conjunction with VHA Handbook 1100.20 'Credentialing of Health Care Providers.'].]

- b. **Residents.** Medical, dental, podiatry, chiropractic, and optometry residents and trainees appointed under 38 U.S.C. §§ 7405, 7406 are included within the scope of this section. As indicated in paragraph 21 of this section, the appropriate program director is responsible for certifying that the credentials and licensure of residents and trainees have been verified prior to their appointment. Specific procedures described in paragraphs 3 through 19 are not applicable to residents functioning within the scope of their training program, but program directors, where possible, should use verification procedures, which are generally consistent with those described.

c. Definitions.

- (1) Active, current, full, and unrestricted license or registration in a State. Authorizes the licensee to practice outside VA without any change being needed in the status of the license. An employee is responsible for paying any fees necessary to maintain a full and active license in a State. If a State waives fees for any reason, such as for an out-of-state practice or for employment in a Federal facility, the employee may not accept the waiver if this will place the license in an inactive or other restricted status.

- (2) Credentialing. The systematic process of screening and evaluating qualifications and other credentials, including licensure, required education, relevant training and experience, current competence and health status.
- (3) Licensure. The official or legal permission to practice in an occupation, as evidenced by documentation issued by a State in the form of a license and/or registration.
- (4) “Medical Center officials” and “facility director or designee” refer in Central Office to the Under Secretary for Health or designee.
- (5) Primary source verification. Documentation from the original source of a specific credential that verifies the accuracy of a qualification reported by an individual health care practitioner. This can be documented in the form of a letter, telephone contact or secure electronic communication with the original source.
- (6) “Registration” or “Certification”. The official attestation by a professional organization that one has fulfilled the requirements or met a standard skill to practice the profession.
- (7) State. Any of the states, territories, and possessions of the United States, the District of Columbia, and the Commonwealth of Puerto Rico.
- (8) VetPro. VHA’s electronic credentialing system which must be used for credentialing all providers. The system is used by applicants and practitioners to provide evidence of licensure, registration, certification, and/or other relevant credentials for verification prior to appointment, throughout the appointment process and upon transfer from another medical facility. The system provides an electronic file for continued maintenance of accurate, complete and timely credentials for all VHA health care providers who claim licensure, certification or registration, and are permitted by the facility to provide patient care services or oversee the delivery of those services.

d. Responsibilities of VA Officials.

- (1) The Under Secretary for Health or designee will establish additional credentialing, licensure and/or registration requirements and procedures to assure that only fully qualified and suitable candidates are appointed and retained in VHA. Procedures will be established to thoroughly evaluate applicant credentials, licensure and/or registration status and to monitor these on a continuing basis for health care employees appointed under 38 U.S.C. §§ Chapter 73, 74.

- (2) Facility directors are responsible for implementing policy and procedures outlined in this section and for providing necessary resources to ensure that the verification of credentials and licensure is effectively and efficiently managed. So that only fully qualified and suitable individuals are appointed and retained under 38 U.S.C. §§ Chapter 73, 74, [clinical executives (chiefs of staff, Chiefs of Patient Care Services, Nurse Executives), Service Chiefs,] hiring officials [] and HR Officers will ensure that the qualifications of candidates for appointment are thoroughly screened and evaluated. The credentialing process includes verifying the individual's licensure and/or registration, relevant training and/or experience, current competence, and physical and mental fitness. (See Appendix II-L of this chapter for a credentialing checklist.) Officials described in this paragraph will ensure all applicants and employees covered by this policy are made aware of their responsibilities with respect to credentialing and licensure.
 - (3) The credentialing and licensure verification process is a shared responsibility, requiring extensive interchange and continuing communication between the Chief of Staff and HR Officer. Facility directors will establish local policies and procedures delineating functions to be accomplished by each of these officials to assure that responsibilities are clearly understood and can be effectively carried out.
 - (4) Compliance with credentialing and licensure provisions of this section does not obviate the responsibility to determine suitability for employment following guidelines in 5 C.F.R, part 731 or to initiate background investigations of employees using procedures specified in 5 C.F.R. § part 736.
- e. **Documentation.** Information obtained through the verification process must be documented in writing, either by letter, memo, report of contact or secure electronic verification, as appropriate. Documentation will be filed permanently in the VHA credentialing file, VetPro. Facsimile copy may be used with appropriate authentication of the source providing the information via facsimile. This needs to be independently authenticated and the authentication needs to be documented, e.g., entry into comments section of VetPro. A coversheet by itself is not considered independent authentication but may be scanned as the last page of the document, not the first, as well as documentation of the independent verification of the sender's source. If independent authentication of the source cannot be made, the facsimile copy must be followed up with an original document.

NOTE: Authentication of the source of the facsimile requires the recipient to document knowledge that the appropriate source that owned the verification information transmitted the facsimile. For example, if the recipient of the facsimile confirmed with the verifying entity that the facsimile was indeed transmitted by the verifying entity

then this confirmation should be documented on the facsimile coversheet, signed and dated by the individual completing the independent authentication, to include name and title of both transmitting and confirming individuals and date of confirmation.

f. Action Prior to Credentialing.

(1) No appointment action will be taken, nor will an employment commitment be made, in any case where officials have reason to question a candidate's suitability for VA employment. All information obtained through the credentialing process will be carefully considered before an employment decision is made. An RN, APN, PA, EFDA or candidate for appointment to an occupation identified in 38 U.S.C. § 7401(3), may be appointed under 38 U.S.C. § 7405(a)(1) pending completion of the full credentialing process referenced in [VHA Directive 1100.20, Credentialing of Health Care Providers]. However, a physician, dentist, podiatrist, optometrist or chiropractor will be appointed only after credentialing information is received [] except as noted in paragraph 2 below.

(2) In exceptional circumstances and where required to meet an emergent patient care situation, the facility director may approve the temporary appointment of a physician, dentist, podiatrist, optometrist or chiropractor under 38 U.S.C. § 7405 [] following the procedures in [VHA Directive 1100.20, Credentialing of Health Care Providers]. The [facility] director will document for the record the specific circumstances and patient care situation which warranted such an appointment. The appointment will be made only after evidence of current, full and unrestricted licensure has been obtained and a judgment has been made that the individual is fully qualified for the assignment.

g. Applicant and Employee Responsibilities. Applicants and employees will provide evidence of licensure, registration, certification, and/or other relevant credentials, for verification prior to appointment and throughout VA employment as requested. They are responsible for keeping VA apprised of anything that would adversely affect or limit the credentials discussed in this section, and for advising VA of anything that would adversely affect or otherwise limit their clinical privileges. Failure to keep VA fully informed on these matters may result in administrative or disciplinary action.

h. Verification of Credentials After Short Breaks in Service. An applicant who has had a break in VA service of no more than 15 workdays may be reappointed in the same occupation without the full credentialing process required for initial appointment (i.e., verification of education background, licensure status, certifications by professional organizations, references, etc.). The applicant must complete a new employment application form []. Facility officials will verify any licensure or qualification information that has not previously been documented in

the personnel folder or the Credentialing and Privileging Folder, as appropriate. The official designated by the facility director will note in the appropriate folder the reason that credentials were not reverified. Typically, the reason will be that the break in service was for less than 15 workdays. Reverification of credentials is not required for residents or trainees who rotate for training during the academic year between a VA facility and its affiliate(s). (See paragraph 20 for resident credentialing procedures.)

NOTE: For those subject to the credentialing and privileging provisions of [VHA Directive 1100.20, Credentialing of Health Care Providers], any break in service requires the verification of those credentials (time-limited) which could have changed since last verified (State licensure, Drug Enforcement Administration (DEA) certification, board certification, etc.).

2. APPLICATION.

- a. **Application Forms.** Candidates seeking employment under 38 U.S.C. §§ Chapter 73 or 74, must complete one of the following application forms:
 - (1) VA Form 10-2850, Application for Physicians, Dentists, Podiatrists, Optometrists, and Chiropractors;
 - (2) VA Form 10-2850a, Application for Nurses and Nurse Anesthetists, nurse practitioners, and graduate nurse technicians;
 - (3) VA Form 10-2850b, Application for Residency;
 - (4) VA Form 10-2850c, Application for Associated Health Occupations;
 - (5) Optional Form 612, Optional Application for Federal Employment is [obsolete, but can] be used by applicants for whom none of the above forms are appropriate; primarily, this includes applicants for medical support, students, trainees or nonmedical consultant appointments. The OF 612 is not required for USA Staffing recruitments. In USA Staffing, a resume is preferred.
- b. **Application Review.** The HR Officer or designee will thoroughly review each employment application to assure that all questions are answered, and that additional information is provided where required. Applicants are to be asked to account for any gaps in their work history. This information shall be documented on the employment application, and, along with reference checks and other information obtained in the credentialing process, considered in the selection process. Incomplete applications are to be returned and applicants notified that they will not be considered for employment until their application has been fully completed. The HR Officer or designee will review applications for compliance

with administrative and regulatory requirements. Applicants who do not meet appointment requirements should be so notified.

3. EDUCATIONAL CREDENTIALS.

a. Verification of Educational Credentials.

- (1) For independent practitioners, educational credentials relating to qualifications for employment are to be verified through primary source(s) whenever feasible. This includes education used to qualify for appointment, advancement or which is otherwise related to an individual's employment. This verification should also include a comparison of the educational institution(s) cited on the application against existing lists of accredited institutions on the Department of Education web site to guard against institutions or "diploma mills" which sell fictitious college degrees and other professional credentials. The accrediting agency or body for verifying the accreditation status of schools is identified in the appropriate VA qualification standard.
- (2) For dependent practitioners, educational credentials relating to qualifications for employment are to be verified as follows:
 - (a) If most recent licensure for the occupation was issued in 1990 or later: Only education used to qualify for an appointment (i.e., first nursing degree) is required to be verified; and this verification may be accomplished by a secondary source (i.e., copy of diploma or transcript is acceptable). Advanced education credentials above the initial qualifying degree are to be primary source verified. This verification also needs to include a comparison of the educational institution(s) cited on the application against existing lists of institutions or "diploma mills" which sell fictitious college degrees and other professional credentials. The accrediting agency or body for verifying the accreditation status of schools are identified in the appropriate VA qualification standard.
 - (b) If most recent licensure for the occupation was issued prior to 1990: Educational credentials relating to qualifications for employment are to be verified through the primary source(s), whenever feasible. This includes education used to qualify for appointment or advancement. This verification also needs to include a comparison of the educational institution(s) cited on the application against existing lists of institutions or "diploma mills" which sell fictitious college degrees and other professional credentials. The accrediting agency or body for verifying the accreditation status of schools is identified in the appropriate VA qualification standard. The appropriate document

from the primary source must be used for the actual verification of the credential but could include a transcript.

- (3) For individuals who will have clinical privileges, written verification of internships, residencies, fellowships, advanced education, clinical practice programs, etc., from the appropriate program director or school is required. For foreign medical graduates, facility officials must verify with the Educational Commission for Foreign Medical Graduates (ECFMG) that the applicant has met requirements for certification, and must obtain a copy of the ECFMG certificate, if claimed by the applicant.
- (4) In cases of graduates of foreign schools of professional nursing, possession of current, full, active, and unrestricted registration will meet the requirement of graduation from an approved school of professional nursing [equal to an associate degree/diploma level education]. Documentation from the Commission on Graduates of Foreign Nursing Schools (CGFNS) will serve as primary source verification of education, if applicable. [In order to credit nursing education at a level higher than the associate degree/diploma level, a VA-recognized credentials evaluation service must be utilized to verify foreign degree equivalency to a US-based nursing degree.]
- (5) For Physical Therapists, documentation from the Foreign Credentialing Commission on Physical Therapists (FCCPT) will meet the requirement of graduation from an approved school.
- (6) For Occupational Therapists, documentation from the National Board for Certification in Occupational Therapy (NBCOT) will meet the requirement of graduation from an approved school.
- (7) If education cannot be verified because the school has been closed, because a school is in a foreign country and no response can be obtained, or for other similar reasons, all efforts to verify the applicant's education will be documented. In any case, facility officials must verify that candidates meet appropriate VA qualification standard educational requirements prior to appointment.

b. Transcript of Higher Education.

- (1) An applicants may be asked to provide a transcript of their qualifying education for evaluation [prior to appointment. If an individual has a degree in a related field, consideration should be given to obtaining a transcript of this program as well. Transcripts may be requested from other applicants, including APNs, PAs, EFDAs, and candidates selected for appointment to an occupation identified in 38 U.S.C. § 7401(3).

- (2) Transcripts should be evaluated to consider the specific course work completed, grades received and overall level of difficulty of the program.

- c. **Educational Profile for Physicians.** Facilities may obtain, from the American Medical Association, a profile listing all medical education a physician candidate has received in this country and available licensure information for follow-up as necessary. It should be noted, however, that this is a secondary source and, by itself, is not considered sufficient for verification purposes.

4. EMPLOYMENT RECORD AND PREEMPLOYMENT REFERENCES.

- a. **References.** Due diligence should be exercised in checking references before making an offer of employment. Facilities at the local level have the discretion to decide how many references are required prior to appointment. VA will still require a total of three, but only one reference (preferably from the applicant's current or most recent employer(s)) is required prior to appointment and the remaining two within 90 days after appointment. The references should be obtained from employer(s) or other individuals who are knowledgeable about the applicant's work record (i.e., performance, aptitude, conduct, etc.).

- (1) For any candidate whose most recent employment has been private practice, facility officials will contact institution(s) where clinical privileges are and/or were held, professional organizations, [professional] references listed on the application form and/or other agencies, institutions or persons who would have reason to know the individual's qualifications.
- (2) The VA Form Letter 10-341a, Appraisal of Applicant, may be used to obtain references on applicants. However, supplemental information may be required to fully evaluate the educational background and/or prior experiences of an applicant (see subparagraph (3) below). Initial and/or follow-up telephone or personal contact with those having knowledge of an applicant's qualifications and suitability are encouraged as a means of obtaining a complete understanding of the composite employment record. All references must be documented in writing. Written records of telephone or personal contacts must report who was spoken to, that person's position, the date of the contact, a summary of the information provided, and the reason why a telephone or personal contact was made in lieu of a written communication. Reports of contact are to be filed with other references in the personnel folder and, as appropriate, in the Credentialing and Privileging Folder, as appropriate.
- (3) Ideally, references should be from authoritative sources, which may require that facility officials obtain information from sources other than the references listed by the applicant. As appropriate to the occupation for which the applicant is being considered, references should contain specific

information about the individual's scope of practice and level of performance. For example, information on:

- (a) The number and types of procedures performed, range of cases managed, appropriateness of care offered, outcomes of care provided, etc.
- (b) The applicant's clinical judgment and technical skills as reflected in results of quality assurance activities and peer review, where appropriate.
- (c) The applicant's health status in relation to proposed duties of the position and, if applicable, to areas where clinical privileges are being sought.

- b. **Former Federal Employees.** For an applicant with prior Federal service, the personnel folder should be obtained before the individual is given a probationary or permanent appointment. If an applicant has prior VA service, a reference must be obtained from the last two assignments or all VA assignments in the last 5 years, whichever is longer.

5. PREEMPLOYMENT INTERVIEW. A personal interview is recommended prior to the appointment of any candidate under 38 U.S.C. Chapter 73 or 74. The interview should normally be conducted at the VA facility where the individual is to be employed. Arrangements may be made for the interview to be conducted at another VA facility convenient to the applicant. The interview will be conducted by the appropriate official(s) designated by the facility director. An interview report will be completed and filed with the application. Travel expenses for preemployment interviews may be paid only under provisions of 5 C.F.R., Part 572. The appropriate chief consultant in Central Office may require that a personal interview be conducted for individuals in any occupation included within the scope of this section. [].

6. VERIFYING LICENSURE, REGISTRATION AND CERTIFICATION. As part of the credentialing process, the status of the applicant's licensure and/or registration and that of any required or claimed certifications will be thoroughly reviewed and verified. Specific requirements for these verifications are contained in paragraphs 13 through 17 for independent practitioners and VHA policy for the credentialing of health care professionals.

7. VERIFYING SPECIALTY CERTIFICATION.

- a. **Definition.** For the purposes of this paragraph, specialty certification means having fully completed the requirements of a recognized specialty board or other

certifying organization, including the successful passing of the board or certifying examination, as appropriate.

- b. **Applicants.** Prior to appointment, specialty certification will be verified from the primary source. The chief of staff will confirm evidence of specialty certification claimed by a physician, dentist, podiatrist or chiropractor, and certify that verification in the VHA credentialing folder, VetPro. At the request of the chief of staff, the facility director may delegate responsibility for obtaining information about a candidate's board certification. However, the chief of staff must personally certify in the VHA credentialing file that the documentation is of record. For other applicants, the official designated by the facility director will document verification of specialty certification where required in the VHA credentialing file. See paragraph (d) for procedures on documenting specialty certification.
- c. **On-Duty Employees.** On-duty employees attaining specialty certification will have their certification verified under Paragraph (d).
- d. **Verification Procedures.** If listings of specialists are used to verify specialty certification, these schedules must be maintained by the primary source with a disclaimer regarding authenticity and be from current or recently issued copies of the publications as follows:
 - (1) **Physicians.** Board certification may be verified through the Compendium of Medical Specialists, published by the American Board of Medical Specialists, the Directory of American Medical Specialists, published by Marquis' Who's Who, or by direct communication with officials of the appropriate board. A letter from the board is acceptable for those recently certified. (The address and telephone number of the board may be obtained from the latest Directory of Approved Residency Programs published by the Accreditation Council for Graduate Medical Education). Copies of documents used to verify certification are to be filed in the VHA credentialing file.
 - (2) **Dentists.** Board certification may be verified by the listings in the American Dental Directory published annually by the American Dental Association or by contacting the appropriate Dental Specialty Board. Addresses of these boards may be obtained from the American Dental Association, 211 East Chicago Avenue, Chicago, Illinois 60611.
 - (3) **Podiatrists.** Three specialties are currently recognized by the House of Delegates, American Podiatric Medical Association and VA: the American Board of Podiatric Surgery, American Board of Podiatric Orthopedics, and American Board of Podiatric Public Health. Addresses of these boards may be obtained from the latest American Podiatric Directory.

- (4) **Other Occupations.** Board certification and other specialty certificates will be verified by contacting the appropriate specialty board or certifying organization.
- e. **Evidence of Continuing Certification.** For professions or occupations in which current certification is required, employees must present evidence of such certification upon request throughout VA employment.

8. DRUG ENFORCEMENT ADMINISTRATION CERTIFICATION.

- a. **Background.** Physicians, dentists, podiatrists, and certain other professional persons may apply for and be granted renewable certification by the Drug Enforcement Administration (DEA)/Controlled Dangerous Substance (CDS), Federal and/or State to prescribe controlled substances as a part of their practice. However, certification will be verified as indicated below for individuals who claim on the employment application form to currently hold or to have held DEA/CDS certification in the past.
- b. **Application Form.** Each applicant in these occupations must provide, on the appropriate VA employment application form, information about his or her current or most recent DEA/CDS certificate, if applicable. Any applicant whose DEA/CDS certificate has ever been revoked, suspended, limited, restricted in any way or voluntarily relinquished shall be required to provide a detailed explanation of such action at the time of application for employment.
- c. **Restricted Certificates.** A State licensing board may obtain a voluntary agreement from an individual not to apply for renewal of certification or may decide not to approve the individual's application for renewal as a part of a disciplinary action taken in connection with the individual's professional practice. While there are a number of reasons a license may be restricted which are unrelated to DEA/CDS certification, an individual's State license is considered restricted or impaired for purposes of VA employment if a State licensing board has suspended the person's authority to prescribe controlled substances or other drugs; selectively limited the individual's authority to prescribe a particular type or schedule of drugs; or accepted an individual's offer or voluntary agreement to limit authority to prescribe. (See Paragraphs 13 and 17.)
- d. **Verification.** Current DEA/CDS certification will be verified prior to appointment and documented in the VHA credentialing file. Automatic verification of Federal DEA/CDS certification can be performed in VetPro when a match can be made against the current Federal DEA certification information maintained and electronically updated monthly. If verification cannot be made automatically, an authenticated copy of the DEA/CDS certificate must be entered into VetPro. Current DEA certification will also be sighted during VA employment at the same time as State licensure. (See Paragraphs 13 and 17.) The employee will be asked to fully explain in writing if DEA certification has been revoked,

suspended, limited, restricted or voluntarily relinquished since last verified. Upon receipt of such explanation, the chief of staff will initiate a review of the employee's clinical privileges, if appropriate.

e. Required Action by VA Officials.

- (1) If action taken on an employee's DEA/CDS certificate has the effect of restricting the individual's only State license, immediate action will be initiated to separate the employee under provision of VA Directive and Handbook 5021, Employee/Management Relations, Part VI.
- (2) If, as a result of the review of clinical privileges, a decision is made to propose revocation of an employee's clinical privileges, separation action will be initiated using procedures in VA Directive and Handbook 5021, Employee/Management Relations, Part II.

9. CLINICAL PRIVILEGES.

- a. **Review of Clinical Privileges.** Applicants completing VA application forms will be required to respond to questions concerning clinical privileges at VA and non-VA facilities. If possible, copies of clinical privileges will be obtained for review from the applicant or from the institutions where privileges are or were most recently held.
- b. **Evaluation of Privileges.** As part of the credentialing process, information on clinical privileges will be evaluated by appropriate facility officials. Details concerning any limitation(s) on privileges will be carefully considered prior to appointment.
- c. **On-Going Review.** Clinical privileges will be established and reviewed throughout the individual's employment following standards and guidelines issued by VHA and established in the VA facility's medical staff bylaws. The clinical privileging process must be completed prior to initial appointment.

NOTE: Additional VHA policy concerning clinical privileges is contained in [VHA Directive 1100.20, Credentialing of Health Care Providers.]

10. MALPRACTICE CONSIDERATIONS.

- a. **Applicants.** VA employment applications forms require applicants to give detailed written explanations of any involvement in administrative, professional or judicial proceedings, including Federal torts claims proceedings, in which malpractice is or was alleged. If an applicant has been involved in such proceedings, a full evaluation of the circumstances will be made by officials participating in the credentialing, selection and approval processes prior to making any recommendation or decision on the candidate's suitability for VA employment.

- b. **Employees.** Each employee will be asked to indicate at the time of licensure verification any involvement in proceedings described in subparagraph a, and to provide a written explanation of the circumstances, if appropriate. A review of clinical privileges, as appropriate, will be initiated if clinical competence issues are involved.
- c. **Evaluation of Circumstances.** Facility evaluating officials will consider VA's obligation as a health care provider to exercise reasonable care in determining that individuals are properly qualified, recognizing that many allegations of malpractice are proved groundless. Facility officials will evaluate employee to provide copies of documents pertaining to the case. Reasonable efforts will be made to assure that only individuals who are well-qualified to provide patient care are permitted to do so. Questions concerning legal aspects of a particular case should be directed to the Regional Counsel.

11. DEANS COMMITTEE, MEDICAL ADVISORY COMMITTEES, AND OTHER ADVISORY BODIES. At healthcare facilities with teaching programs, the Under Secretary for Health will approve the establishment of a Deans Committee, Medical Advisory Committees, and other advisory bodies (See VHA Handbook 1400.03, Veterans Health Administration Educational Relationship for more information). The Deans Committee may nominate, for consideration by the facility director, physicians, and dentists for appointment to the professional staff of the facility, including chiefs of service. Nominees may include individuals appointed on a paid or without compensation assignment on a full-time, part-time or intermittent basis; to those appointed on an on-facility fee-basis; and to consultants and attendings. The facility director should consider the Deans Committee's recommendations, but the facility director has the final appointment decision.

12. SUITABILITY.

- a. **General.** If facility officials obtain adverse information during the credentialing process, they will review this against suitability criteria and make a determination in accordance with 5 C.F.R. § 731. The District Counsel can answer questions concerning the use of adverse information in making suitability determinations or the legality of adverse determinations and personal liability involvement.
- b. **Applicants.** If there is any question about an applicant's suitability, no appointment action will be taken, nor will an employment commitment be made, until the matter is resolved.
- c. **Employees.** Conclusive evidence of preemployment unsuitability (character traits, past work performance, etc.) may arise after an individual's appointment under 38 U.S.C. Chapter 73, 74. If continued employment is not in the best interest of the service, the employee's appointment will be terminated under VA

Handbook 5021, Employee/Management Relations, Part VI, Employee Title 38 Separations Not Covered by Parts II and III of this Handbook.

13. GENERAL LICENSURE AND REGISTRATION REQUIREMENTS.

- a. **General.** Specific licensure, registration and certification requirements for individuals appointed under 38 U.S.C. Chapters 73 or 74 are included in paragraphs which follow and in the appropriate qualification standard for the occupation. This paragraph contains definitions and general provisions which apply to all occupations for which licensure and/or registration are required. Applicants must possess at least one active, current, full, and unrestricted license, registration or certification which must be verified by primary source verification from the state licensing board (SLB), to be eligible for appointment, if required for the occupation in the appropriate qualification standard. If all licenses, registrations or certifications are impaired, the individual is ineligible for appointment in VA. Additionally, if the applicant's sole license is considered to be "inactive" because the individual is not practicing in the state where the license is held), the individual is ineligible for appointment in VA.
- b. **Definitions.**
 - (1) **Active Licensure.** An active, current, full, and unrestricted license, registration or certification in a state is one which authorizes the licensee to practice outside VA without any change needed in the status of the license. Employees are responsible for paying fees necessary to maintain a full and active license in a state. If a state waives fees for any reason, such as for an out-of-state practice or for employment in a Federal facility, the employee may not accept the waiver if this will place the license in an inactive or other restricted status.
 - (2) **Primary Source Verification.** Primary source verification is documentation from the original source of a specific credential verifying the accuracy of a qualification.
 - (3) **State.** The term "state" means any of the states, territories, and possessions of the United States, the District of Columbia, and the Commonwealth of Puerto Rico.
- c. **Qualification Requirements Pursuant to 38 U.S.C. § 7402(f).** Covered licensure actions are based on the date the credential was required by statute or VA qualification standard for the occupation.
 - (1) For the purposes of 38 U.S.C. § 7402(f), "for cause" means professional misconduct, professional incompetence, substandard care or any issue requiring VA to report a provider to a SLB under 38 C.F.R. § 47.2. The

District Counsel will address questions concerning interpretation of “for cause” or an assessment of whether a matter constitutes “for cause.” The following are examples of reasons a license may be revoked, terminated or voluntarily relinquished that would be considered “for cause.” This is not a comprehensive, exhaustive or exclusive list, and a “for cause” assessment should be reviewed on a case-by-case basis.

- (a) Higher than expected radiology misinterpretations;
 - (b) Higher than expected surgical complication rates;
 - (c) Failure to address critical alerts in a timely manner;
 - (d) Failure to adequately document patient care;
 - (e) Diversion of drugs;
 - (f) Providing or intending to provide patient care while under the influence of drugs or alcohol;
 - (g) Inappropriate relationship with patient;
 - (h) Patient abuse;
 - (i) Intentional harm of a patient;
 - (j) Research malfeasance;
 - (k) Exhibiting a pattern of poor professional judgment and skill; and/or
 - (l) Egregious instances of unacceptable actions related to patient care (inadvertently leaving a clamp in a patient after a surgical procedure).
- (2) Applicants seeking appointment on or after November 30, 1999, (see Veterans Millennium Health Care and Benefits Act, P.L. 106-117), who have been licensed, registered or certified, as applicable to the occupation for which they are seeking employment, in more than one state and who are being credentialed for a position identified in 38 U.S.C. § 7402(b), other than a facility director, are not eligible for appointment in that occupation if:
- (a) The applicant’s license, registration or certification has ever been revoked or terminated “for cause” by any of those states; or
 - (b) The applicant has voluntarily relinquished a license, registration or certification in any of those states, after being notified in writing by that state of potential revocation or termination for cause.

- i Such individuals may only be eligible for appointment in the occupation if their revoked, terminated or voluntarily relinquished license, registration or certification is restored to a full and unrestricted status.
 - ii Covered licensure actions are based on the date the credential was required by statute or the VA qualification standards for the occupation. For example, if VA first required the credential in 1972, the credential was terminated or voluntarily relinquished in 1983, and the individual applies, or was appointed, to VA after November 30, 1999, the individual is not eligible for VA employment in the covered occupation unless the terminated or voluntarily relinquished credential is restored to an active, current, full and unrestricted status. However, if the credential was terminated or voluntarily relinquished in 1970, before it was a VA requirement, eligibility for VA employment would not be affected. For guidance regarding eligibility for employees with an impaired license, registration or certification, and for those employees appointed before November 30, 1999, with an impaired license refer to paragraph 17 below-Continuing Licensure, Registration and/or Certification Requirements for Employees.
- (3) If an individual has voluntarily surrendered their license, registration or certification, applicable to the position, VA must confirm from the primary source that the individual was notified in writing of the potential for termination for cause. If the entity verifies written notification was provided, the applicant is not eligible for employment unless the surrendered credential is fully restored to an active, current, full and unrestricted status.
- (4) Where the state licensing, registration or certifying entity fully restores the revoked, terminated or voluntarily relinquished credential, the provider's eligibility for employment is restored. These individuals are subject to the same employment process that applies to all individuals in the same job category who are entering the VA employment process. In addition to the credentialing requirements for the position, facility officials must conduct a complete review of the facts and circumstances concerning the action taken against the state license, registration or certification and the impact of the action on the professional conduct of the applicant. Facility officials must document this review in the licensure section of the credentials file.
- (5) This guidance applies to licensure, registration or certification required as applicable to the position subsequent to the publication of this policy and required by statute or VA qualification standards, effective with the date the credential is required.

- d. **Primary Source Verification.** Information obtained through the verification must be documented in writing, either by letter, memo, report of contact or secure electronic verification (e.g., website) in the VHA credentialing file. Facility officials must verify licensure from a primary source at the time of initial appointment, reappointment and expiration in accordance with policy in VHA Handbook 1100.20, "Credentialing and Privileging" and VHA Directive 2006-067, "Credentialing of Health Care Professionals."
- e. **Changes in Authority to Prescribe.** The license of an individual in an occupation authorized to prescribe is considered to be restricted or impaired if the SLB has suspended the individual's authority to independently prescribe controlled substances or other drugs; selectively limited the individual's authority to prescribe a particular type or schedule of drugs; or accepted an individual's offer or voluntary agreement to limit the authority to prescribe. The state's action may be taken in connection with the individual's Drug Enforcement Administration (DEA) certification and/or with a separately issued state authorization to prescribe. (See paragraph 8 of this section.) This is only one example of a situation in which an individual's license may be restricted or impaired.
- f. **Changes in State Licensure Requirements.** Employees are responsible for complying with any changes in licensure and/or registration requirements which may be imposed by the state(s) of licensure. If employees show they were not notified of the new requirement and proceeded in good faith under the assumption that the license remained full and unrestricted, this is accepted as prima facie evidence of licensure up until discovery of the change in requirements. When employees are notified through any source of a change in requirements, they must act immediately to make the license whole at the earliest possible date, normally no more than 15 workdays after notification. If employees are unable to make the license whole and, as a result, holds no full unrestricted license in a state, actions to separate for failure to meet qualification requirements must be taken under VA Handbook 5021, Employee/Management Relations.
- g. **Administrative Delay by State Licensing Board (SLB).**
 - (1) Facility officials who learn that a SLB has declared a system-wide delay in processing renewal applications of registration prior to the expiration date and has granted a special grace period as a result of the delay, should notify Office of the Chief Human Capital Officer (OCHCO), Recruitment and Placement Policy Service (RPPS) so a general notice to all VHA facilities can be issued. The delay must be general rather than personal in scope and impact. If no such notice has been issued by OCHCO, RPPS, facility officials should verify with the state board that VA employees are considered to be fully licensed, registered or certified during the delay period. Verification of current licensure, registration or certification may be

obtained through telephone contact with the state board pending receipt of the renewal. Typically, this will involve a large amount of license renewals and would not pertain to the individual renewal license.

- (2) Under these unique circumstances, if employees are unable to present evidence of current licensures, registrations or certifications prior to the expiration date, facility officials must verify through written or telephone contact with the SLB that the employees' applications for renewal are received and the employees are considered to be fully licensed, registered or certified. If officials are unable to verify this with the SLB prior to the expiration date of licensure, employees will be required to provide evidence that the application for renewal was made in a timely manner (e.g., 30 days) in order to be permitted to continue in a work status. Where possible, a facility official must cite evidence of the employees' application for licensure, registration or certification renewal and appropriately document in the VHA credentialing file until primary source verification of renewal is received. Employees are notified in writing that separation actions may be initiated under provisions of VA Handbook 5021, Part II, Part III or Part VI, if evidence of renewal is not received within 30 workdays of the expiration date. Some states authorize a "grace period" after the licensure, registration and/or certification expiration date, during which an individual is considered to be fully licensed, registered and/or certified whether or not the individual has applied for renewal on a timely basis. Facility officials must not initiate separation procedures for failure to maintain licensure, registration or certification on a practitioner whose only license, registration and/or certification has expired if the state has such a grace period and considers the practitioner to be fully and currently licensed, registered or certified.
- h. **Questionable Licensure Status.** Facility officials must consult with District Counsel if circumstances cause them to question the status of an employee's license, registration or certification or if it meets statutory or regulatory requirements. See subparagraph 17.c. of this section for additional information.
- i. **Payment of Licensure or Registration Renewal Fees.** VA employees are responsible for paying any required fees in a timely basis to ensure their licensures, registrations or registrations are maintained in a current, active status. If an affiliated institution normally pays the fees for VA employees who work part-time or have teaching agreements at that institution, employees are still responsible for assuring that licensures, registrations or certifications are maintained in an active, current status.

14. LICENSURE FOR PHYSICIANS, DENTISTS, PODIATRISTS, OPTOMETRISTS, AND CHIROPRACTORS.

- a. **General.** Any physician, dentist, podiatrist, optometrist or chiropractor appointed under 38 U.S.C. Chapters 73 or 74 is required to possess an active, current, full and unrestricted license to practice medicine, surgery, osteopathy, dentistry, podiatry or optometry, as appropriate, in a state, and must furnish evidence of this prior to appointment. Current registration will be maintained in accordance with the requirements of the state of licensure and evidence of such licensure and registration must be presented by the employee for verification periodically as requested throughout VA employment. A limited license or any other license less than a full, unrestricted state license; however, denominated (e.g., temporary, limited or institutional), will not meet the licensure requirement for appointment under 38 U.S.C. Chapters 73 or 74.
- b. **Exceptions.** The only exceptions to the licensure requirements are:
 - (1) Individuals meeting all the professional requirements for admission to the state licensure examination and passed the examination but possess a state license limited on the basis of non-citizenship or not meeting the residence requirements of the state.
 - (2) Individuals granted an institutional license by the state which permits faculty appointments and full, unrestricted clinical practice at a specified educational institution and its affiliates, including the VA healthcare facility; or an institutional license permitting full, unrestricted clinical practice at the VA healthcare facility. This exception is used only to appoint individuals who are well-qualified, recognized experts in their fields, such as visiting scholars, clinicians, and/or research scientists and only under authority of 38 U.S.C. § 7405. It may not be used to appoint individuals whose institutional licenses are based on actions taken by SLBs as described in paragraph 13c above.
 - (3) Individuals meeting all the professional requirements for admission to the state licensure examination and have passed the examinations, but who have been issued time-limited or temporary state licenses or permits pending a meeting of the state licensure board to give final approval to the candidates' request for licensure. The licenses must be active, current, and permit a full, unrestricted practice. Appointments of individuals with such licenses must be made under authority of 38 U.S.C. § 7405 and will be time-limited not to exceed the expiration date of licensure.
 - (4) Residents holding licenses which geographically limit the area which practice is permitted or which limits residents to practice only in specific healthcare facilities but authorizes them to independently exercise all the professional and therapeutic prerogatives of the occupation. In some

states, such licenses may be issued to residents to permit them to engage in outside professional employment during the period of residency training. This exception does not permit the employment of a resident who holds a license which is issued solely to allow the individual to participate in residency training.

- c. **Verification.** The facility chief of staff will ensure physicians, dentists, podiatrists, optometrists, and chiropractors licensures and registrations are verified prior to their appointment under 38 U.S.C. §§ 7306, 7401 or 7405. This includes all individuals serving on a full-time, part-time, intermittent or on-facility fee-basis (including consultants and attendings), whether paid or without compensation.
- (1) **Licensure Verification with State Boards.** The facility ~~chief of staff~~ Chief of Staff will confirm in the VHA credentialing file, VetPro, the status of all licenses claimed by physicians, dentists, podiatrists, optometrists, and chiropractors, are verified with the appropriate SLB for all states in which the applicant lists having ever held a license. This includes licenses which the applicant lists as active, current, full, and unrestricted as well as licenses the applicant lists which were held at any time in the past and which have been allowed to lapse or which are no longer current for any reason. [The] facility Chief of Staff or designee is responsible for sighting verification of the licensure of these individuals.
 - (2) **Review of Employment Application.** Facility officials must contact the state board to ensure that no restriction or revocation action has occurred for candidates with recent employment in a state in which no licensure is indicated on the application form.
 - (3) **Physician Screening with Federation of State Medical Boards (FSMB).** Facility officials must conduct a mandatory FSMB query and document the results in the VHA credentialing file, VetPro.
- d. **Licensure History.** For guidance on appointments, refer to Paragraph (13.c.), Qualification Requirements Pursuant to of 38 U.S.C. § 7402(f).
- e. **Waiver of Licensure Requirement.**
- (1) The appointing official may waive the licensure requirement of physician, dentist, podiatrist, optometrist, or chiropractor occupations if the candidates are being appointed to a research, academic or administrative position when they have no direct responsibility for patient care.
 - (2) The facility director may waive the licensure requirement if the individual is serving in a country other than the United States and licensure is in that country (i.e., Philippines).

15. REGISTRATION FOR [REGISTERED] NURSES [RNS] AND [ADVANCED PRACTICE] NURSES [APNS].

- a. **General.** Any [RN or APN] appointed under 38 U.S.C. Chapters 73 or 74 is required to possess active, current, full, and unrestricted registration as a graduate professional nurse in a state, which must be verified by primary source verification from the SLB prior to appointment. Information obtained through the verification process must be documented in writing, either by letter, memo, report of contact or secure electronic verification. Documentation will be filed permanently in the official personnel folder. A limited registration or any other registration less than a full, unrestricted state registration does not meet the registration requirement for appointment. [See VA Handbook 5005, Part II, Appendix G6a-G6d for additional information on specific licensure and certification requirements for APNs.]
- b. **Verification.** The HR Officer or nurse executive or designee, must obtain primary source verification from the SLB of the registration of all [RNs and APNs] prior to their appointment under 38 U.S.C. Chapters 73 or 74. This includes full-time, part-time, intermittent and on-facility fee-basis [RNs or APNs] (including consultants), whether they are paid or serving without compensation. [RNs and APNs] utilized on an on-facility contract or on-facility sharing agreement basis are also covered by provisions of this paragraph.
 - (1) Except as provided in subparagraph d, every VHA [RN and APN] must have at least one active, current, full and unrestricted registration as a graduate professional nurse in a state.
 - (2) The appropriate official will certify in the VHA credentialing file, VetPro, that the status of all registration(s) has been verified with the appropriate state board(s) for all state(s) in which the applicant lists having ever held registration. This includes registration(s) which the applicant lists as active, current, full, and unrestricted as well as registration(s) the applicant lists which were held at any time in the past and which have been allowed to lapse or which are no longer current for any reason.
 - (3) For [RNs or APNs] with recent employment in a state in which no registration is indicated on the application form, the state board will be contacted to assure that no restriction or revocation action has occurred.
- c. **Impaired Registration.** Appointing officials may approve the appointment or reappointment of a [RN or APN] who has previously had impaired registration, provided the candidate currently has full and unrestricted registration (refer to paragraph 17c of this section).
- d. **Waiver of Registration Requirement.** The facility director may waive the registration requirement of a [RN or APN] if the individual is serving in a country

other than the United States and the registration is in that country (i.e., Philippines).

16. LICENSURE, REGISTRATION, AND/OR CERTIFICATION FOR TITLE 38 ASSOCIATED HEALTH PERSONNEL.

- a. **General.** Any employee in a physician assistant (PA) or expanded-function dental auxiliaries position appointed under 38 U.S.C. §§ 7401(1) or 7405(a)(1)(A) must meet licensure, registration or certification requirements as specified in the appropriate qualification standard. Individuals appointed under 38 U.S.C. § 7401(3) or under 38 U.S.C. §§ 7405(a)(1)(B), 7306 to occupations listed in 38 U.S.C. § 7401 must meet licensure, registration and/or certification requirements in the appropriate qualification standard for the occupation. Applicants will provide evidence of current licensure, registration and/or certification and other relevant credentials for verification prior to appointment and throughout the appointment process as requested. Using the VHA credential process, facility officials will verify credentials from a primary source prior to appointment. Once appointed, employees must maintain multiple licenses, registrations and/or certifications in good standing and keep VA officials apprised of anything that would adversely affect or otherwise limit their appointment, e.g., health issues, proposed and final actions against a claimed credential, etc. A limited license, registration or certification or any status of these which is less than full and unrestricted will not meet the qualification standard requirement for the occupation.
- b. **Verification.** Prior to appointment, each applicant's credentials will be checked as follows and verified in accordance with applicable VHA credentialing policy for dependent practitioners and documented in the VHA credentialing folder, VetPro, by officials designated by the facility director as follows:
 - (1) The facility director designates the official(s) responsible for documenting the status of all licenses, registrations or certifications with the appropriate state boards for all states the applicant lists ever having licensure, registration or certification on VA Form 10-2850C, Application for Associated Health Occupations. This includes licenses registrations or certifications which the applicant lists as active, current, full and unrestricted as well as license(s), registration(s) or certification(s) the applicant lists which were held at any time in the past and which have been allowed to lapse or which are no longer current for any reason.
 - (2) Candidates for appointment under 38 U.S.C. § 7401(3) or 38 U.S.C. § 7405(a)(1)(B) and expanded-function dental auxiliaries (EFDAs) appointed under 38 U.S.C. §§ 7401(1), 7405(a)(1)(A) must present evidence of license, registration or certification by the appropriate national certifying body prior to appointment. The official(s) designated by

the facility director documents the verification in the VHA credentialing file, VetPro.

- (3) PAs must present evidence of certification by the appropriate national certifying body prior to appointment for verification by the official(s) designated by the facility director in the VHA credentialing file, VetPro. Licensure is required for PAs to practice outside VA in some states, although it is not required for VHA employment. If a PA claims licensure in any state(s), the official(s) designated by the facility director verifies licensure status with the SLBs as a part of the credentials review and documents the verification in the VHA credentialing file.
 - (4) The appropriate official(s) must contact state boards to ensure that no restriction or revocation has occurred for candidates with recent employment in a state in which no licensures, registrations or certifications are indicated on the application form. Such verification must be documented in the VHA credentialing file.
- c. Impaired Licensure. Appointing officials may approve the appointment or reappointment of an individual covered by this paragraph who has previously had an impaired license, registration or certification, provided the candidate currently has full/unrestricted license, registration or certification (refer to paragraph 17c of this section).

17. CONTINUING LICENSURE, REGISTRATION, AND/OR CERTIFICATION REQUIREMENTS FOR EMPLOYEES.

a. Verification of Primary License.

- (1) The expiration date of an appointee's primary license, registration, and/or certification, is coded for follow-up purposes []. For coding purposes, the appointee will specify the state in which primary licensure is claimed. The facility director will designate the official(s) who is responsible for the follow-up verification of these credentials. Facility designees will verify licensure, certification, and registration by primary source verification from SLB. Information obtained through the verification process must be documented in writing, either by letter, memo, report of contact or secure electronic verification (e.g., website). Documentation is filed permanently in the employee's VHA credentialing file.
- (2) Only the initial and latest verification must be maintained in the VHA credentialing file. HR staff are not required to code follow-up expiration dates for employees whose registration or certification is issued on a one-time basis for whom there is no continuing requirement to maintain currency.

b. Other Verification.

- (1) Individuals with multiple licenses, registrations, and/or certifications are responsible for maintaining these credentials in good standing and of informing the facility director or designee of any changes in the status of these credentials.
- (2) Employees must provide confirmation for any active license that is not renewed at the time of expiration or at the time of reappraisal that such license expired in good standing.
- (3) Facility directors are responsible for establishing a mechanism for assuring that such multiple licenses, registrations, and/or certifications are consistently held in good standing or, if allowed to lapse, are relinquished in good standing. For any such credentials which were held previously, but which are no longer held or no longer full and unrestricted, the employee will be asked to provide a written explanation of the reason(s). The verifying official will contact the state board(s) or issuing organization(s) to verify the reason(s) for any change.

c. Impaired Licensure.

- (1) When facility officials learn an employee with an active, current, full, and unrestricted license, registration or certification in a state has had any other license or registration or certification to practice, as applicable to their current occupation, revoked or terminated for cause, or such license, registration or certification was voluntarily relinquished after being notified in writing by that state of the potential termination for cause, they must determine if the employee is eligible to maintain their appointment. See paragraph 2 below and 38 U.S.C. § 7402(f).
- (2) In those cases where the license, registration or certification has been revoked, terminated or the employee has voluntarily relinquished such license, registration or certification after being notified in writing by that state of the potential termination for reasons other than “for cause,” facility officials will investigate to ascertain the full circumstances and, if appropriate, will initiate a review of clinical privileges, take disciplinary action and/or separation procedures.
- (3) If the findings of the investigation determine the employee did not violate 38 U.S.C. § 7402(f), then the employee may be retained. In cases where the license, registration or certification has been suspended, denied, restricted, limited, issued/placed on probationary basis, facility officials will engage in the same process identified in paragraph (2).
- (4) The following individuals are not eligible for continued appointment:

- (a) Individuals who were appointed before November 30, 1999, to a position identified in 38 U.S.C. § 7402(b) (other than a facility director) who have maintained continuous appointment since that date and are identified as having been licensed, registered or certified (applicable to their current position) in more than one state and, on or after November 30, 1999, have had such license, registration or certification revoked or terminated for cause by any of those states; or
 - (b) Individuals who were appointed before November 30, 1999, to a position identified in 38 U.S.C. § 7402(b) (other than a facility director) who have maintained continuous appointment since that date and are identified as having been licensed, registered or certified (as applicable to their current position) in more than one state and, on or after November 30, 1999, voluntarily relinquished a license, registration or certification in any of those states after being notified in writing by that state of potential termination for cause.
- (5) Individuals who were appointed prior to November 30, 1999, and have been on a continuous appointment since that date are not disqualified for employment by any license, registration or certification revocations or terminations for cause, or voluntary relinquishment after being notified in writing by that state of potential termination for cause that predate November 30, 1999, provided they possess one full and unrestricted license applicable to the position. See 38 U.S.C. § 7402(f).

d. Failure to Maintain Current Licensure, Registration or Certification.

- (1) An employee who does not maintain an active, current, licensure, registration and/or certification (if required), or who fails to show evidence of such when requested, must be separated under appropriate procedures in VA Handbook 5021, Part VI, [Employee/Management Relations]. The District Counsel will answer questions about whether to separate an employee based on failure to maintain current licensure, registration or certification.
- (2) Some states authorize a grace period after the licensure, registration, and/or certification expiration date, during which an individual is considered to be fully licensed, registered, and/or certified whether or not the individual has applied for renewal on a timely basis. Facility officials will not initiate separation procedures for failure to maintain licensure, registration or certification on an employee whose only license, registration, and/or certification has expired if the state has such a grace period and considers the employee to be fully and currently licensed/registered/certified.

18. REPORTING TO STATE LICENSING BOARDS. Licensed, registered, and/or certified employees and former employees will be reported to state licensing, registration or certifying boards and/or to other monitoring bodies in accordance with provisions VHA Handbook 1100.18, Reporting and Responding to SLBs. This requirement applies to all licensed, registered, and/or certified employees included within the scope of this chapter, including residents.

19. HEALTH STATUS OF APPLICANTS AND EMPLOYEES.

- a. **General.** The credentialing process includes an evaluation of the health status of applicants as well as employees. Policies and procedures related to physical requirements for applicants and employees are contained in VA Handbook 5019, Employee Occupational Health Service, Part II, Examinations and Evaluations.
- b. **Preemployment Physical Examination.** All full-time, part-time and intermittent employees are required to satisfactorily complete a preemployment physical examination prior to appointment as required for positions with positive physical and mental requirements outlined in VA Handbook 5019[Employee Occupational Health Service].
- c. **Certification of Physical and Mental Fitness.** All applicants and employees, whether paid or appointed on a without compensation basis, who request clinical privileges, including those utilized on a full-time, part-time or intermittent basis, as consultants or attendings or on a fee-basis, and including those utilized on an on-facility contract or on-facility sharing agreement basis, are required to certify that they are physically and mentally capable of performing the requested privileges. Service chiefs will be required to certify that, to the best of their knowledge, the applicant or employee is physically and mentally capable of satisfactorily performing the requested clinical privileges. In cases where the service chief is a nonphysician, certification of satisfactory health status must also be obtained from a physician who is familiar with the duties the individual is privileged to perform.

20. CREDENTIALS OF RESIDENTS AND TRAINEES.

- a. **General.** Medical, dental, podiatry, optometry, and chiropractic residents and trainees appointed under 38 U.S.C. §§ 7405, 7406 must meet the licensure requirements for residents and trainees specified in the appropriate qualification standard for the occupation. If licensure is required, evidence of licensure must be furnished prior to appointment and periodically throughout VHA employment as requested.

NOTE: See VHA Handbook 1400.01, Supervision of Physician, Dental, Optometry, Chiropractic, and Podiatry Residents.

b. Verification.

- (1) The program director for an integrated program must send the Trainee Qualifications and Credentials Verification Letter (TQCVL) (formerly the Residents/Trainees Credentials Verification Letter or RCVL) through the facility chief of staff to the facility director for approval prior to the facility director's approval of the appointment of any resident or trainee, whether paid or without compensation. If the residency or training program is not integrated with an affiliate, the VA facility program director must verify all credentials of residents or trainees and sign the TQCVL. A new TQCVL is required for each academic year that the resident or trainee is appointed to a VA facility.
- (2) The TQCVL contains certification that all the documents needed for the appointment of that particular individual into the program are in order. For medical residents, these documents must be in compliance with the requirements of the Accreditation Council for Graduate Medical Education (ACGME) and must also meet all requirements of the program. The program director must verify all credentials (diplomas, letters of reference, certificates of advanced training and, where applicable, Educational Council for Foreign Medical Graduates (ECFMG) certification, DEA certification and all state professional licenses held prior to entry into the program or obtained during residency training), and affirm the resident or trainee is physically and mentally fit to take care of patients. (See appendix II-K of this chapter for sample TQCVL letter.)
- (3) The program director will notify the facility director if a resident or trainee has had any credentialing problems. Specifically, this will include any problems relating to diplomas, references, previous residency or other training, licensure, clinical privileges, DEA certification, and/or professional liability insurance as indicated on the employment applications. (VA Form 10-2850b, Application for Residency, for medical and dental residents and VA Form 10-2850c for other residents and trainees.)
- (4) Residents functioning within the scope of their training program must meet clinical practice requirements as specified in VHA Handbook 1400.01, [Supervision of Physician, Dental, Optometry, Chiropractic, and Podiatry Residents]. The program director, or in certain cases, by the appropriate VA service chief must provide the TQCVL that confirms that ACGME-established criteria for the essentials and special requirements for residency training programs have been followed. Such residents are generally excluded from clinical privileging requirements required for VHA staff physicians, except as provided for in subparagraph d of this paragraph.

- (5) Appendix II-K of this chapter contains a sample format for the TQCVL. It must include a list of all the paid or without compensation residents or trainees to be rotated at any time during the academic year to the VA facility.
 - (6) The facility chief of staff will retain the original TQCVL from each program director for the academic year in a Resident/Trainee Credentials Verification File for five years.
 - (7) Until the facility director countersigns the program director's TQCVL, a resident or trainee will not be allowed to participate in any of the patient care activities at the VA facility. There will be no exceptions to this policy.
- c. **Application Form.** Prior to appointing any resident or trainee, the facility chief of staff or the facility director's designee will document in the VHA credentialing file evidence of current, full, and unrestricted licensure, registration, and/or certification has been verified by primary source from the SLB in which the applicant claims to have ever been licensed. The TQCVL may be cited as evidence of licensure verification and as evidence of verification of other required credentials. If the TQCVL is cited as evidence of credentials verification, this will be noted on the VA Form 10-2850b and 10-2850c or on VA Form 4682, Certification of Licensure, Registration, or Bar Membership.
- d. **Employment of Residents as Admitting Physicians.** Medical residents functioning outside the scope of their training program who are appointed as admitting physicians must meet VA physician qualification standard requirements, including licensure in a state, be fully credentialed in accordance with provisions of this section, and be privileged in accordance with provisions applicable to VHA staff physicians.

[]

**SECTION E. GENERAL APPOINTMENT PROVISIONS
UNDER 38 U.S.C. CHAPTER 74**

1. APPOINTMENT PROCESSING REQUIREMENTS.

- a. **Applications Received by Facilities.** Applications received by facilities will be referred promptly to the Human Resources (HR) Office. The HR Office staff will review applications for compliance with administrative and regulatory requirements. Candidates who fail to meet these requirements and thus fail to qualify for appointment will be notified by the Human Resources Management Officer. Applications from selectees who meet VA requirements for appointment under 38 U.S.C § 7401(1) will be referred to the appropriate [supervisory official] for necessary action as follows:

NOTE: See section F of this part for those occupations under 38 U.S.C. § 7401(3):]

- (1) Selection and Appointment Action.
- (b) The [supervisory official, in collaboration with HR,] will evaluate qualifications and recommend a grade level and step based on VA qualification standard requirements. Except for physicians, dentists, and podiatrists, the [supervisor] will also recommend a rate of pay with due consideration being given to prior service and professional achievement. (See VA Directive and Handbook 5007, Pay Administration, Part II.) [] For physician service chiefs and comparable positions, see appendix II-H1.
 - (c) For podiatrists, see appendix II-H3.
 - (d) For optometrists, see appendix II-H4.
 - (e) For chiefs of nurse anesthesiology sections, see appendix II-H6.
[]
 - (f) For Chiefs of Pharmacy Service (all grades), [] see appendix II-H8.
 - (g) For occupational and physical therapists as section chief, see appendix II-H9.
 - (h) For registered nurses [and advanced practice nurses] at grades IV and V, see appendices II-H5.
 - (i) For Dentists and EFDAs, see appendix II-H2.

- (j) For doctor of chiropractic, see appendix II-H10.

NOTE: See section B, paragraph 11 of this chapter for provisions relating to Deans Committee recommendations.

- (2) **Action When No Facility Vacancy Exists.** When a facility receives an application and no appropriate vacancy exists at that facility, and the applicant wishes employment elsewhere, the HR Officer will advise the applicant to consult the VHA vacancy database [www.vacareer.va.gov] for the location of current vacancies. At the applicant's request, the application will be referred for employment consideration to the VA facility of the applicant's choice which has a suitable vacancy.
- b. **Applications Received by Central Office.** If the applicant is to be considered for facility assignment, the application will be referred to the facility of the applicant's choice and processed as provided in subparagraph (1). If the applicant is to be considered for Central Office assignment, an interview may be conducted in Central Office or at a VA facility determined to be more convenient. The [hiring official] will consider the applicant's professional qualifications [] and forward [selection] to the appropriate approving authority. The [servicing HR Office for VA] Central Office will take the necessary appointment action.
- c. **Applicants Not Recommended for Appointment.** When an applicant is not recommended for appointment [], the applicant will be notified in a letter, signed by the facility chief of staff or appropriate approving authority that the individual's appointment has not been recommended. The letter will briefly state the basis for the action. The letter should be reviewed by the HR Officer for adherence to technical requirements.

2. APPOINTMENT ABOVE THE MINIMUM FOR SUPERIOR QUALIFICATIONS.

- a. Full-time, part-time or intermittent podiatrists, optometrists, chiropractors, RNs, APNs, PAs, and EFDAs, who meet the qualification requirements for appointment, may have their initial rate of pay fixed at a step rate above the minimum of the appropriate grade in recognition of superior qualifications, experience, and/or achievement exceeding the expected standards for the grade. The initial rate of pay may be set at any step rate within the grade (See VA Directive and Handbook 5007, Pay Administration, Part II.)

NOTE: Physicians and dentists are not eligible for appointment above the minimum rate of the grade. The step rate for a physician or dentist is determined by the number of total years of service the individual has worked in the VHA as reflected by his/her VA service date. However, superior qualifications for physicians and dentists can be addressed through the use of market pay. See part IX of VA Handbook 5007, Pay Administration.

- b. Individuals appointed under authority of 38 U.S.C. § 7401(3), or under authority of 38 U.S.C. 7405 to occupations identified in 38 U.S.C. § 7401(3), may be appointed above the minimum step of the grade under provision of VA Directive and Handbook 5007, Pay Administration. This includes hybrid title 38 occupations. The step rate for occupations under 38 U.S.C. § 7401(3) cannot be based on the number of years of experience alone. The specific criteria for steps above the minimum rate in VA Handbook 5007, Pay Administration, Part II, Chapter 3, Paragraph 3b must be justified.
- c. Appointment at a step rate above the minimum shall be based on conclusive evidence of superior qualifications which equates to the step rate assigned. Qualifications used to meet minimum grade level requirements in the qualification standard will not be used to also justify appointment at a step rate above the minimum of the grade. Determinations as to whether an individual should be appointed at a step rate above the minimum will be made fairly, consistently and according to Department criteria. The following are examples of appropriate criteria:
 - (1) Significant and distinguished contribution in some phase of the appropriate occupation as evidenced by difficult and original research, writing, and publications in professional media of stature or special recognition in teaching, or professional practice.
 - (2) Special competence in the occupation as evidenced by service with professionally recognized committees, groups or responsible offices in professional societies above the local level, or consultative services within the occupation. The competence attained must be supported by achievement of renown on a regional or wider basis.
 - (3) Educational preparation that clearly exceeds requirements for the grade, expertise in specialized treatment modalities, outstanding competence as a clinical practitioner or significant contributions concerning some aspect of the occupation.
 - (4) Eligibility for certification or certification by an American Specialty Board.
 - (5) Certification by the appropriate national certifying body to formally recognize a level of excellence based on demonstrated superior performance in clinical practice, assessment of knowledge and colleague endorsement.
 - (6) Other appropriate evidence of professional stature.
- d. [] **Processing.** The approval of step rates above the minimum is subject to the following requirements:

- (1) **RNs/APNS.** The facility director (or nurse executive, if so delegated) [] may approve the appointment of RNs at any step above the minimum of the grade.
- (2) **APNs (CNAs).** The facility director [(or chief of staff or nurse executive, if so delegated)] may approve the appointment of APNs (CNAs) to any step above the minimum of the grade. APNs (CNAs) appointed on or after May 4, 1993, may not be appointed at a step rate above the minimum for the grade based on certification by the Council on Certification of Nurse Anesthetists. Certification is a condition of employment and may not be used as a basis for appointment above the minimum step of the grade on initial appointment or reappointment.
- (3) **PAs.** The facility director [] may approve the appointment of PAs to any step above the minimum of Chief grade or below.

SECTION F. APPOINTMENTS UNDER 38 U.S.C. § 7401

- 1. GENERAL.** The primary consideration, prior to making selections and appointments under this authority, is to evaluate qualifications and personal characteristics as they relate to what is essential to successful performance of assigned responsibilities. Prior to effecting appointments under this authority, [] HR staff [] and hiring officials are required to determine that the candidate's professional qualifications, physical and mental capacity, emotional stability, and any other pertinent qualifying factors, warrant a permanent appointment. The use of this appointment authority should essentially provide tenure for the employee and ensure the continuation of quality service for VHA. (See section G for procedures concerning full-time temporary, part-time, intermittent or fee-basis appointments under 38 U.S.C. § 7405.)

- 2. APPOINTMENTS UNDER 38 U.S.C. § 7401(1).** Only full-time permanent appointments of physicians, dentists, podiatrists, optometrists, chiropractors, RNs, APNs, PAs, and EFDAs are made under authority of section 7401(1). These appointments are subject to a two-year probationary period requirement as specified in 38 U.S.C. § 7403(b)(1). (See Sections A and G of this chapter for probationary period requirements for individuals appointed as part-time or intermittent registered nurses under 38 U.S.C. § 7405(a)(1)).

 - a. [The appropriate supervisor will obtain approval to fill a vacant position in accordance with local facility procedures. Once approval is obtained, the service will initiate the recruitment action and contact the servicing HR Office.
 - b. Before recruitment is initiated, HR staff will work in collaboration with the hiring official and/or designated occupational subject matter expert (SME) to identify the eligibility and qualifications requirements pertaining to the assignment and grade level for the position to be filled in accordance with the qualification standards found in VA Handbook 5005, Part II, Appendix G. If the hiring official is not a SME in the profession, the supervisor must consult with the profession's SME throughout the recruitment and onboarding process for the vacant position.
 - c. Once applications are received, HR staff will determine eligibility and qualifications in accordance with standards found in VA Handbook 5005, Part II, Appendix G, document the determination as instructed by VHA national policy office and recommend the appropriate grade to the hiring official for appointments, promotions, reassignments, details, and change to lower grades. The qualification determination for each applicant must be documented by HR completing a separate VHA qualification form for each of the applicants.
 - d. HR staff will notify candidates who fail to meet the requirements and fail to qualify for appointment.

Part II

Chapter 3

- e. Processing requests for promotions, reassignments, and change to lower grades must be made in compliance with VA Handbook 5005, Staffing, Part III, Chapter 4, paragraph 9.
- f. The hiring official will receive a list of qualified applicants from HR staff for consideration of the vacancy. If the hiring official is not a SME for the profession, the hiring official must consult with the profession's SME throughout the recruitment and onboarding process for the vacant position. The hiring official and/or occupational SME will review applicant(s) referred for selection. This may take the form of a panel.
 - (1) Acceptable SMEs may be identified by national program offices for specific assignments.
 - (2) If a SME designation is not made by the national program office for the assignment, then a SME is a person with direct knowledge or with bona fide expert knowledge of what is performed in the job.
 - (3) An SME must have received training on the requirements in the qualification standard for the occupation/assignment and should typically be at or above the grade levels being considered for the candidate.
- g. The SME will resolve any issues and/or concerns with HR regarding functional statements, announcements, and qualification determinations of applicants being referred and considered.
- h. When there is a disagreement on the interpretation of a qualification standard for the development of a functional statement, posting of vacancy or qualification standard determination, the servicing HR Office will request guidance, interpretation, and decision from the Office of Workforce Management and Consulting (WMC). WMC will seek guidance from the designated national program office. If further resolution is needed, WMC will consult with the OCHCO, Recruitment and Placement Policy Service (059).
- i. The Facility/Medical Center Director/Network Director or delegated officials will (for personnel under their jurisdiction) review and serve as the deciding official on requests for above the minimum entrance rate on appointments. (See VA Handbook 5007, Pay Administration, Part VI, chapter 6.)
- j. The Under Secretary for Health or delegated/designated Central Office Officials will (for personnel under their jurisdiction) review and serve as the deciding official on requests for above the minimum entrance rate on appointments.]

- 3. APPOINTMENTS UNDER 38 U.S.C. § 7401(3).** Only full-time permanent appointments of hybrid title 38 employees are made under authority of section 7401(3). These appointments are subject to title 5 probationary period requirements. (See chapter 2, section A, paragraph 9, this part.)
- a. The supervisor at the appropriate level will obtain an approval to fill a vacant position in accordance with local procedures. Once approval is obtained the service will initiate recruitment action and contact the servicing HR Office.
 - b. Before recruitment is initiated, HR staff will work in collaboration with the [selecting official and/or designated occupational subject matter expert (SME)] to determine the eligibility and qualifications requirements that pertain to the assignment and grade level for the position to be filled in accordance with the qualification standards found in VA Handbook 5005, Part II Appendices found in Appendix G. If the [selecting official] is not a subject matter expert in the profession, the supervisor must consult with the profession's subject matter expert throughout the recruitment and onboarding process for the vacant position.
 - c. HR staff will determine eligibility and qualifications in accordance with standards found in VA Handbook 5005, Part II found in Appendix G, document the determination as instructed by VHA national policy office and recommend the appropriate grade to the selecting official for appointments, promotions, reassignments, [details] and change to lower grades. The qualification determination for each applicant must be documented by HR staff completing a separate VHA qualification form for each of the applicants.
 - d. HR staff will notify candidates who fail to meet the requirements and fail to qualify for appointment.
 - e. Processing requests for promotions, reassignments and change to lower grades in compliance with VA Handbook 5005, Part III, Chapter 4, paragraph 9.
 - f. [The selecting official will receive a list of qualified applicants from HR staff for consideration of the vacancy. If the selecting official is not a SME for the profession, the selecting official must consult with the profession's SME throughout the recruitment and onboarding process for the vacant position. The selecting official and/or the occupational SME will review applicant(s) referred for selection. This may take the form of a panel.
 - g. An SME is one who holds a position that is designated by the national program office as the SME (e.g., Social Work Chief) through guidance provided in policy; or if the SME designation is not made by the national program office, then an SME is a person with direct knowledge or with bona fide expert knowledge of what is done in the job. An SME must have received training on the qualification standard of the occupation and assignment. The SME will address any issues

and/or concerns with HR regarding functional statements; announcements; and qualification determinations of applicants being referred and considered. When there is a disagreement on the interpretation of a qualification standard for the development of a functional statement, posting of vacancy or qualification determination, the servicing HR Office will request guidance, interpretation, and decision from the Office of Workforce Management and Consulting (WMC). WMC will seek guidance from the designated national program office and/or Recruitment and Placement Policy Service (059) when appropriate and/or necessary.]

- h. Once a selection is made the supervisor will consult with HR and the profession subject matter expert (if applicable) and submit supporting documentation for utilization of pay setting flexibilities (if applicable) found in VA Handbook 5007, Pay Administration, Part II, Chapters 2, 3 and 4, pertaining to hybrid title 38.
- i. Facility/Medical Center Director or Network Director will (for personnel under their jurisdiction) review and serve as the deciding official on requests for additional steps above the minimum on appointments.

NOTE: For more information on probationary periods, see section A, paragraph 4 of this chapter and VA Directive and Handbook 5021, Employee/Management Relations, Part III.

**SECTION G. APPOINTMENTS UNDER 38
U.S.C. § 7405**

1. TEMPORARY FULL-TIME APPOINTMENTS UNDER 38 U.S.C. § 7405(a)(1).

- a. **General.** Temporary full-time appointments are made under authority of 38 U.S.C. § 7405(a)(1). These appointments may be made when they are in the best interest of the service, such as under the following circumstances:
- (1) To employ individuals in occupations identified in sections 7401(1) and 7401(3) when the work to be performed by the employee is of a temporary nature and can be completed within a 3-year or shorter period.
 - (2) To employ [temporary full-time RNs, APNs, PAs, EFDAs or hybrid title 38 employees pending processing of probationary appointments when the applicants meet the basic requirements for appointment. [] This includes appointments above the minimum step of the grade for temporary full-time RNs, APNs, PAs, and EFDAs provided the application and related documentation show evidence of superior qualifications as described in section E, paragraph 2 of this chapter.
 - (3) To employ physicians pending processing of probationary appointments when probationary appointments require the approval of the Under Secretary for Health or designee.
 - (4) To employ residents who have just completed their formal VA residency training and are awaiting probationary appointment.
 - (5) To reemploy annuitants.
 - (6) To employ noncitizens when it is not possible to recruit qualified citizens for necessary services.
 - (7) To employ non-licensed physicians, dentists, podiatrists, optometrists, and chiropractors for utilization in research or academic positions or in positions where there is no direct responsibility for the care of patients. (See section B, paragraph 14.)
 - (8) To employ non-licensed physicians, dentists, podiatrists, optometrists, chiropractors, or unregistered nurses and nurse anesthetists when the individual is to serve in a country other than the United States and the individual is licensed or registered in the country in which the individual is to serve. (See section B, paragraphs 14 and 15.)
 - (9) To employ physicians in the Research and Development Program as research associates [].

(10) To employ physicians in the Distinguished Physician Program [].

- b. **Duration of Appointments.** Temporary full-time appointments may be made for any period up to three years depending on the needs of the service. Such appointments may be renewed, but the aggregate period of temporary service normally will not exceed six years. The facility director may grant exceptions to permit renewals (in increments of up to three years) beyond six years when this type of appointment best meets the needs of the VA medical program.
- c. **Consideration for Probationary or Permanent Appointment.** Individuals serving under this type of appointment who meet requirements in 38 U.S.C. § 7402 and in the appropriate VA qualification standard may be considered [] for an appointment under 38 U.S.C. §§ 7401(1) or 7401(3), as appropriate, on recommendation of the appropriate service chief or equivalent position. If their services are needed for an indefinite period, they should be considered for such an appointment in connection with any consideration for an additional 3-year appointment.
- d. **Processing.** Applicants for temporary full-time appointments will be processed in the same manner as regular full-time appointees, except the qualifications of RN, APN, PA, and hybrid title 38 applicants being considered for temporary full-time appointments pending processing of a probationary appointment will be reviewed by the appropriate service chief or equivalent position. The service chief will make a recommendation for appointment to the facility director [or delegated deciding official].

2. PART-TIME AND INTERMITTENT APPOINTMENTS UNDER 38 U.S.C. § 7405(a)(1).

a. Use of Part-Time and Intermittent Personnel.

- (1) It is VHA policy to use the services of qualified individuals on a part-time or intermittent basis when necessary to alleviate recruitment difficulties and in all cases where VHA work requirements do not support employment on a full-time basis. Decisions concerning utilization of part-time or intermittent employees must be related to patient care and other VA work requirements and supported by relevant staffing guidelines. Part-time physicians on adjustable work hours are also to be held accountable for providing the expected level of patient care and other services to VA as outlined in the Worksheet for Determining Percentages on Memorandum of Service Level Expectations, Appendix B, VA Handbook 5011, Hours of Duty and Leave.
- (2) A part-time appointment shall be utilized when an employee's services are required on less than a full-time basis. An intermittent appointment shall be used when the need for services is of such a nature that it is not possible or desirable to establish a regular and prearranged schedule.

Part II

Chapter 3

- (3) Part-time or intermittent appointments may be made either on a time-limited basis or without time limit depending on the needs of the facility.
 - (4) Part-time and intermittent appointments shall be reviewed on a regular periodical basis and when vacancies occur and when there are significant workload changes to ascertain whether the utilization specified is realistic and meets the objectives of the organizational unit's staffing plan. Network and medical center directors must document each review assessing whether or not the position meets VA's needs. When actual utilization does not meet original expectations, the appointment action shall be amended to show the new conditions of utilization. For part-time physicians on adjustable work service level agreement.
- b. **Special Provisions for Part-Time Physicians on Adjustable Work Hours.** Part-time physicians on adjustable work hours must sign a memorandum related to service level expectations as outlined in VA Handbook 5011, Hours of Duty and Leave. Physicians may decide to discontinue complying with the Memorandum of Service Level Expectations at any time. However, this must be done in writing as a current, signed memorandum related to service level expectations is required to participate in adjustable work hours. In addition, a memorandum related to service level expectations does not alter the applicability of VHA regulations and procedures concerning terms, conditions, and duration of employment, nor does this memorandum constitute an employment contract.
- c. **Processing Appointments.**
- (1) Part-time and intermittent appointments made under authority of 38 U.S.C. § 7405(a)(1) will be processed (including Board Action for occupations under 38 U.S.C. § 7401(1)) in the same manner as regular full-time appointments. Appointees must meet the basic requirements for appointment in VHA.
 - (2) For part-time employees, the expected number of hours to be performed during the service year will be determined before an appointment is affected. The expected number of hours will also be recorded on SF 50-B and will not be exceeded unless the facility director authorizes the excess. []
 - (3) A part-time or intermittent employee [appointed under 38 U.S.C. § 7405(a)(1) (except Physicians)] may not be scheduled for employment which will exceed [1872] hours [] of full-time employment during a [calendar] year. Generally, for employees who hold more than one type of appointment (i.e., fee-basis and part-time or intermittent), the combination of basic pay and fees may not exceed the basic salary of a seven-eighths

part-time employee in the same grade and step in a fiscal year. (See VA Directive and Handbook 5007, Pay Administration.)

3. UTILIZATION OF CONSULTANTS AND ATTENDINGS.

a. **General.** This paragraph contains procedures for the employment of consultants and attendings on an individual basis under the authority of 38 U.S.C. § 7405(a)(1) or (2).

b. **Definitions.**

- (1) **Consultant.** A well-qualified specialist in an occupation identified in 38 U.S.C. 7401(1) or (3) who is capable of giving authoritative views and opinions on subjects in the consultant's particular field. A consultant's expertise may consist of broad administrative or professional experience enabling the consultant to give advice of distinctive value.
- (2) **Attending.** An individual in an occupation identified in 38 U.S.C. §§ 7401(1) or (3) of demonstrated ability in the field who is employed to perform or supervise the performance of duties related to various professional activities such as teaching, patient treatment, etc.
- (3) **Nonmedical Consultant.** An individual, not in one of the occupations indicated in subparagraphs (1) and (2), who has excellent qualifications and a high degree of attainment in the consultant's field. Because of superior knowledge, and mastery of principles and practices, the consultant is regarded as an authority or practitioner of unusual competence.
- (4) **Lump-Sum Fee.** A method of paying consultants and attendings by the payment of a flat sum for each visit or period of service rendered. It consists of the fee for services to be rendered, plus the cost of transportation if required, and per diem at the applicable rate if travel is involved. The service fee is that portion of the fee exclusive of travel and per diem allowances.
- (5) **Per Annum Salary.** A method of paying consultants and attendings on a per annum basis. The salary is computed by multiplying the number of projected visits to be made during the year by the fee authorized per visit.
- (6) **Salary Limitation.** A ceiling placed on the amount of compensation a consultant or attending may receive from VA during the fiscal year.
- (7) **Visit.** Attendance at a VA facility for consultation or conference work of a continuing nature dealing with one or more cases or matters of a

professional nature. If a visit is interrupted by an overnight break, services performed on subsequent days are counted as additional visits.

c. Appointment and Reappointment Approving Authorities.

- (1) The Under Secretary for Health or designee is the approval authority for appointments and reappointments of VHA Central Office consultants.
- (2) The facility director is the approval authority for appointments and reappointments not requiring approval of the Under Secretary for Health or designee.

d. Types of Utilization.

- (1) **Authority.** Consultants and attendings, including nonmedical consultants, are normally employed under the authority of 38 U.S.C. §§ 7405(a)(1) and 7405(a)(2). Section 7405(a)(1) will be used for all consultants and attendings paid on a per annum basis and section 7405(a)(2) for those paid on a lump-sum fee-basis.
- (2) **Methods of Pay.**
 - (a) **Per annum.** Employment of consultants and attendings on this basis is predicated on general availability for recurring and regularly scheduled duty to meet the anticipated needs of VA.
 - i When a consultant or attending is available for duty but is not called to render service on a particular day of the scheduled tour, no recovery proceedings for payment will be instituted.
 - ii When a consultant or attending is unavailable for a particular period, the individual will be in a non-pay status and the salary reduced for the number of projected visits missed. If the individual is frequently unavailable for call, a change to lump-sum fee-basis utilization should be considered.
 - iii Normally, the number of visits made during the fiscal year will equal or exceed the projected number used in computing the per annum salary. The exception would be those cases of reducing salary for unavailability as outlined in subparagraph 2. However, if experience during the fiscal year shows that the original projection of the need for services was too high or too low, the chief of staff will notify the HR Officer to modify the appointment to reflect the new conditions of utilization. The action will be effective at the beginning of the next pay period.

- (b) **Lump-Sum Fee-Basis.** This type of utilization is required for intermittent services. In addition, it is required in the employment of consultants and attendings who have been authorized to perform services at other than VA facilities; and when travel is performed on a day immediately before and/or after service is rendered. At the option of local management, lump-sum fee-basis may also be used for regularly scheduled services.
- (c) **Without Compensation (WOC) Basis.** Services of consultants and attendings may be accepted on a WOC basis under the same conditions applying to other WOC individuals covered in paragraph 7 of this section.

e. Employment Requirements and Determinations.

- (1) **Qualification Requirements.** Consultants, attendings, and nonmedical consultants must meet the basic requirement of 38 U.S.C. § 7402 and/or appropriate qualification standards, in addition to having outstanding professional ability in their respective fields. []
- (2) **Duration of Employment.** Consultants and attendings will be employed for a fiscal year or fraction thereof, depending on the need. All appointment and reappointment actions will be made to terminate not later than September 30 of each year. Past appointments will be reviewed annually by the HR Officer and reappointments effected only for those consultants and attendings the facility expects to use during the upcoming fiscal year.
- (3) **Dual Employment.** The dual employment of consultants or attendings may be approved in accordance with the provisions of section A, paragraph 3b, this chapter. It is the responsibility of facility officials to ascertain whether or not a consultant or attending serves another VA facility or another Federal agency and to make sure that the individual is not paid by VA for more than one visit a day. The apportionment of the maximum annual pay limitation for each type of employment should be furnished by the facility requesting dual employment.

f. Appointment and Reappointment Procedures.

- (1) **Recommendations for Approval.** See section B of this chapter for application, interview and credentialing requirements relating to the appointment of consultants and attendings.
- (2) **Processing.**
 - (a) **Central Office Consultants.** For Central Office consultants, FL 10-332, Letter of Appointment on a Lump-Sum Fee-Basis, will be used

for appointments and reappointments and will be prepared for the signature of the Under Secretary for Health. Reappointment letters will be automatically produced by the Austin Automation Center (AAC).

(b) Security Forms - Dual Employment.

- i The HR Officer will ascertain whether the required security forms have been processed in order to avoid duplication of effort. It generally should be possible to determine this by review of the application form or contacting the individual to find out whether the person is being utilized by another VA facility or another Government agency. In that case the necessary information may be secured from the particular VA facility or the Government agency and a copy of any correspondence placed in the employee's file folder to obviate further processing of security forms.
- ii When processing of security forms is required, the HR Officer located nearest the residence of the consultant or attending, or as agreed on locally by the HR Officers of the applicable facilities, will prepare the necessary security forms. The HR Officer, after processing the forms, will notify the HR Officer(s) of the other facilities where the individual is being utilized. Evidence of such notification will be filed by each facility in the employee's file folder.

NOTE: See VA Directive and Handbook 0710, Personnel Suitability and Security Program.

(c) Appointments. The HR Officer is responsible for processing appointments of consultants and attendings.

- i **Per Annum.** Appointment actions for consultants and attendings on a per annum basis under authority of 38 U.S.C. § 7405(a)(1) will be effected using SF 50 B, Notification of Personnel Action. SF 50-B will reflect the following information:
 - (A) The nature of action will be "Excepted appointment NTE 9/30/(YR)_____.
 - (B) Indicate under item 20 the per annum salary.
 - (C) In the "Remarks" section show "Computation of annual salary of \$___ is based on an estimated__ visits at \$___per visit during the fiscal year 20(YR). Entitlement to salary is based on availability for duty."

(D) In some cases, it may be necessary to modify an appointment to reflect new conditions of utilization. The “Remarks” section will show the revised basis of computation of the per annum salary.

ii **Lump-Sum Fee-Basis.** FL 10-332, Letter of Appointment on a Lump-Sum Fee-Basis, will be issued to appoint consultants and attendings on a lump-sum under authority of 38 U.S.C. § 7405(a)(2), including nonmedical consultants. A new letter will be issued if needs of the service and conditions of utilization change during the first year of appointment.

(d) Reappointments.

i **Per Annum.** Per annum consultants and as described in subparagraph (c) 1, except that the nature of action will be “Conversion to excepted appointment NTE 9/30(YR)_.”

ii **Lump-Sum Fee-Basis.** Fee-basis consultants and attendings will be reappointed using FL-10-332a, Letter of Reappointment on a Lump-Sum Fee-Basis, in accordance with current VHA instructions. The form will be signed by the facility director, chief of staff, or HR Officer.

(e) Disposition of Forms.

i Applications and other forms for consultants and attendings will be placed in a file folder with a tab listing the individual’s name, date of birth, and social security number.

ii Folders will be maintained alphabetically by appointment category and filed in location designed by the facility.

4. APPOINTMENT OF PROFESSIONAL AND TECHNICAL PERSONNEL ON A FEE-BASIS UNDER 38 U.S.C. § 7405(a)(2).

- a. **General.** On recommendation of the facility chief of staff, the facility director may appoint professional and technical personnel on an on-facility fee-basis under authority of 38 U.S.C. § 7405(a)(2). The Chief, Dental Service, will recommend appointments of dentists and EFDAs. Appointments may be made for an indefinite period of time.
- b. **Application.** Applicants will submit an appropriate application form to the facility where they seek employment. Forms to be used are VA Form 10-2850, Application for Physicians, Dentists, Podiatrists, Optometrists, and Chiropractors; VA Form 10-2850a, Application for Nurses and Nurse

Anesthetist; VA Form 10-2850c, Application for Associated Health Occupations or OF 612 []. All items will be completed in sufficient detail to enable the responsible official to make determinations concerning citizenship, licensure or registration, and other qualifications. In emergency situations, the facility director may approve appointments of individuals who have not completed an application if applicants meet appropriate qualification requirements. (See section B, this chapter, for credentialing requirements, including those related to emergency appointments.)

c. Selection.

- (1) The facility chief of staff will determine qualifications, select and recommend physicians, podiatrists, chiropractors, optometrists, RNs, APNs, and PAs. The Chief, Dental Service will do this for dentists and EFDAs.
- (2) The HR Officer will determine qualifications for other professional and technical personnel consistent with VA or Office of Personnel Management requirements. The appropriate program officials will select and recommend employment for these individuals.

d. Appointment.

- (1) **Approval Authority.** The facility director will approve appointments.
- (2) **Letter of Appointment.** The facility director or HR Officer will sign a letter of appointment giving all pertinent details. The original of the letter will be given to the appointee, with copies to the servicing HR Office, Fiscal Service and the utilizing service.
- (3) **Disposition of Forms.** Records of personnel appointed under this paragraph will be placed in a file folder (not personnel folder) with a tab listing the individual's name, date of birth, and social security number. These records will be maintained alphabetically by appointment category and filed in a location designated by the facility.

e. Pay. See VA Directive and Handbook 5007, Pay Administration, Part II.

NOTE: Persons authorized to provide outpatient services at VA expense on an off-facility fee-basis in professional offices, clinics or other non-VA facilities are not considered employees for the purposes of this chapter. Instructions for their utilization are contained in VHA Manual M-1, part I, chapter 18.

5. APPOINTMENT OF STUDENTS AND OTHER TECHNICIANS UNDER 38 U.S.C. § 7405 (a)(1)(D).

a. General.

(1) Student Technicians.

- (a) A student enrolled in an approved nursing school, an approved school of nurse anesthesia or enrolled in an approved training or educational program for an occupation identified in 38 U.S.C. § 7405(a)(1)(A) or (B), may be appointed on a temporary full-time, part-time or intermittent basis under the provisions of 38 U.S.C. § 7405(a)(1)(D) for a period not to exceed the duration of the individual's program.
- (b) The appointment of student technicians can help meet patient care needs and also enhance the recruitment of promising students for career service with VA. With the proper orientation to the assignment and under appropriate professional supervision, students can perform duties consistent with the courses they have successfully completed. For example, a student nurse technician could give medications under supervision of the registered nurse, give baths, check vital signs, provide tracheotomy care, and detect signs and symptoms of bleeding and respiratory problems.

(2) Other Student Employment.

- (a) **General.** [Directors of health care facilities] may approve appointments of students in occupations other than those cited in paragraph (1) under authority of 38 U.S.C. § 7405(a)(1)(D).
- (b) **Selection.**
 - i Candidates normally will be selected from among students whose interests or career objectives are in health care areas.
 - ii Normally, a panel will be established for the purpose of screening qualifications and ranking student applicants for selection consideration. Preference will be given to students whose qualifications, personal traits, and career motivation appear to offer the best potential for service in VHA and for future contributions to the career field in general. The hiring official will choose applicants for employment from the listing developed by the qualification-screening panel.

- iii VA student volunteer workers who have demonstrated interest in a health-related career should be encouraged to apply for student employment. Selection of qualified students from this group encourages continued volunteer youth participation and acts as an incentive to other students to serve as volunteers.
- iv The Human Resources Officer is responsible for the administration of this program, including determining the extent to which the program is publicized and the selection process to be used by the facility. This official is also responsible for documenting all such determinations once they are made.

(c) Funds.

- i Available facility funds must be used. If research funds are used, appointments of students for medical research activities will be approved by the facility's Research and Development Committee. Education funds are not to be used for the employment of students.
- ii This employment has no relation to authorized training programs or clinical clerkships under which paid or without compensation (WOC) students receive credits from affiliated universities.

(3) Nurse Technician Pending Graduation.

- (a) In a limited number of states, students who have completed a designated segment of their nursing studies but have not yet graduated are permitted to obtain registration as a graduate professional nurse.
- (b) A student enrolled in an approved nursing school who possesses active, current registration to practice nursing in a State may be appointed on a temporary full-time, part-time or intermittent basis under the provision of 38 U.S.C. § 7405(a)(1)(D) for a period not to exceed the duration of the individual's academic program.

(4) Graduate Technicians.

- (a) A graduate nurse who has successfully completed a full course of nursing in an approved nursing school; a graduate physician assistant who has completed a full course of training as a physician assistant in an approved program; or a graduate of an approved training or educational program in an occupation identified in 38 U.S.C. § 7405(a)(1)(B), whose licensure or registration in a state, or certification by the appropriate national certifying organization, is

pending may be appointed on a temporary full-time, part-time or intermittent basis under the provisions of 38 U.S.C. § 7405(a)(1)(D) for a period not to exceed 2 years (e.g., graduate nurse technician, graduate physical therapy technician, graduate pharmacy technician, etc.). Appointments may not be extended.

- (b) A graduate nurse or LPN who fails to qualify for registration [upon two attempts within 120 days of appointment,] will be separated from the service on 2 weeks' notice regardless of the termination date of the temporary appointment. In [unusual circumstances, the 120-day period for obtaining registration may be extended on a case-by-case basis (i.e., delays in State Nursing Boards ability for timely examination). Extensions must be requested in writing through the ADPCS, or equivalent, for a formal decision by the VISN Chief Nurse Officer (CNO), or equivalent. See VA Handbook 5005, Part II, Appendices G6a-G6d for information on graduate nurses for APN assignments.]
 - (c) A graduate PA or other hybrid title 38 employees who fails to qualify for licensure, registration or certification when required will be permitted to remain on VA rolls pending results of reexamination provided reexamination occurs prior to the expiration date of the temporary appointment.
 - (d) Graduate technician experience can be credited as successful nursing practice or as successful experience which may be used in meeting grade level requirements as indicated in the appropriate qualification standard.
- b. **Approved Training or Educational Programs.** Approved programs must be in schools or educational institutions approved by the Secretary as indicated in the appropriate qualification standard.
- c. **Approval Authority.** On recommendation of the appropriate service chief or equivalent, the facility director may approve technician appointments. The facility director may delegate approval authority for hybrid title 38 employees as indicated in paragraph 2 of section A, this chapter.
- d. **Processing.**
- (1) Student technicians will submit OF 612 []. Nurse technicians pending graduation and graduate nurse technicians will submit VA Form 10-2850a. Other graduate technicians will submit VA Form 10-2850c.
 - (2) After determining that the applicant meets qualification requirements, the appropriate service chief or equivalent will forward SF 52, Request for

Personnel Action, to the HR Officer. Following approval by the facility director, the HR Officer will effect the appointment. [].

- e. **Pay.** See VA Directive and Handbook 5007, Pay Administration.
- f. **Conversions.** Processing technicians for conversion should be initiated prior to their eligibility dates whenever possible []. Conversions will be effected the first day of the pay period following administrative approval.
 - (1) **Student Technicians.** A student technician who graduates from an approved school and is pending licensure or registration in a State, or certification by the appropriate national certifying organization, may be converted to a graduate technician appointment. [].
 - (2) **Nurse Technicians Pending Graduation.** Following graduation from an approved nursing school, a nurse technician selected for continued VA employment will be converted to a registered nurse appointment under 38 U.S.C. §§ 7401(1) or 7405(a)(1)(A) at the grade and step rate for which qualified, without regard to any other restrictions. []
 - (3) **Graduate Technicians.** Following attainment of licensure or registration in a State or certification by the national certifying organization, a graduate technician selected for continued VA employment will be converted to an appointment in the appropriate occupation under 38 U.S.C. §§ 7401(1), 7401(3), 7405(a)(1)(A) or 7405(a)(1)(B).

6. [] APPOINTMENT OF MEDICAL SUPPORT PERSONNEL UNDER 38 U.S.C. §7405(a)(1).

a. General.

- (1) 38 U.S.C. § 7405(a)(1) is primarily used to obtain the services of physicians, dentists, RNs, APNs and other individuals in occupations identified in 38 U.S.C. § 7401(1) and 7401(3). However, it may be used under certain conditions to obtain the services of medical support personnel in occupations other than those identified in 38 U.S.C. §§ 7401(1) and 7401(3). Appointments of medical support personnel, other than trainees and students, may be made on a temporary full-time basis for a period not to exceed three years, or on a part-time or intermittent basis for a period not to exceed one year. Full-time appointments under this authority may be renewed for one or more additional periods not in excess of three years each. Part-time and intermittent appointments are non-renewable. Appointments of associated health trainees and students in occupations other than those identified in 38 U.S.C. § 7401(1) and 7401(3) may be made on a temporary full-time basis not to exceed three years, or on a part-time or intermittent basis for a

period of time consistent with individual training program requirements.
(See subparagraph b. below.)

- (2) The use of this authority is desirable and appropriate for the employment of trainees accepted in VA associated health training programs; high school graduates and college students participating in the VHA summer employment program; students and others, particularly those engaged in the medical research programs, when it is determined impracticable to obtain the necessary services through regular competitive employment procedures. Under no circumstances may this authority be used to circumvent the competitive employment procedures, the competitive system pay limitations and the qualification requirements for competitive appointments.

b. Appointment of Associated Health Trainees.

- (1) **Type of Appointment.** Appointments of trainees in VA associated health training programs are made by the facility director under the authority of 38 U.S.C. § 7405(a)(1) on a full-time basis, not to exceed 3 years, or on a part-time or intermittent basis for a period consistent with individual training program requirements. (See [VHA Handbook 1400.08, Education of Associated Health Professions and] Section H for discussion of limited circumstances when associated health trainees may be appointed under 38 U.S.C. § 7406.).
- (2) **Qualification Requirements.** Trainees must meet citizenship requirements and shall be qualified as prescribed in appendices II-D of this part. Requests for approval to appoint paid noncitizen trainees will be forwarded to the Assistant Deputy Under Secretary for Health (10N_/143). Without compensation (WOC) appointments of noncitizen trainees may be approved by the facility director.
- (3) **Selection and Appointment of Candidates.** Handbook 1400.08, Education of Associated Health Professions sets forth the selection process and the approval authority for appointment of trainees.
- (4) **Appointment Action.** The HR Officer, with the approval of the facility director, will affect the appointment on SF 50-B. The type of action will be "Excepted Appointment NTE (date)".

c. Appointments of Other Medical Support Personnel.

- (1) Criteria for Approval of Appointments
 - (a) Full-time appointments must be temporary not to exceed 3 years and are renewable for like periods. Part-time and intermittent

appointments must be temporary not-to- exceed 1 year and are non-renewable.

- (b) Qualifications of appointees must be comparable to those required for competitive service employees performing similar duties.
 - (c) Compensation must be commensurate with that paid to competitive service employees occupying similar positions which are subject to the requirements of 5 U.S.C. Chapter 51. (See VA Directive and Handbook 5007, Pay Administration.)
- (2) **Approval Authority.** Facility directors are authorized to approve appointments of medical support personnel, except for paid noncitizen associated health trainees. (See paragraph 3.b.(2) above.)
 - (3) **Documentation.** All appointments effected under the provisions of this paragraph will be properly documented to support the action.
 - (4) **Processing.** Applicants will submit the OF 612 [] to be processed for appointment in the same manner as other similar appointees.

7. ACCEPTANCE OF SERVICES ON A WITHOUT COMPENSATION BASIS UNDER 38 U.S.C. § 7405(a)(1).

- a. **General.** The acceptance of the services of qualified individuals who may be directly or indirectly involved in patient care activities on a WOC basis is permissible. It is not intended that the services of individuals utilized on a WOC basis be accepted in place of those which are usually expected to be performed by personnel for whom funds are provided on a continuing basis.
- b. **Occupations Identified in 38 U.S.C. § 7401(1) and (3).**
 - (1) **Authority for Appointment.** Services will be accepted under the authority of 38 U.S.C. § 7405(a)(1), except that any resident requiring a disbursement agreement will be appointed under authority of 38 U.S.C. § 7406. Appointments will be recommended by the Chief of Staff and approved by the facility director. (See section B of this chapter for credentialing requirements.)
 - (2) **Processing.**
 - (a) VA Forms 10-2850, 10-2850a, 10-2850b, 10-2850c or 10-2850d (for trainees) as appropriate, will be submitted by individuals who desire to participate in the VA medical program on an uncompensated basis.
 - (b) VA Form Letter 10-294, [WOC Personnel Authorization], will be issued setting forth the terms of utilization. Following approval of the

appointment by the facility director, the letter will be signed by the individual attesting to agreement to the conditions specified and countersigned by the HR Officer. The form letter will be prepared in duplicate, with the original given to the employee and the duplicate filed in a location designated by the facility and later disposed of in accordance with existing VHA instructions.

c. Student Trainees, Residents, Research Personnel, and All Others.

(1) **Classes.** The classes of personnel who may be utilized on a WOC basis are:

- (a) Medical and dental students who serve as clinical clerks.
- (b) Nursing students who are enrolled in hospital, college or university schools of nursing and who are assigned for clinical experience and instruction.
- (c) Students and residents from affiliated institutions who are in associated health care occupations, such as all physical medicine and rehabilitation therapists and coordinators, orientation and mobility specialists, social workers, psychologists, medical technicians or technologists, medical radiology technicians, hospital librarians, pharmacists, medical record librarians, dietitians, dental hygienists, dental assistants, dental laboratory technicians, and other occupations listed in 38 U.S.C. §§ 7401(1) and 7401(3).

NOTE: Students in associated health care occupations who successfully complete an affiliated clinical education training program in a VA health care facility may be eligible for noncompetitive appointment under title 5 following graduation from an accredited institution of post-secondary education in accordance with 38 U.S.C. § 7403(g). (See Appendix II-C, this part.)

- (d) Scientific and technical personnel and laboratory assistants who are utilized in a medical research program. Usually, individuals utilized on this basis are employed by associated medical or dental schools or universities to engage in medical or dental research for which a grant has been made under auspices of the VHA Office of Research and Development and their policies and procedures.
- (e) The facility director is the approving authority for WOC appointments at facilities.

- (2) **Full or Part-Time Utilization.** WOC appointments may be made on a temporary full- time or part-time basis, depending on the objective of the program.
 - (3) **Processing.** Employees should be processed and appointed as outlined in subparagraph b (2). When a large group of students is to be appointed, facility directors may adapt the FL 10-294 to a mass action type document for appointment purposes provided they retain its basic content. Applications for employment need not be solicited unless they are needed to comply with the requirements of section A, paragraph 3 and/or credentialing requirements of section B, this chapter.
 - (4) **Payments in Kind.** When facilities are available, students in certain designated programs approved by the Under Secretary for Health or designee, in return for services rendered, may be furnished quarters and subsistence during the whole or any part of the training period. Uniforms also may be laundered by VA if facilities are available. []
- d. **Noncitizens.** Noncitizens may be utilized on a WOC basis when no qualified citizens are available, and it is deemed to be in the interest of the facility.

8. OVERSEAS EMPLOYMENT OF NON-U.S. CITIZENS UNDER TITLE 38 U.S.C. § 7405 (a)(1).

- a. **Scope.** This paragraph contains basic policies and procedures for appointing non-U.S. citizens at the VA Regional Office Outpatient Clinic, Manila, Republic of the Philippines in the following occupations:
- (1) Physicians, dentists, podiatrists, optometrists, chiropractors, RNs, nurse anesthetists, PAs and EFDAs appointed under 38 U.S.C. § 7405(a)(1).
 - (2) Individuals appointed under 38 U.S.C. § 7405(a)(1) to occupations listed in 38 U.S.C. § 7401(3).
 - (3) Medical support personnel.
 - (4) Trainees in health care or associated health care occupations appointed under 38 U.S.C. § 7405(a)(1).
- b. **Appointment Authority.** The Regional Office Director may appoint the following personnel:
- (1) The categories of personnel listed in paragraph a (1) and (2) may be appointed on a temporary full-time, part-time, intermittent, without compensation or fee-basis.

- (2) Medical support personnel may be appointed on a temporary full-time basis not to exceed three years, or on a temporary part-time or intermittent basis not to exceed one year.
- (3) Trainees in health care or associated health care occupations may be appointed on a full-time, part-time or intermittent basis with or without a time limit.

c. Qualification and Licensure Requirements.

- (1) VA Qualification Standards will be used to determine the appropriate grade levels for applicants appointed under provisions of this paragraph. The Regional Office Director may, under unusual circumstances, approve a deviation from the grade requirements when the composite record of qualifications justifies the action.
- (2) The Regional Office Director may waive the licensure, registration or certification requirements for the occupation, provided the individual is properly credentialed in the Philippines.

[]

- d. **Physical Requirements.** The physical requirements and procedures for determining fitness for duty are governed by the provisions of VA Directive and Handbook 5019, Employee Occupational Health Service.

9. APPOINTMENT OF STUDENTS AND RECENT GRADUATES THROUGH THE VA CHOICE AND QUALITY EMPLOYMENT ACT OF 2017.

- a. **Policy.** This paragraph establishes policy for appointing additional categories of students and recent graduates of qualifying educational institutions through the VA Choice and Quality Employment Act of 2017 (the Act). The Act, established through Public Law 115- 46, gives the Secretary of VA the authority to make excepted service appointments for students and recent graduates that lead to career or career conditional appointments, as applicable. This authority applies to title 5 occupations and extends appointment eligibility to students and recent graduates who fall in one of the following categories:
- (1) Those employed in a qualifying internship or fellowship program at the Department;
 - (2) Those employed in the Department in a volunteer capacity and who are performing substantive duties comparable to those of individuals in internship or fellowship programs and who meet the required number of hours for conversion;

- (3) Those employed in the Department under a contract or agreement with an external non-profit organization and who are performing substantive duties comparable to those of individuals in internship or fellowship programs;
 - (4) Those who have received Post 9/11 Educational Assistance under chapter 33 of title 38, United States Code (U.S.C.).
- b. **Guidance.** Specific guidance for making excepted appointments and subsequent noncompetitive conversions using this authority are in Appendix II-D, Noncompetitive Appointment of Students and Recent Graduates through the VA Choice and Quality Employment Act of 2017, of this part.

APPENDIX H1. PROCEDURES FOR APPOINTING PHYSICIANS TO SERVICE CHIEF AND COMPARABLE POSITIONS

- 1. SCOPE.** This appendix covers appointments of physicians to service chief or comparable positions. (For information on comparable positions, See VA Handbook 5007, Pay Administration.) It does not apply to those in an “acting” capacity.
- 2. PROCEDURES.**
 - a. The facility initiates recruitment and contacts the appropriate VA Central Office program office, which may recommend additional candidates for consideration.
 - b. Candidates are screened, interviewed and tentatively selected at the facility.
 - c. If the candidate is board certified in an appropriate specialty or specialties, the Chief of Staff or designee discusses the proposed selection with the appropriate VA Central Office program official who may provide comments or recommendations concerning the proposed selection within five working days. For candidates who are not board certified or who are certified in a specialty or specialties not appropriate to the proposed assignment, the Chief of Staff or designee will forward the candidate’s curriculum vitae, employment application, and credentialing/privileging information to the Office of Patient Care Services (11), which will provide comments concerning the proposed selection within 15 working days.
 - d. The Chief of Staff recommends a candidate to the facility director []. The recommendation shall include any comments made by the VA Central Office program official.
 - e. The facility obtains the concurrence of the Dean’s or Medical Advisory Committee, where appropriate.
 - f. The facility director approves or disapproves the appointment.
 - g. The facility advises the program official and the Network Director that the selection has been approved.

NOTE 1: Special pay agreements must be approved in VA Central Office if the candidate’s total pay (basic, special pay and bonus or allowance) would exceed \$190,000. See VA Directive and Handbook 5007, Pay Administration.

NOTE 2: Communications with VA Central Office officials need not be in a formal written format.

NOTE 3: Facility officials are to maintain documentation regarding their recruitment process. This documentation is to include: (1) A summary

of any comments from Department of Veterans Affairs Central Office program officials regarding the recommended candidate; and (2) If the position is advertised and a noncitizen candidate is selected, the names of all citizen applicants and the reason(s) why the citizen applicants were not qualified for the position.

APPENDIX H2. PROCEDURES FOR APPOINTING DENTISTS AND EFDAs

1. SCOPE. This appendix covers appointments of dentists to position of Chief, Dental Service and comparable positions. It does not apply to those “acting” in such positions. It also covers the appointment of staff dentists and EFDAs (Expanded-Function Dental Auxiliaries).

2. APPOINTMENT TO POSITION OF CHIEF, DENTAL SERVICE, AND COMPARABLE POSITIONS.

- a. The facility initiates recruitment and contacts the Office of Dentistry (112D) which may recommend additional candidates for the position. Vacancy announcements are to be accomplished by the facility. These announcements need to reach all potential VA candidates and allow employees the opportunity to be informed of, and compete for, vacancies.
- b. Candidates are screened, interviewed, and tentatively selected at the facility.
- c. The facility chief of staff or designee discusses the proposed selection with the Office of Dentistry which has five working days to make comments or recommendations concerning the proposed selection.
- d. The facility chief of staff recommends a selection to the facility Director. Recommendations related to advancements and assignments shall include any comments made by the Office of Dentistry. []
- e. The facility obtains the concurrence of the Dean’s or Medical Advisory Committee, if appropriate.
- f. The facility director approves or disapproves the appointment or assignment.
- g. The Office of Dentistry and the network directors are notified.

3. APPOINTMENT TO STAFF DENTIST POSITIONS.

- a. The facility initiates recruitment and contacts the Office of Dentistry (112D), which may recommend additional candidates for the position. Vacancy announcements are to be accomplished by the facility. These announcements need to reach all potential VA candidates and allow employees the opportunity to be informed of and compete for vacancies.
- b. On notification of a dentist vacancy by a facility, the VA Health Care Staff Development and Retention Office will forward to the facility HR Office the applications and related materials of qualified candidates who have indicated availability for that facility or geographical area.
- c. Candidates are screened, interviewed and tentatively selected at the facility.

- d. The Chief of Dental Service or designee is to discuss the proposed selection with the Office of Dentistry, which has five working days to make comments or recommendations concerning the proposed selection.
- e. The recommendation is forwarded through channels to the facility Director for consideration. The recommending official shall include any comments made by the Office of Dentistry.
- f. The facility obtains the concurrence of the Dean's or Medical Advisory Committee, if appropriate.
- g. The facility director approves or disapproves the appointment or assignment.
- h. The facility advises the Office of Dentistry of the selection.

4. APPOINTMENT OF EFDAS.

- a. When an EFDA vacancy occurs, the facility initiates recruitment and contacts the Office of Dentistry, which may recommend additional candidates for the position.
- b. The service Chief screens, interviews and tentatively selects a candidate.
- c. A recommendation is forwarded through channels to the facility Director [].
- d. The facility Director approves or disapproves the appointment or assignment.
- e. The facility advises the Office of Dentistry of the selection.

[]

NOTE 1: Facility communications with the Office of Dentistry in Central Office need not be in a formal written format.

NOTE 2: Facility officials are to maintain documentation regarding the process of recruiting dentists and EFDAs. This documentation is to include:

- A summary of any comments from Central Office program officials regarding the recommended candidate; and
- If the position is advertised and a noncitizen candidate is selected, the names of all citizen applicants and the reason(s) why the citizen applicants were not qualified for the position.

APPENDIX H3. PROCEDURES FOR APPOINTING PODIATRISTS

- 1. SCOPE.** This appendix establishes the procedures for the appointment of all podiatrists in VHA.
- 2. PROCEDURES.**
 - a. The facility initiates recruitment and contacts the Director of Podiatry Service who may recommend additional candidates for the position.
 - b. The appropriate official screens, interviews, and tentatively selects a candidate for the position.
 - c. [] The Chief of Staff or designee discusses the proposed selection with the Director of Podiatry who has five working days to make comments or recommendations concerning the proposed selection.
 - d. The recommendation is forwarded through channels to the facility director for consideration. Recommendations are to include the comments of the Director of Podiatry Service. []
 - e. The facility obtains the concurrence of the Dean's or Medical Advisory Committee, if appropriate.
 - f. The facility director approves or disapproves the appointment or assignment.
 - g. The facility advises the Director of Podiatry Service of the selection.

[]

NOTE 1: Facility communications with VA Podiatry Service officials need not be in a formal written format.

NOTE 2: Facility officials are to maintain documentation regarding their recruitment process. This documentation will include:

- A summary of any comments from Central Office program officials regarding the recommended candidate; and
- If the position is advertised and a noncitizen candidate is selected, the names of all citizen applicants and the reason(s) why the citizen applicants were not qualified for the position.

APPENDIX H4. PROCEDURES FOR APPOINTING OPTOMETRISTS

1. **SCOPE.** This appendix establishes the procedures for the appointment of all optometrists in VHA.
2. **PROCEDURES.**
 - a. The facility initiates recruitment and contacts the Director of Optometry Service who may recommend additional candidates for the position.
 - b. The appropriate official screens, interviews, and tentatively selects a candidate for the position.
 - c. [] The Chief of Staff or designee discusses the proposed selection with the Director of Optometry who has five working days to make comments or recommendations concerning the proposed selection.
 - d. The recommendation is forwarded through channels (including the Dean's or Medical Advisory Committee, where appropriate) to the facility director for consideration. Recommendations are to include the comments of the Director of Optometry Service. []
 - e. The facility director approves or disapproves the appointment or assignment.
 - f. The facility advises the Director of Optometry Service of the selection.

NOTE 1: Facility communications with VA Central Office Optometry Service [program] officials need not be in a formal written format []

NOTE 2: Facility officials are to maintain documentation regarding their recruitment process. This documentation will include:

- A summary of any comments from VA Central Office Optometry Service program officials regarding the recommended candidate; and
- If the position is advertised and a noncitizen candidate is selected, the names of all citizen applicants and the reason(s) why the citizen applicants were not qualified for the position. []

NOTE 3: Information concerning promotion of optometrists can be found in Part III, Appendix M, this handbook.

NOTE 4: Additional program information covering optometrists can be obtained through the Director of Optometry Service or the VHA Optometry Service website via the following link: <http://vaww1.va.gov/optometry/>.

APPENDIX H5. RECRUITMENT, APPOINTMENT, ADVANCEMENT, CHANGE IN ASSIGNMENT, AND REASSIGNMENT OF REGISTERED NURSES (RNs) AND [ADVANCED PRACTICE NURSES (APNS) IN GRADES IV AND V]

1. **SCOPE.** This appendix covers recruitment, appointments, advancements, changes in assignment, and reassignments of RNs [and APNs (certified nurse practitioner, clinical nurse specialist, certified nurse mid-wife) in grades IV and V assignments. (See Appendix G6d for APN (CNA) Nurse IV and V assignments.)]
2. **RECRUITMENT, APPOINTMENT, ADVANCEMENT, CHANGE IN ASSIGNMENT, AND REASSIGNMENT OF KEY NURSING PERSONNEL.**
 - a. **Recruitment.** [The appropriate supervisory official will collaborate with HR to determine the best recruitment flexibilities to utilize in filling the position which may or may not include formal vacancy announcements or advertisements, use of a search committee, utilization of recruitment and relocation incentives or other incentives, direct selection of a qualified candidate, etc.]
 - b. **Qualification.** HR staff will evaluate all candidate(s) to determine if the basic qualification requirements for the grade level and assignment have been met and refer qualified candidates to hiring official.
 - c. **Selection.**
 - (1) The hiring official will review applications referred for selection. Hiring officials who are not SMEs must consult SMEs when evaluating applications. SMEs must be at or above the grade level of the position being considered. SME review may take the form of a panel or consultation with the SME for the profession. **NOTE:** Office of Nursing Services will identify appropriate SMEs for Nurse IV and V grade level assignments. (See Chapter 3, Section F for additional information on SME requirements.)
 - (2) Once a selection is made, the supervisor will consult with HR staff and the profession's SME (if applicable) and submit supporting documentation for utilization of pay setting flexibilities (if applicable), found in VA Handbook 5007, Part II, for consideration by the deciding official.]
 - d. **Reassignments and Changes in Assignment.** A reassignment is a change from one position to another. A change in assignment is a change in the duties and responsibilities of a specific position.
 - (1) **Reassignment.** If a nurse is reassigned and the reassignment does not involve a change in grade, [no additional review is required, and the supervisory official may move forward with an appropriate reassignment

action in collaboration with HR staff.] If a change in grade is involved, the procedures in paragraph 2c will be used.

- (2) **Change in Assignment.** If the duties and responsibilities of a position are significantly changed, the procedures in paragraph [2c] will be used to determine whether the employee should be advanced to a higher grade. Minor changes in duties and responsibilities may be accomplished by revising or amending the employee's functional statement.

3. **[] APPOINTMENT, ADVANCEMENT, REASSIGNMENT, AND CHANGE IN ASSIGNMENT OF NURSE EXECUTIVES.** Procedures for the recruitment, appointment, advancement, change in assignment, and reassignment of nurse executives are the same as in paragraph 2. However, when a selection is made for one of these positions, facility officials will notify the appropriate network director and the Office of Nursing Services in VA Central Office.

[]

4. **CRITERIA FOR GRADING [RN AND APN] LEADERSHIP POSITIONS AT [GRADE] IV AND [GRADE V].** Assignment of the Nurse IV and Nurse V grade levels is based on the complexity and responsibility of the assignment and the individual's qualifications. [] Criteria for determining whether the complexity of an assignment warrants placement at the [RN or APN] grades [IV and V] are outlined in paragraph 5 below.

5. **COMPLEXITY OF ASSIGNMENT REQUIRED FOR PLACEMENT AT [GRADE] IV AND V.**

- a. **General.** [RNs and APNs] are appointed and promoted to grades IV and V [grade levels] based on the scope and complexity of their assignment and qualifications. Assignments of IV and V grade levels are position specific. This appendix provides guidance for determining whether facility, VISN or Central Office [] positions meet the criteria for placement at [grade IV or V].
- b. **Nurse Executive Positions.** The term "Nurse Executive" refers to the top nursing management position at a VHA healthcare facility/system. Nurse executives are members of the senior management team. The organizational title of the Nurse Executive position will vary (e.g., Chief Nurse, Nurse Executive, Associate Director for Nursing Services, Associate Director for Patient Care Services) but must be consistent with senior management titles recognized by VA Central Office. Appointment or advancement to a Nurse Executive position is based on the complexity of the position. []. Generally, Nurse Executives are appointed at the Nurse V grade level [].

c. Key Nursing Personnel.

- (1) **Comparability to Nurse Executive Positions.** VA policy provides that [RNs and APNs] in assignments other than Nurse Executive may be appointed or advanced to [grade IV or V].
- (2) **Establishing Positions.** The facility, VISN or VACO Program Office should establish a formal process for approving the design and implementation of such positions. Responsibilities in new positions should not duplicate or otherwise reduce responsibilities of other positions if the grades of those other positions are based the responsibilities involved.
- (3) **Key Nursing Assignments Warranting [Grade] IV or V.** Positions at these grades are typically located in organizational settings where there is a high rate of activity and a broad mission involving a full range of complex programs and/or services. Program responsibility includes full responsibility for program design, integrating the program with other related programs and organizational goals, monitoring, as well as responsibility for evaluating and administering the program. Positions at IV and V grades also have full accountability for program outcomes.
 - (a) Examples of [Grade] IV Positions [include but are not limited to:]
 - i Managers for Service Lines;
 - ii Positions in VISN offices that have broad program responsibility for a single program that covers all facilities within the network; and
 - iii Positions at facilities with full program responsibilities that meet criteria in [appendix G6d, Part II].
 - (b) Examples of [Grade] V Positions [include but are not limited to:]
 - i VISN positions with broad program responsibility for multiple programs covering all facilities within the network;
 - ii Positions with substantial sphere of influence across multiple sites or programs and across the full continuum of care;
 - iii [Service Line Executives in complex settings.]
 - iv Positions with substantial involvement in multi-site, regional, and/or national professional and health related issues; and
 - v Positions at tertiary facilities that have full program responsibility for more than one of the following programs: clinical, education, research or quality management.

- (4) **Consideration Procedures.** Nurse Executives and facility directors must initially determine that a position meets the scope and complexity requirements before an individual can be considered for appointment or promotion. []. Procedures for such determinations and employee consideration are outlined in VA Handbook 5005, Part III, chapter 4 [].

- d. **Vacancies and Reassignments.** [Grades] IV and V are based on a combination of assignment characteristics and individual qualifications []. Positions of individuals at the Nurse IV or Nurse V grade should not be significantly modified, nor should individuals in these positions be assigned to other positions or duties, which may not warrant IV or V [grade level.] [].

6. [EXAMPLES OF APN-SPECIFIC GRADE IV AND V ASSIGNMENTS (excludes CNA IV and V that are covered in Part II, Appendix G6d). The roles below are examples that meet the scope and complexity of grade IV and V assignments. Other roles may also be developed to address organizational, VISN or VHA needs if the role meets the scope and complexity.

- (1) **Nurse IV.** APN positions in this grade execute clinical and administrative leadership that is characterized by substantial and continuous responsibility and accountability for population groups or integrated programs at the facility, VISN or program office level. Roles include but are not limited to APN Facility Lead, APN Facility Lead or Residency Program Director, and APN Clinical Leader/Administrative Leader.
 - (a) **APN Facility Lead.** Facility lead APNs have a thorough understanding of the various functions involved in patient care delivery, and the ability to interact effectively with a diverse health care team. Demonstrates knowledge and expertise pertaining to APN employment, credentialing and clinical practice. Serves as a mentor and monitors work to include clinical standards of practice, polices and regulatory standards. Influences others to improve care and provides feedback on fellow APNs' work performance. Required experience may include progressive leadership responsibilities, such as serving on local committees, workgroups or taskforces. The Lead APN represents the interests of the APN profession and serves as a liaison for professional APN practice.
 - (b) **APN Facility Education Lead or Residency Program Director.** APN Facility Education Leads or APN Residency Program Directors are responsible for the management, structure and administration of the APN clinical trainee program. Ensures programs comply with VA Office of Academic Affiliation standards and accrediting bodies of sponsoring affiliated institutions while activities are being held at VA facilities. Develops, implements and enhances APN clinical education training programs. Required experience may include one or more of

the following educational assignments: precepting APNs or medical students, setting up continuing education for local VHA APNs, participating in community health events, serving as an APN assistant or coordinator in a VHA residency program or stipend program and serving as a member or staff of an academic APN program.

(c) **APRN (Clinical Leader/Administrative Leader).**

Clinical/Administrative APN Leaders are engaged with strategic planning and administrative/managerial responsibilities for integrated programs that cross service and/or discipline lines and influence organizational mission and health care. Monitors or evaluates services or programs with interaction of senior administration. Required experience may include one or more of the following: leadership assignments that involved formulating program objectives and priorities, implementing plans and practices and interpreting regulatory and organizational guidance to develop and implement policies and/or procedures.

(2) **Nurse V.** APN positions at this grade may include but are not limited to: APN Service Chief/Service Line Executive, APN VISN Program Manager/Lead, APN Central Office Executive/Lead or administrative clinical leadership positions of an executive nature, comprised of complex leadership and administrative components, associated with critical health care issues and activities that influence agency or organizational mission, health care, and policy.

(a) **APN (Service Line Executive).** APN (Service Line Executive) manages a complex multi-disciplinary service line providing direct oversight to program operations. Provides leadership, direction, and guidance on all aspects of the program(s). Coordinates with network and facility executives in developing and establishing the long and short-range organizational goals for the program(s), ensuring organizational goals and policies are aligned with Medical Center, VISN, and national goals. Evaluates, develops, coordinates, implements, and improves program operations. Manages the overall service budget, to include determining resource needs, allocating resources, and ensuring proper utilization in productivity, efficiency, and cost effectiveness of operations. Responsible for clinical practice, program management, education and personnel management. Establishes and maintains effective interpersonal relationships at all organizational levels. Manages healthcare system staff to perform the functions and activities expected. Interprets and applies national policy, as well as leads policy-making activities for the program(s). Forecasts technological changes, analyzes current and projected utilization patterns/workload/staffing and cost comparisons to provide

feedback and recommendations to executive leaders. Exhibits leadership that reflects current standards and expectations provided by VHA Central Office (VHACO). Required experience may include assignments that involved directing and evaluating complex patient care or administrative programs, services or operations for a healthcare system or at multiple sites. The assignments would have required planning, organizing and assessing healthcare services or programs; implementing national initiative and organizational targets; developing long and short-term program goals, and analyzing developing options; and implementing solutions to health care operational or administrative problems.

- (b) **APN (VISN Program Manager/Lead).** APN (VISN Program Manager/Lead) manages one or more large, complex patient care or administrative programs across one or more VISNs. Responsible for the program(s) and significantly influences overall functioning of the program(s) throughout the VISN(s). Provides leadership, direction, and guidance on all aspects of the program(s). Coordinates with network and facility executives in developing and establishing the long and short-range organizational goals for the program(s), ensures organizational goals and policies are aligned with VISN and national goals. Evaluates, develops, coordinates, implements and improves program operations within the VISN(s). Manages the overall budget for the program VISN-wide, to include determining resource needs, allocating resources, and ensuring proper utilization in productivity, efficiency, and cost effectiveness of operations. Responsibility for clinical practice, program management, education and human resources management of the program. Establishes and maintains effective interpersonal relationships with all levels of stakeholders at the facility, network or beyond. Interprets and applies national policy, as well as develops VISN-wide supplemental guidance regarding the program(s). Assist in policy-making activities and the overall functioning of administrative and clinical programs. Collaborates with other staff to establish and maintain programs that cross service and/or discipline lines and influence organizational mission and health care. Utilizes forecasts of technological changes, utilization patterns, future workloads, staffing projection, and cost comparisons to provide feedback and recommendations to VISN leadership that reflects current standards and expectations provided by VHACO. Required experience may include assignments that involved directing and evaluating complex patient care or administrative programs, services or operations for a healthcare system or at multiple sites. The assignments would have required planning, organizing, and assessing healthcare services or programs; implementing national initiative and organizational targets; developing long and short-term

program goals and analyzing developing options, and implementing solutions to health care operational or administrative problems.

- (c) **APN (Central Office Program Executive/Lead).** APN (Central Office Program Executive/Lead) manages a national VHA program or programs and provides overall administration of all aspects of the program(s) throughout VHA, to include planning, directing, and executing the program(s). Analyzes and develops program specific plans, programs and budgets for a national program office. Provides leadership and direction for the assigned program(s) that significantly impacts the overall functioning of the program(s) VHA-wide, to include ensuring the program(s) meet VA mission requirements. Develops succession plans, monitors trending program data and academic preparation for the profession(s). Develops national policies, directives, informal letters, white papers, and other guidance regarding the program(s). Coordinates and collaborates with Federal and state regulatory agencies, national program offices such as Regulatory Affairs, Legislative Affairs, and General Counsel when developing national policies, procedures, and operations for the program(s). Provides agency-level interpretation and clarification of national policies and directives. Writes or provides technical reviews of proposed legislation regarding the program for the agency. Responds to Congressional offices and other high-level inquiries from internal and external organizations related to the program(s) and/or program office. Required experience may include assignments which involved directing and evaluating complex patient care or administrative programs, services or operations for a healthcare system or at multiple sites. The assignments would have required planning, organizing, and assessing healthcare services or programs; implementing national initiative and organizational targets; developing long and short-term program goals; and analyzing developing options, and implementing solutions to health care operational or administrative problems.]

APPENDIX H6. PROCEDURES FOR APPOINTING [ADVANCED PRACTICE NURSE (ANESTHETISTS)] TO SECTION CHIEF POSITIONS

1. SCOPE. This appendix covers the appointment of nurse anesthetists as Chief of the Nurse Anesthesiology Section. It does not apply to those in an “acting” capacity.

2. PROCEDURES.

- a. When a position becomes vacant, the facility will initiate recruitment (where appropriate) and contact the Deputy Director for Nurse Anesthetists, VA Anesthesiology Service, who may recommend additional candidates for consideration.
- b. Candidates are screened, interviewed, and tentatively selected by the appropriate facility official.
- c. The facility chief of staff or designee is to discuss the proposed selection with the Deputy Director for Nurse Anesthetists who has five working days to make comments or recommendations concerning the proposed selection.
- d. The recommendation is forwarded through channels to the facility Director for consideration. Recommendations are to include the comments of the Deputy Director for Nurse Anesthetists. []

NOTE 1: Communications with program officials need not be in a formal written format.

NOTE 2: Facility officials are to maintain documentation regarding their recruitment process. Documentation will include:

- A summary of any comments from Central Office program officials regarding the recommended candidate; and
- If the position is advertised and a noncitizen candidate is selected, the names of all citizen applicants and the reason(s) why the citizen applicants were not qualified for the position.

[]

APPENDIX H8. PROCEDURES FOR APPOINTING CHIEFS OF PHARMACY SERVICE (ALL GRADES) []

1. **SCOPE.** This appendix covers appointment of all Chiefs of Pharmacy Service []. It does not apply to those in any of these positions in an “acting” capacity.

2. PROCEDURES [FOR CHIEFS OF PHARMACY SERVICE].

[].

- a. Recruitment efforts are initiated. [] Candidates are interviewed, screened, and tentatively selected at the facility.
- b. The Chief of Staff or designee discusses the proposed selection with Pharmacy Benefits Management Strategic Health Group (119), which has five working days to comment or make recommendations concerning the proposed selection.
- c. The appropriate facility official recommends the selection to the facility director. [] The facility director approves or disapproves the action.
- d. The facility notifies the Pharmacy Benefits Management Strategic Health Group and the Network Director of the selection.

**APPENDIX H9. PROCEDURES FOR APPOINTING OCCUPATIONAL AND
PHYSICAL THERAPISTS AS SECTION CHIEF**

1. SCOPE. This appendix covers the appointment of occupational and physical therapists to section chief positions. It does not apply to those in an acting capacity.

2. PROCEDURES.

- a. Local recruitment efforts are initiated by the facility.
- b. The service chief or equivalent screens and interviews candidates.
- c. The service chief or equivalent forwards the recommended candidate through channels to the facility director for consideration. []
- d. The facility director approves or disapproves the action.

[]

APPENDIX H10. PROCEDURES FOR APPOINTING AND ADVANCING DOCTORS OF CHIROPRACTIC

- 1. SCOPE.** This appendix establishes procedures for the appointment and advancement of all doctors of chiropractic in VHA.
- 2. APPOINTMENT PROCEDURES.**
 - a. The facility initiates recruitment procedures and contacts the VHA Director of Chiropractic Service, who may recommend additional candidates for the position.
 - b. The appropriate facility officials screen, interview, and tentatively select a candidate for the position.
 - c. [The] facility Chief of Staff or designee discusses the proposed selection with the VHA Director of Chiropractic Service who has five working days to make comments or recommendations concerning the proposed selection.
 - d. [The] recommendation is forwarded to the facility director for consideration. Recommendations are to include the comments of the VHA Director of Chiropractic Service. []
 - e. [The] facility director will approve or disapprove the recommendation for appointment.
 - f. The facility advises the VHA Director of Chiropractic Service of the selection.

NOTE 1: The Director of Chiropractic Service may be contacted through the VA Connecticut Healthcare System as follows:

Director, VHA Chiropractic Service
VA Connecticut Healthcare System
950 Campbell Avenue
Mail Stop 111D
West Haven, CT 06516

[]

NOTE 2: The facility must maintain documentation regarding the recruitment process that was used to solicit applications. This documentation will include:

- A summary of any comments from VHA Central Office Director of Chiropractic Service regarding the recommended candidate;
- Copies of any paid advertisement that may have been done; and
- If the position is advertised and a noncitizen candidate is selected,

Part II

APPENDIX H10

the names of all citizen applicants and the reason(s) why the citizen applicants were not qualified for the position.

NOTE 3: Additional program information covering chiropractors may be obtained through the Director of Chiropractic Service or the VHA Chiropractic Service.

[]

CHAPTER 4. TITLE 38 AND HYBRID TITLE 38 PROMOTIONS AND INTERNAL PLACEMENTS

SECTION A. PROMOTION OR CHANGE IN ASSIGNMENT AND INTERNAL PLACEMENT OF TITLE 38 EMPLOYEES

1. GENERAL.

- a. This section contains instructions and procedures governing the advancement of podiatrists, optometrists, chiropractors, registered nurses (RNs), advanced practice nurses (APNs), physician assistants (PAs), and expanded-function dental auxiliaries (EFDAs) appointed under authority of 38 U.S.C. §§ 7401(1) or 7405(a)(1)(A); and medical and dental residents appointed under authority of 38 U.S.C. § 7406.

NOTE 1: Residents serving under a disbursement agreement are excluded from coverage under the provisions of this section.

NOTE 2: VHA physicians and dentists are excluded from coverage for promotion procedures as described in this section. See VA Handbook 5007, Pay Administration, Part IX, for guidance for pay regulations and procedures.

NOTE 3: Promotions for occupations covered under 38 U.S.C. § 7401(3) can be found in, Section B of this part.

- b. The promotion system shall provide advancement opportunities for employees, predicated upon the recognition of the quality of service rendered, additional experience and professional attainment as determined by a thorough review of the employee's individual record.
- c. To meet the criteria for promotion, the individual must meet the criteria for the next higher grade level in the applicable VA qualification standard. A review of the individual's total record must show evidence that the contribution to VA medical service is of sufficient value to warrant promotion. Potential for continuously greater contribution is also a prerequisite. Reviews and recommendations of [supervisory officials] will be sufficient to ensure that promotion is fully merited and not recommended based on meeting administrative requirements alone. The individual's total record and professional stature will be carefully evaluated and supported by documentary evidence as necessary.
- d. Promotion actions will be taken without regard to age, race, color, religion, sex, national origin, lawful partisan political affiliation, marital status, physical or mental disability (when the employee is qualified to do the work), membership or non-membership in a labor organization or any other non-merit factor.

- e. Promotion actions will conform to the restrictions governing the employment of relatives. (See VA Handbook 5025, Legal.)

[]

2. [RESPONSIBILITIES.

a. Human Resources (HR) Staff.

- (1) Before recruitment is initiated, work in collaboration with the supervisor to determine the eligibility and qualifications requirements that pertain to the assignment and grade level for the position to be filled in accordance with the qualification standards found in VA Handbook 5005, Part II, Appendices G. If the supervisor is not a subject matter expert in the profession, the supervisor must consult with the subject matter expert throughout the recruitment and onboarding process for the vacant position.
- (2) Determine eligibility and qualifications in accordance with standards found in VA Handbook 5005, Part II, Appendices G.
- (3) Recommend the appropriate grade to the selecting official for appointments, promotions, reassignments and changes to lower grades.
- (4) Document qualification determinations for each applicant by completing a separate VHA qualification form for each applicant.
- (5) Consult with the profession's subject matter expert during the development of the assignment, recruitment and onboarding of the selected candidate.
- (6) Notify candidates who fail to meet the requirements and fail to qualify for appointment.
- (7) Process requests for appointments, promotions, reassignments and changes to lower grades.

b. Supervisory Official.

- (1) Obtain approval to fill a vacant position in accordance with local procedures.
- (2) Initiate recruitment action with the servicing HR Office.
- (3) Review application packages referred for selections.
 - (a) Supervisors who are not subject matter experts must consult a subject matter expert when evaluating applications. This may take the

form of a panel or consultation with the subject matter expert for the profession.

- (b) Supervisors who are subject matter experts at or below the grade being filled must consult with the profession's subject matter expert that is at the grade or higher.
- (4) Consult with HR staff and the profession's subject matter expert (if applicable).
- (5) Submit supporting documentation for utilization of pay setting flexibilities (if applicable) found in VA Handbook 5007, Pay Administration, Part II, Chapters 2, 3 and 4, pertaining full and hybrid title 38 positions.
- (6) Make or review requests or recommendations for promotions.]

3. PROMOTION.

- a. This section contains instructions and procedures governing the promotion of employees appointed under 38 U.S.C. §§ 7401(1) and 7405(a)(1)(A). Promotion is an advancement to a higher grade level and recognizes that an employee is providing a higher level of service to VA.
- b. The promotion system shall provide advancement opportunities for employees, predicated upon the recognition of the quality of service rendered, additional experience and professional attainment as determined by an examination of the employee's individual record.
- c. To meet the criteria for promotion, the individual must meet the criteria for the next higher grade level in the qualification standard. Examination of the individual's total record must reveal evidence that the contribution to VA medical service is of sufficient value to warrant promotion. Potential for continuously greater contribution is also a prerequisite. Reviews and recommendations of supervisors and HR staff will be sufficient to ensure that promotion is fully merited and not recommended based on meeting administrative requirements alone. [].

4. PROMOTION – GENERAL.

a. Administrative Requirements for Consideration.

- (1) A current proficiency rating or Executive Career Field (ECF) rating of "Satisfactory/Successful" or higher.
- (2) The experience, education and assignment requirements set forth in the qualification standard. Employees must meet the same grade requirements, including the specified demonstrated accomplishments, as

for appointment. Any deviation or exception to these requirements will be limited to those specified in the qualification standard.

- b. **Promotions Based on Additional Experience and/or Education.** Promotions based solely on additional experience acquired by the employee shall be limited to advancements of one grade or grade interval at a time. If an employee has attained a higher level of education that, when combined with their additional experience, is qualifying for a grade higher than the next grade or grade interval, the employee may be promoted to whatever grade in the qualification standard the additional education warrants.

5. PROMOTION CONSIDERATION.

- a. **Eligibility.** Full-time, part-time and intermittent employees shall be considered periodically for promotion in their current occupation. Eligibility for such promotion considerations shall be based upon fully meeting prescribed administrative requirements.
 - (1) Approximately 60 days prior to the date the employee meets the required period for promotion consideration, HR Officers will notify the appropriate supervisory officials that the employee is eligible for promotion consideration to the next higher grade level. The supervisor will notify the employee no later than 30 days prior to the employee's anniversary date. The employee shall then be given 30 days to submit to their supervisor a self-assessment of their qualifications for promotion consideration. Employees may also notify their supervisor in writing that they are declining to submit a self-assessment during this 30-day period. If this is done, the supervisor will proceed with a recommendation. If a self-assessment or declination is not submitted the supervisor will proceed with the recommendation at the end of the 30-day period.
 - (2) The supervisory official will review the duties of the position. If the supervisor is not an occupational subject matter expert or they are considering an employee for a grade higher than occupied by the supervisor, the supervisor must consult with a subject matter expert when considering promotion eligibility. The supervisory official must determine whether the duties being performed meet the definition of a higher level assignment within the qualification standard. The supervisory official must also take into consideration the information provided in the employee's self-assessment, if provided. Supervisors are to apply position management and make sound management decisions. The process and action taken for promotion is to be documented using VHA Form "Request for T38 Promotion".

b. Promotion to “Person” Based Grades not Specific to an Assignment.

- (1) Promotions to grades based exclusively on the qualifications of a “person” and not specific to a grade level based on assignment, will be on the recommendation of the immediate supervisor, with a recommendation of approval by the second level supervisor and personnel action approved by HR Officer. Upon receipt of the employee's self-assessment or written declination or expiration of the 30-day time period, the immediate supervisor will make a recommendation on promotion to the second level supervisor. The immediate supervisor's recommendation] is to be acted upon by the second level supervisor within 30 days of the submission of the self-assessment or written declination by the employee or expiration of the 30-day time whichever comes first.
- (2) Employees who have demonstrated the capability to successfully perform at the next higher-grade level will be recommended for promotion. (**NOTE:** Anniversary date of grade for Nurse I is based on advancement to a higher level within the grade.)
- (3) Employees who have not demonstrated such capability will be informed in writing by the immediate supervisor that they are not being recommended for promotion. The written notice will state the reason(s) why the employee does not meet the criteria for promotion. The immediate supervisor may recommend the employee for promotion at a later date if it is determined that the employee has met the appropriate criteria. If not promoted during the intervening period, the employee is entitled to promotion consideration on the next anniversary date of grade. Employees who are not promoted may request promotion reconsideration under paragraph 6 below.

c. Promotion to Grades Specific to an Assignment.

- (1) Employees who are selected for a position and grade that requires a combination of personal qualifications and assignment characteristics must meet the administrative requirements for promotion.
- (2) Promotions to positions based on a combination of personal qualifications and assignment characteristics will become effective on the first day of the first full pay period following approval by the approving official, unless a future date set by the approving authority and at the election of the employee when doing so would benefit the employee (i.e., an employee is due a within grade increase), and that does not violate law or negotiated agreement.

6. PROMOTION RECONSIDERATION AND REVIEW.

- a. **Coverage.** This paragraph applies to individuals appointed under 38 U.S.C. §§ 7401(1) or 7405(a)(1)(A).
- b. **Notice of Decision.** Employees are to be advised by their supervisors in writing of any decision not to promote them, of the reason(s) for the decision, of their right to request reconsideration and that reconsideration must be preceded by an informal discussion with their supervisor.
- c. **Informal Discussion.** Employees and their supervisor must meet to discuss the recommendation not to promote prior to the employee submitting a request for reconsideration under paragraph d below.
- d. **Reconsideration Requests.**
 - (1) To “Person” Based Grades not Specific to an Assignment
 - (a) If promotion to a “person” based grade that is not assignment based, the employee may, within 30 days of being notified of the decision, submit a written request through the immediate supervisor to the second level supervisor for reconsideration. The employee’s written request for reconsideration must indicate when the informal discussion was held with the immediate supervisor and cite the specific reason(s) why the employee believes the decision was not proper. The [facility] director, network director or appropriate higher-level designee (whichever is applicable), may extend the 30-day period at the written request of the employee if the employee is unable to submit the information for reasons beyond the employee’s control.
 - (b) Second level supervisors are to review the employee’s request within 30 days and determine whether to promote the employee. If the second level supervisor determines that a promotion is not warranted, that supervisor will provide the reasons for this decision to the employee in writing.
 - (c) If the employee is not satisfied with the explanation of the determination to not promote, the employee can request within 30 days to have the determination reviewed and recommendation made by the next higher-level manager. The employee’s request for reconsideration and the supervisor’s explanation will be forwarded to the next higher-level manager within 30 days.
 - (d) The next higher-level manager will make a recommendation within 30 days and submit through the servicing HR Office to the [facility]

director, network director or appropriate higher-level designee (whichever is applicable), who will make a final decision within 30 days.

- (e) If the promotion is approved, the employee is to be promoted on the first day of the first pay period following the anniversary date of grade on which the promotion was based.

e. **Action by Human Resources.** Upon receipt of the reconsideration file, HR staff shall take one of the following actions within 15 days:

- (1) [] In no case, will the promotion be in effect later than the first day of the first full pay period after the anniversary date of grade on which the promotion was based.
- (2) If disapproved, HR staff will notify the employee of the decision in writing.

7. COVERAGE AS EMPLOYEE GRIEVANCE. Requests for promotion reconsideration are excluded from the Agency Grievance Procedure. See VA Handbook 5021, Employee/Management Relations, Part IV, Chapter 3, paragraph 16. Promotion reconsideration decisions are excluded from the negotiated grievance procedure pursuant to 38 U.S.C. § 7403(f)(1)(B). The decision of whether or not to promote a bargaining unit employee is not subject to the negotiated grievance procedure but a failure on the part of the agency to follow the promotion/reconsideration procedure in this policy may be.

8. EFFECTING ADVANCEMENT AND PROMOTION ACTIONS.

a. Effective Date.

- (1) Promotion (to include advancement to a higher level within a grade) based on entitled anniversary date of grade reviews, will be made effective by the HR Officer on the first day of the pay period following the anniversary date of grade on which the promotion was based. A promotion may also be made effective at a future date set by the approving authority and at the election of the employee, that does not violate law or negotiated agreement when doing so would benefit the employee (i.e., an employee is due a within grade increase). Promotion recommendations and actions that are administratively delayed beyond the time limits specified in paragraphs 6 above will be made retroactive. All other promotion actions will be made effective the first date of the first pay period after approval of the promotion.
- (2) If an employee becomes eligible for promotion while on LWOP for purposes for which they have a statutory entitlement to receive promotion consideration (e.g., military service, OWCP), no action will be taken until the employee returns to duty. If the employee, on return to duty meets all

the requirements for promotion consideration, he or she will be considered for promotion as if he or she had been continuously employed in the position.

NOTE: See chapter 6, this part, for effecting promotion actions upon return from military service.

9. [TEMPORARY PROMOTIONS].

- a. An employee may be temporarily promoted to a higher graded position where the grade of the position is based on the complexity of the assignment. The employee must meet the administrative and qualification requirements for promotion and such promotions are to be processed using the procedures in paragraphs 2 and 3 above.
- b. On expiration or termination of the promotion, the grade and salary of the employee will be adjusted in accordance with the provisions of VA Handbook 5007, Pay Administration. In applying the provisions of this handbook, the salary will be adjusted to the salary held previously, unless a higher rate is warranted by reason of periodic step increases. On assignment, the following statement will be placed in the "Remarks" item of the SF 50-B, Notification of Personnel Action: "Employee informed of conditions of temporary grade promotion."

10. [OTHER GRADE CHANGES].

a. Change to Lower Grade.

- (1) **General.** As provided by 38 U.S.C. § 7403(e) where an employee's grade level and salary are based on both the nature of the assignment and the employee's personal qualifications and the assignment is subsequently changed, the grade and salary may be adjusted as appropriate. Such action may be taken by the Under Secretary for Health or designee for Title 38 employees in centralized assignments and by the facility director for all Title 38 employees in noncentralized assignments. The facility director may delegate the authority to the chief of staff, associate director, nurse executive, and pharmacy chief for occupations under their respective purview.
- (2) **Title 38 employees.** Employees appointed under authority of 38 U.S.C. § 7401(1) and permanent part-time employees appointed under 38 U.S.C. § 7405 (a)(1)(A) who are placed in a lower grade for reasons other than cause or at the employee's request will have their pay set at the lowest step of the lower grade which equals or exceeds their existing rate of basic pay. If there is no such step, employees are entitled to pay retention.

- (a) **Assignment Change.** If an employee is [involuntarily] placed in a different assignment which does not warrant the employee's current grade level, the employee will not be eligible for grade retention. The employee's entitlement to pay retention will be determined in accordance with VA Handbook 5007, Pay Administration.
- (b) **Assignment Change for Cause or at the Employee's Request.** If an employee is changed to an assignment which does not warrant the employee's current grade level for cause or at the employee's request, the employee is not eligible for grade or pay retention.

NOTE: Directed transfers or reductions in grade approved under this paragraph will not be considered adverse actions under 38 U.S.C. § 7461, provided they are not based on charges related to conduct or performance. The actions are, however, grievable under the provisions of VA Handbook 5021, Employee/Management Relations.

[]

11. DETAILS, TEMPORARY CHANGE IN ASSIGNMENT, TEMPORARY REASSIGNMENTS, AND TEMPORARY PROMOTIONS FOR TITLE 38 EMPLOYEES APPOINTED UNDER 38 U.S.C. §§ 7401(1), 38 U.S.C. 7401(3), AND 38 U.S.C. 7405.

- a. **Details.** When a title 38 or hybrid title 38 position is vacant, the facility director may detail another title 38 or hybrid title 38 employee to the position. Generally, details will not exceed 1 year and may be terminated prior to the expiration date. The facility director may approve extensions of the detail when circumstances warrant.
- b. **Temporary Change in Assignment.** Individuals paid from physician and dentist pay schedules may receive a market pay adjustment and/or tier change after serving in the assignment for 60 days or more. Generally temporary change in assignment will be for a period not to exceed one year and may be terminated prior to the expiration date. The facility director may approve the extension of a temporary change in assignment not to exceed 1 additional year when circumstances warrant. On expiration or termination of the temporary assignment, the market pay and/or tier of the employee will be adjusted in accordance with the provisions of VA Handbook 5007, Pay Administration. Upon change in assignment, the following statement will be placed in the "Remarks" item of the SF 50-B, Notification of Personnel Action: "Employee informed of conditions of temporary [tier] assignment."
- c. **Temporary Promotions.** If an individual is temporarily reassigned to a higher grade [assignment], the facility director may temporarily promote the individual.

Such action will be taken only after the facility director considers the recommendation of the [supervisor]. Generally, temporary promotions will be for a period not to exceed one year and may be terminated prior to the expiration date. The facility director may approve the extension of a temporary promotion not to exceed 1 additional year when circumstances warrant. On expiration or termination of the temporary promotion, the grade and salary of the employee will be adjusted in accordance with the provisions of VA Handbook 5007, Pay Administration. On approval of the temporary promotion, the following statement will be placed in the "Remarks" section of the SF 50-B: "Employee informed of conditions of temporary promotion."

NOTE: In accordance with VA Handbook 5005, Part III, Appendix N, the utilization of title 38 employees in competitive civil service positions is prohibited, unless approved by the Office of Personnel Management.

12. [OTHER GRADE CHANGES OR CHANGE IN ASSIGNMENT].

a. Change to Lower Grade or Changes in Assignment

- (1) **General.** As provided by 38 U.S.C. § 7403(e), where an employee's grade or tier level and salary are based on both the nature of the assignment and the employee's personal qualifications, and the assignment is subsequently changed, the grade and salary may be adjusted as appropriate.
- (2) Key Nursing Personnel [] in Nurse IV and V Whose Grade is Based on Both Their Personal Qualifications and Responsibilities of Their Assignment.
 - (a) **Placement in a Lower Grade for the Good of VA.** Employees placed in a lower grade for reasons other than cause or at the employee's request will have their pay set at the lowest step of the lower grade which equals or exceeds their existing rate of basic pay. If there is no such step, employees are entitled to pay retention.
 - (b) **Voluntary Changes to a Lower Grade.** Employees who take a voluntary change to a lower grade may have their pay set at any step of the grade that does not exceed their highest previous rate. However, the employee is not eligible for pay retention, and, if the employee changes facilities, the pay rates of the gaining facility shall be applicable. The employee must submit a written request, through channels, for the employment change. The employee's signed request is to be filed on the right side of the employee's personnel folder.

b. Review of Assignments of Key Nursing Personnel [(Nurses Other Than Nurse Executives) and APN (Certified Nurse Anesthetists)] in Nurse IV and Above Whose Grade is Based on Both Their Personal Qualifications and Responsibilities of Their Assignment.

- (1) Facility directors or officials in Central Office may request review of an assignment if they believe it no longer warrants the current grade; the assignment cannot be restructured within the requesting official's scope of responsibilities; and the employee will not voluntarily accept a change to a lower grade. The responsible program official will initiate such a review if there has been a significant change in the assignment or an accretion or erosion of responsibilities suggests that the assignment would be more appropriately placed in a different grade.
- (2) Recommendations related to [RN and APN assignments] will be sent to the Office of Nursing Services. Those related to [APN (CNA)] assignments will be sent to the Central Office [] Office of Patient Care Services. If it is determined that the grade is inappropriate, the correct grade will be identified, and the following action will be taken:
 - (a) Any promotion or advancement will be effected on the first day of the first pay period following the approving official's determination.
 - (b) If the Central Office program official determines that the current grade is no longer warranted:
 - i The facility's request is forwarded to the Assistant Deputy Under Secretary for Health (10N). This office will attempt voluntary or involuntary placement of the employee in a more appropriate assignment. If no placement opportunities are available, the request will be returned to the facility.
 - ii The requesting official shall reduce the employee to the appropriate grade. Such employees are eligible for pay retention.

NOTE: Directed transfers or reductions in grade approved under this paragraph will not be considered adverse actions under 38 U.S.C. § 7461, provided they are not based on charges related to conduct or performance. The actions are, however, grievable under the provisions of VA Handbook 5021, Employee/Management Relations.

[]

CHAPTER 5. CONVERSIONS OR CHANGE IN ASSIGNMENTS (TITLE 38)

1. Change in assignment for physicians and dentists will be processed by a Compensation Panel. (See VA Handbook 5007, Pay Administration, Part IX.) All personnel actions changing an employee from one type of appointment to another under authority of 38 U.S.C., chapter 73 or 74 and not involving a break in service will be processed as conversions except changes from or to fee-basis appointments under authority of 38 U.S.C. § 7405(a)(2) and lump-sum fee-basis appointments of consultants and attending's under authority of 38 U.S.C. § 7405(a)(2), and without compensation appointments under 38 U.S.C. § 7405(a)(1). These actions will be processed as new appointments. Changes in grades or levels for employees on time-limited appointments under 38 U.S.C. § 7405(a)(1) will be processed as conversions.

NOTE: Conversion or change in assignment to another appointment giving the employee fewer rights and benefits will not be made until the employee has been advised in writing of the conditions of employment under the new appointment and the employee has submitted a written resignation or other written evidence clearly indicating voluntary separation from the previous employment.

2. UTILIZATION ON A FEE-BASIS.

- a. Individuals who render service to VA on a fee-basis, such as employees paid according to a schedule of fees or consultants or attending's used by letter of appointment (see part II, section G, this handbook) may not be converted to appointments under the provisions of 38 U.S.C. §§ 7306, 7401(1), 7401(3), and 7405(a)(1). Fee-basis employees will be terminated prior to appointment under these authorities.
- b. Full-time, part-time or intermittent employees appointed under 38 U.S.C. §§ 7306, 7401(1), 7401(3), or 7405(a)(1), may not be converted to utilization on a fee-basis. An employee must resign or the appointment must be terminated prior to rendering service on a fee-basis except for instances in which dual appointment has been approved. (See part II, chapter 3, section A.)

3. ACTION BY [SUPERVISORY OFFICIAL OR COMPENSATION PANEL]

- a. A [supervisor] will be responsible for making recommendations to the approving authority concerning any conversion action to a probationary appointment under 38 U.S.C. § 7401(1) or servicing HR Office for those under 38 U.S.C. § 7401(3), whichever is applicable, as well as RNs [or APNs] appointed part-time or intermittent under 38 U.S.C. § 7405(a)(1), and on any conversion involving a change in grade and/or step rate within the grade.
- b. No [additional action] will be required on conversion from an appointment under 38 U.S.C. §§ 7401(1), 7401(3) or 7405(a)(1) for individuals appointed as part-

time or intermittent RNs [or APNs], provided the employee has previously acquired permanent status under 38 U.S.C. §§ 7401(1) or 7401(3) or completed a probationary period under 38 U.S.C. § 7405(a)(1) for individuals appointed as part-time or intermittent RNs [or APNs], as appropriate, and has had continuous service under 38 U.S.C., chapter 73 or 74 since acquiring such status.

- c. The [supervisor] will determine that the employee's past and expected future performance and physical, mental and emotional ability warrants the change in employment status. []
- d. The Compensation Panel will document any change in assignment on VA Form 10-0432a, Compensation Panel Action, along with a recommendation to the approving official.

4. APPROVAL AUTHORITY. All conversion actions or change in assignments may be approved by the facility director except those involving a change in grade or step rate or tier level for which the approving authority is vested in Central Office or where Central Office approval is specifically required.

5. PROCESSING REQUIREMENTS.

- a. Personnel actions necessary to effect conversions to appointments or change in assignments under 38 U.S.C., chapter 73 or 74 generally will be effective the first day of the pay period following approval of the conversion or change in assignment except where otherwise specified. When necessary, in order to prevent a break in service caused by the expiration of an appointment prior to the first day of the next pay period, the action may be made effective the first day following the expiration of such appointment.
- b. The nature of action will indicate conversion or change in assignment to an appropriate excepted appointment under the authority of 38 U.S.C., chapter 73 or 74. For individuals converted to an appointment under 38 U.S.C. § 7401(1), as well as individuals converted to an appointment as a part-time or intermittent RN [or APN] under 38 U.S.C. § 7405(a)(1), the "Remarks" section of the SF 50-B will, when appropriate, state "Appointment subject to probationary period of 2 years." When appropriate, it will also show the amount of any prior service which is creditable toward completion of the required probationary period or a remark that the probationary period was completed.
- c. A new application is not required for conversions or change in assignments when one is already on file and VA Form 10-2850, 10-2850a, or 10-2850c is not specifically required.

6. CONVERSION OR CHANGE IN ASSIGNMENTS TO APPOINTMENT UNDER 38 U.S. C. § 7401(1) FROM APPOINTMENT UNDER 38 U.S.C. § 7306. Employees serving under 38 U.S.C. § 7306 appointments will notify the Under Secretary for Health (10) if they desire full-time appointments under 38 U.S.C. § 7401(1). (See part II, chapter 3, section A, this handbook.) [The supervisory official] will recommend to the Under Secretary for Health the grade and rate of pay and type of assignment which should be made on conversion. The Central Office Compensation Panel for physicians and dentists will recommend a tier determination to the Under Secretary for Health on changes in assignment. On approval of the [] recommendation by the Under Secretary for Health, personnel action will be taken to affect the conversion or change in assignment.

[]

**APPENDIX J. DOCUMENTATION OF ADVANCEMENTS ON SF 50-B,
 NOTIFICATION OF PERSONNEL ACTION**

Category of Employee	Appointment Authority	Nature of Action	Legal Authority	VA Required Remarks
Podiatrists, Optometrists, Chiropractors, Registered Nurses, [Advanced Practice Nurses], Physician Assistants, and Expanded-Function dental Auxiliaries []	38 U.S.C. § 7401(1)	"Promotion" "Pay Adjustment" "Promotion" or "Change to Lower Grade," as appropriate "Change to Lower Grade" "Pay Adjustment" "Pay Adjustment"	38 U.S.C. §7403	"Special Advancement for Performance" "Grade Adjustment. For consistency with (promotion requirements)." Will be shown for promotion grade adjustments. "Grade Adjustment. For consistency with (duty assignment)." Will be shown when employee changed from level of assignment where grade is based on both nature of assignment and personal qualifications. "Special Advancement for Achievement" Use when a Nurse I is advanced to a higher level within Nurse I grade.
Podiatrists, optometrists, chiropractors, registered nurses, [advanced practice nurses], physician assistants, and expanded-function dental auxiliaries []	38 U.S.C. § 7405(a)(1) (A)	"Promotion" "Pay Adjustment" "Promotion" or "Change to Lower Grade," as appropriate "Change to Lower Grade"	38 U.S.C. § 7405(b)	"Special Advancement for Performance" "Grade Adjustment. For consistency with (promotion requirements)." Will be shown for promotion grade adjustments. "Grade Adjustment. For consistency with (duty assignment)." Will be shown when employee changed from level of assignment

		<p>“Pay Adjustment”</p> <p>“Pay Adjustment”</p>		<p>where grade is based on both nature of assignment and personal qualifications.</p> <p>“Special Advancement for Achievement”</p> <p>Use when a Nurse I is advanced to a higher level within Nurse I grade. Applicable to part- time or intermittent appointments without time limitations.</p>
Medical and dental residents	38 U.S.C. § 7406	“Promotion”	38 U.S.C. § 7406	
Career Residents	38 U.S.C. § 7406	<p>“Promotion”</p> <p>“Pay Adjustment”</p>	38 U.S.C. § 7406	<p>“Special Advancement for Performance” or “Special Advancement for Achievement”</p>

**DOCUMENTATION OF ADVANCEMENTS ON SF 50-B,
 NOTIFICATION OF PERSONNEL ACTION (CONTINUED)**

Category of Employee	Appointment Authority	Nature of Action	Legal Authority	VA Required Remarks
All Hybrid Occupations	38 U.S.C. § 7401(3)	"Promotion" "Pay Adjustment" "Promotion" or "Change to Lower Grade," as appropriate "Change to Lower Grade" "Pay Adjustment"	38 U.S.C. § 7403	"Special Advancement for Performance" "Grade Adjustment. For consistency with (promotion requirements)." Will be shown for promotion grade adjustments. "Grade Adjustment. For consistency with (duty assignment)." Will be shown when employee changed from level of assignment where grade is based on both nature of assignment and personal qualifications. "Special Advancement for Achievement"
All Hybrid Occupations	38 U.S.C. § 7405(a)(1)(B)	"Promotion" "Pay Adjustment" "Promotion" or "Change to Lower Grade," as appropriate "Change to Lower Grade"	38 U. S. C. § 7405(b)(2)	"Special Advancement for Performance" "Grade Adjustment. For consistency with (promotion requirements)." Will be shown for promotion grade adjustments. "Grade Adjustment. For consistency with (duty assignment)." Will be shown when employee changed from level of assignment where grade is based on both nature of assignment and personal qualifications.

		"Pay Adjustment"		"Special Advancement for Achievement"
--	--	------------------	--	---------------------------------------

APPENDIX K. PROMOTIONS, ADVANCEMENT TO A HIGHER LEVEL WITHIN THE GRADE OR CHANGE IN ASSIGNMENTS APPROVED BY THE UNDER SECRETARY FOR HEALTH OR A DESIGNEE, NETWORK DIRECTORS AND FACILITY DIRECTORS

NOTE: The term advancement in this appendix refers to advancement to a higher level within the grade for [registered nurses (RNs) and advanced practice nurses (APNs)], not special advancements for achievement or performance.

1. UNDER SECRETARY FOR HEALTH OR DESIGNEE.

NOTE: All actions affecting directors of medical and VISNs requiring approval of the Under Secretary for Health or designee, will also require the concurrence of the Under Secretary for Benefits.

- a. Promotion of employees to positions centralized to the Under Secretary for Health as outlined in VA Handbook 5005, Appendix G15 Chiefs of Pharmacy Service to GS-15.
- b. Promotion of VHA Central Office employees.
- c. Promotion reconsideration requests from VHA Central Office employees.
- d. Promotion reconsideration requests from RNs [and APNs] will be processed in accordance with VA Handbook 5005, Part III, Chapter 4, Section A, paragraph 7d.
- e. Promotion reconsideration for VISN employees.

2. NETWORK DIRECTORS.

- a. Promotion of VISN employees.
- b. Reconsideration requests for promotion or change in assignment from employees at field facilities within the respective VISNs. This applies to all occupations except RNs [and APNs].
- c. Temporary change in assignments to chief of staff or comparable positions in tier 4 for renewable periods not to exceed one year.

3. FACILITY DIRECTORS.

- a. Promotion of employees to grades GS-13 and below and to GS-14 grade levels as delegated by the Network Director.

- b. Promotion of Pharmacists. Facility directors may delegate to the Chief of Pharmacy Service the promotion of pharmacists in noncentralized assignments below GS-13, Assistant Chiefs of Pharmacy Service at GS-13.
- c. Promotion of all other hybrids, which may be delegated to the chief of staff, the associate director or nurse executive, as appropriate.
- d. Promotion of Optometrists.
- e. Promotion of Chiropractors.
- f. Promotion of Podiatrists.
- g. Change in assignment of Dentists (staff dentists, service chiefs, and positions comparable to service chief).
- h. Promotion of Expanded-Function Dental Auxiliaries.
- i. Promotion of Physician Assistants [at PA IV and PA V, which may not be delegated to the chief of staff or lead PA].
- j. Change in assignments of Physicians.
- k. Promotion or advancement to a higher level within the grade of APN (Certified Nurse Anesthetists).
- l. Promotion of Registered Nurses at Nurse III and below, which may be delegated to the Associate Director for Patient Care Services or nurse executive.
- m. Promotion of Registered Nurses at Nurse IV and Nurse V, which may not be delegated to the Associate Director for Patient Care Services or nurse executive.
- n. Reconsideration requests for promotion up to the full performance level from employees appointed under 38 U.S.C. §§ 7401(3) or 7405(a)(1)(B) at field facilities.

NOTE: When an employee on a time-limited appointment is advanced in grade or level within the grade (Nurse I), those actions must be processed as a conversion action after consideration by the appropriate approving official. Refer to VA Handbook 5005, Part III, Chapter 5, paragraph 5.

APPENDIX M. PROCESSING TITLE 38 PROMOTIONS AND ADVANCEMENTS

HOW TO PROCESS A PROMOTION FOR [] TITLE 38 HYBRID OCCUPATIONS		
A		B
S T E P S	If full-time, part-time or intermittent employee is in a	then take these steps for promotion up to the full performance level
1	Hybrid title 38 occupation	Upon receipt of Notice of Pending Personnel Action, the HR Office will forward the original to the employee's service chief. A duplicate copy will be retained in the HR Office as a suspense copy.
2		The immediate supervisor will notify employee of eligibility for promotion, and employee will be given 30 days to submit a self-assessment. The immediate supervisor will make a formal promotion recommendation to the approving official based on an evaluation of employee's self -assessment, performance, experience, and/or education, as appropriate. Recommendation will meet criteria described in section B, chapter 4, this part.
3		Upon concurrence of the promotion recommendation by the approving official, the appropriate personnel action will be prepared and submitted along with supporting documentation to the HR Office. In no case will the promotion be effected later than the employee's anniversary date unless a future date, set by the approving authority and at the election of the employee when doing so, would benefit the employee (i.e., an employee is due a within grade increase), and that does not violate law or negotiated agreement.
4		If promotion is not recommended, the immediate supervisor will notify the employee in writing that they are not being recommended for promotion. The written notice will state the reason(s) why the employee does not meet the criteria for promotion, the right to reconsideration, and that requests for reconsideration must be preceded by an informal discussion with their supervisor. Reconsideration request procedures will follow criteria described in paragraph 7 of chapter 4, this part.

APPENDIX N. UTILIZATION OF TITLE 38 EMPLOYEES (APPOINTMENT/ASSIGNMENT TO NON-CLINICAL DUTIES)

- 1. SCOPE.** This appendix contains VHA policy on the assignment of non-patient care duties to title 38 employees and when placement of title 38 employees in competitive civil service positions is required; it establishes procedures for ongoing review of these assignments; and it provides information on the conversion of title 38 employees to appointments under title 5 United States Code (U.S.C.). This appendix sets forth VHA policy that title 38 employees are to be appropriately utilized.
- 2. POLICY.** It is VHA policy that responsible officials assign title 38 employees duties requiring clinical skills; that the utilization of title 38 employees in competitive civil service positions is prohibited [(unless approved by the Office of Personnel Management)]; and that positions which do not require clinical skills be placed in the competitive civil service.
- 3. ACTION.**
 - a. Network directors, facility directors and officials in VA Central Office are responsible for:
 - (1) Ensuring that positions that require clinical knowledge, skills, and abilities of an occupation covered by title 38 are not placed under title 5.
 - (2) Ensuring that positions that do not require the knowledge, skills, and abilities of a health care professional are not removed from the competitive civil service by placing a title 38 employee in the position. **NOTE:** Such actions are contrary to title 5 U.S.C. § 3302 and title 5 Code of Federal Regulations (C.F.R.), part 1 (Civil Service Rule 1), and, in certain instances, are considered a prohibited personnel practice as defined by title 5 U.S.C. § 2302(b)(6).
 - (3) Controlling the degree to which title 38 employees are assigned duties that do not require clinical skills. However, when such action is necessary, these officials must ensure that:
 - (a) Staffing is sufficient to provide patient care, continuous quality improvement, health care education, research, etc.
 - (b) The assignment of the non-clinical duties is consistent with good position management principles. The provision of administrative support services needs to be evaluated in a comprehensive manner at the organization and position levels. For example, would putting employees performing related non-clinical duties under the control of clinical managers result in improved services? Positions can also be reengineered so non-clinical responsibilities can be assigned to

competitive service employees, making more clinical staff available for patient care services. Positions that involve a mixture of clinical and non-clinical duties are to be evaluated to determine if title 38 employees might be used on a part-time, consultative, collateral or rotational basis. Also, non-clinical duties assigned to title 38 employees are to be reduced to a minimum and assigned to title 5 employees.

- (c) Staffing patterns are established so that title 38 employees are not routinely required to perform administrative or support functions that do not require the services of a health care professional. This includes title 38 employees assigned to evening, night, weekend, and holiday tours of duty.
 - i* Working with the chief of staff, nurse executive, HR Officer, and other appropriate officials to apply the policies in this appendix consistently throughout the organization. This includes reviewing and bringing into conformance appointments or assignments inconsistent with this appendix.
 - ii* Converting positions that do not require clinical skills to the competitive civil service, and either reassigning the incumbent title 38 employee or offering the employee the opportunity to voluntarily convert to the competitive civil service using the Interchange Agreement in appendix III-C. However, such conversion actions must be based upon a [supervisor's finding in collaboration with profession's SMEs and HR staff] finding that the position does not require the services of a health care professional. Employees requesting conversion must be advised, in writing, of the implications of the decision on their pay and benefits (e.g., differences in leave accrual rates and, since conversion is voluntary, these employees would not be eligible for pay retention). In addition, new, current or converting title 5 employees who are licensed in a title 38 occupation (e.g., M.D., R.N.) are to be advised in writing that they are prohibited from engaging in professional practice in their VA position. Copies of these statements are to be placed on the left-hand side of the employee's Merged Records Personnel Folder. When employees are reassigned to patient care positions, management must ensure that the employee's competencies and credentials (e.g., license) are current. Reasonable measures must also be taken to reduce or eliminate potential adverse effects on employees being reassigned. There may be labor relations responsibilities to fulfill when an employee is involuntarily reassigned from one bargaining unit position to another. Managers are to consult with their labor relations advisor to determine whether an obligation exists. **NOTE:** If the [finding

identifies that] the position requires a title 38 employee, responsible officials are to evaluate the position to ensure it is consistent with the criteria in preceding subparagraphs a (1) and a (2).

b. Network directors, facility directors and officials in VHA Central Office cannot:

- (1) Assign title 5 employees or former title 38 employees who have converted to title 5 positions, any clinical responsibilities associated with a title 38 occupation. Such responsibilities can only be assigned to employees appointed under title 38.
- (2) Convert title 38 employees to title 5 positions to avoid pay limitations, required waivers of qualification standards, competitive civil service procedures, credentialing requirements or to circumvent provider-patient ratios.
- (3) Establish title 5 positions in the occupations listed in 38 U.S.C. 7401(1) or (3).

4. FOLLOW-UP RESPONSIBILITY. The Director, Workforce Management and Consulting (106A) is responsible for the contents of this appendix.