

STAFFING

1. **REASON FOR ISSUE:** To revise the Department of Veterans Affairs (VA) qualification standard for the Occupational Therapists, GS-0631, occupation appointed under the authority of 38 U.S.C. § 7401(3) and 38 U.S.C. § 7405 (a)(1)(B) in VA.
2. **SUMMARY OF CONTENTS/MAJOR CHANGES:** This handbook contains mandatory procedures on staffing. The pages in this issuance replace the corresponding page numbers in VA Handbook 5005/Appendix II-G14. These changes will be incorporated into the electronic version of VA Handbook 5005 that is maintained on the [Office of the Chief Human Capital Officer Website](#). Significant changes include:
 - a. Changes the basic requirements of education and experience combinations.
 - b. Eliminates the GS-7 grade level and establishes the GS-9 grade as the entry level.
 - c. Changes the full performance level to GS-12.
 - d. Updates grades and assignments.
 - e. Establishes the GS-11 grade level as developmental.
 - f. Increases the assignment of the Clinical Specialist to GS-13 grade level.
 - g. Establishes an assignment at the GS-13 level and a Lead assignment at GS-13 grade level.
 - h. Establishes the assignment for the Program Coordinator at the GS-13 and establishes a GS-15 grade level.
3. **RESPONSIBLE OFFICE:** Recruitment and Placement Policy Service (059), Office of the Chief Human Capital Officer.
4. **RELATED DIRECTIVES:** VA Directive 5005, Staffing.
5. **RESCISSIONS:** VA Handbook 5005, Part II, Appendix G14, "Occupational Therapist Qualification Standard," dated February 26, 2009.

CERTIFIED BY:

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

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DISTRIBUTION: Electronic only

NOTE: This transmittal page accompanied the former VA Handbook 5005, Staffing publication. It is provided for reference to the revisions made to this qualification standard.

FORMER VA HANDBOOK REFERENCE: PART II APPENDIX G14
EFFECTIVE DATE: December 13, 2019

**OCCUPATIONAL THERAPIST
QUALIFICATION STANDARD
GS-0631
Veterans Health Administration**

1. COVERAGE. The following are requirements for appointment as an occupational therapist (OT) in the Veterans Health Administration (VHA). These requirements apply to all OTs in the General Schedule (GS) GS-0631 series, including those assigned to VA medical centers, community-based outpatient clinics, [readjustment counseling service/Vet centers], Veterans Integrated Service Network (VISN) offices, the VHA National Center for Organizational Development, and VHA Central Office. This work may include any one, or a combination of the following: providing professional clinical services, conducting research, carrying out education and training activities, clinical consultation, supervision, and administration. In performing these duties, [] OTs demonstrate professional knowledge of and skill in applying a wide range of theories, principles, and methodologies for the practice of occupational therapy.

2. AUTHORITIES.

- a. [P.L. 111-163, Caregivers and Veterans Omnibus Health Services Act of 2010;](#)
- b. [38 U.S.C. § 7401, Appointments in Veterans Health Administration;](#)
- c. [38 U.S.C. § 7402, Qualifications of appointees;](#)
- d. [38 U.S.C. § 7403, Period of appointments; promotions;](#)
- e. [38 U.S.C. § 7405, Temporary full-time appointments, part-time appointments and without-compensation appointments;](#)
- f. [38 U.S.C. § 7407, Administrative provisions for section 7405 and 7406 appointments.](#)

3. DEFINITIONS.

- a. **Appointing Official.** The Human Resources Management Officer is delegated appointing official to process and authenticate notifications of personnel actions, and authority to effect management-approved employment actions on behalf of officials, employees and facilities for which service is provided.
- b. **Approving Official.** The VISN director, facility director, or designee is the approving

official and will determine whether to approve or disapprove the appointment of employees in hybrid occupations.

- c. **Journey Level.** The full performance level for this qualification standard is GS-12.]

- d. **Creditable Experience.** [] To be creditable, the experience must have required the use of knowledge, skills, and abilities associated with current professional occupational therapy practice. Creditable experience can be obtained through employment as an OT. This may be evidenced by one or both of the following:
 - (1) **Active professional practice.** Active professional practice includes paid/non-paid employment as a professional OT, and as defined by the American Occupational Therapy Association (AOTA). Experience gained after graduation but prior to licensure/certification is creditable, provided the candidate was utilized as a graduate OT and subsequently passed the National Board for Certification in Occupational Therapy (NBCOT) certification, and the required state regulatory requirements.
 - (2) Completion of a post-graduate fellowship or a post-graduate residency program can be substituted for creditable experience on a year for year basis. Fellowships or post-graduate training programs are typically in specialty areas such as advanced practice, research, mental health, gerontology, enhanced education, health policy, leadership and therapeutic sciences.
 - (3) **Quality of Experience.** Experience is only creditable if it is post-graduate experience as a professional OT directly related to the duties to be performed. Qualifying experience must be at a level comparable to professional occupational therapy experience at the next lower level. For all assignments above the full performance level, the higher level duties must consist of significant scope, administrative independence, complexity (difficulty) and range of variety as described in this standard at the specified grade level and be performed by the incumbent at least 25% of the time.

- e. **Part-Time Experience.** Part-time experience is creditable according to its relationship to a full-time workweek. For example, an OT employed 20 hours per week, or on a half time basis, would receive one (1) full-time workweek of credit for each two (2) weeks of service.

- [f.] **Content Specialty/Specialty area.** Specialized content areas of occupational therapy include, but are not limited to, geriatrics, mental health, neurology, cardiopulmonary, spinal cord injury, amputee, low vision, chronic pain, polytrauma, brain injury, lymphedema, assistive technology, hand therapy, driving and community mobility, and seating and mobility. As health care evolves content specialty will change.

4. BASIC REQUIREMENTS. The authority to set requirements is provided by 38 U.S.C. §

7402(b)(14).

a. **Citizenship.** Be a citizen of the United States. (Non-citizens may be appointed when it is not possible to recruit qualified citizens in accordance with 38 U.S.C. § 7407(a)).

b. **Education [and/or Experience.]**

[(1) The individual must meet at least one of the following requirements below:

(a) Bachelor's degree in occupational therapy and two (2) years of experience as an occupational therapist;

NOTE: The baccalaureate degree must be from an approved program prior to the AOTA January 1, 2005 decision that the Accreditation Council for Occupational Therapy Education (ACOTE) would only accredit master or doctoral degree programs in occupational therapy.

or

(b) Bachelor's degree in occupational therapy and two (2) full years of graduate education in a related field;

NOTE: The baccalaureate degree must be from an approved program prior to the AOTA January 1, 2005 decision that ACOTE would only accredit master or doctoral degree programs in occupational therapy.

or

(c) Master's Degree or higher in occupational therapy.

(2) Individuals must be a graduate of] a degree program in occupational therapy approved by the ACOTE or predecessor organizations. This is inclusive of an internship (supervised fieldwork experience required by the educational institution). ACOTE is the only accreditation agency recognized by the United States Department of Education and the Council for Higher Education Accreditation. Degree programs may be verified by contacting the [American Occupational Therapy Association website](#) or at their office address: American Occupational Therapy Association, P.O. Box 31220, Bethesda, MD 20824-1220.

[c. **Foreign Graduates.** Graduates] of foreign occupational therapy programs meet the requirements of subparagraph [3b(2)] if they have a current, full, active and unrestricted license referred to in subparagraph [3e] of this appendix.

[d. **Certification.** Candidates must possess a current NBCOT certification as an OT.]

[e. **State Licensure.** Candidates must possess] a full, current, and unrestricted state license [], to practice occupational therapy in a state, territory or Commonwealth of the United States (i.e., Puerto Rico), or in the District of Columbia.

- f. **Loss of Credential.** An employee in this occupation who fails to maintain [the required state or territorial licensure and the NBCOT certification, both current and in good standing,] must be removed from the occupation, which may result in termination of employment.
- g. **Exceptions for the Graduate Occupational Therapist.**
- (1) OT graduates from an approved occupational therapy program [who otherwise meet the minimum qualification requirements,] but who do not possess NBCOT certification and/or []state [licensure], may be [appointed, pending certification and/or licensure,] as a graduate OT [on a full-time temporary appointment] not-to-exceed two years under the authority of 38 U.S.C. § 7405(c)(2).
- [(2) Graduate OTs may only be appointed at the GS-9 grade level and may not be promoted/converted to the GS-11 level until licensure and/or certification is obtained. For grades levels at or above the developmental GS-11 grade level, the OT must be certified and licensed.
- (2) A graduate OT may provide care only under the direct supervision of a licensed] OT who meets all state regulatory requirements.
- [(4) Temporary graduate OT appointments may not be extended beyond two years, or converted to a new temporary appointment.
- h. **Failure to Obtain Licensure/Certification.** In all cases, graduate OTs must actively pursue obtaining required credentials (i.e., NBCOT certification and/or state licensure) from the date of their appointment. The human resource office will notify the uncertified/unlicensed OT in writing of the requirement to obtain certification/licensure, the date by which the certification/license must be acquired, and the consequences for not becoming certified/licensed by the deadline date. The written notice must be provided prior to the entrance on duty date. Failure to obtain required credentials by the prescribed date will result in termination of employment.]
- i. **Grandfathering Provision.** All [persons] employed in VHA [in this occupational series or in another occupational series that are also performing the duties as described in the qualification standard on the effective date of this] qualification standard are considered to have met all qualification requirements for the [] grade held including positive education and [] licensure/certification/registration [that are part of the basic requirements of this occupation]. [] Employees who do not meet all the basic requirements required in this standard, but who met the qualifications applicable to the position at the time they were appointed to it, the following provisions apply:
- (1) They may be reassigned, promoted up to and including the full performance level, or changed to lower grade within the occupation, but may not be promoted beyond the full performance level or placed in supervisory or managerial positions.
- (2) If an OT who was retained under this provision leaves the occupation, the employee

will lose protected status and must meet the full VA qualification standard requirements in effect at the time of reentry to the occupation.

(3) OTs initially grandfathered into this occupation, who subsequently obtain additional education and/or licensure/certification/registration that meet all the basic requirements of this qualification standard, must maintain the required credentials as a condition of employment in the occupation.

(4) OTs who are appointed on a temporary basis prior to the effective date of the qualification standard may not have their temporary appointment extended or be reappointed, on a temporary or permanent basis, until they fully meet the basic requirements of the standard.

j. **Physical Requirements.** See VA Directive and Handbook 5019.

k. **English Proficiency.** [Candidates must be proficient in spoken and written English to be appointed as authorized by 38 U.S.C. § 7403(f).]

5. **GRADE [DETERMINATIONS.** In addition to the basic requirements for employment, the following criteria must be met when determining the grade of candidates.]

a. **Occupational Therapist, GS-9 []**

(1) **Education, Experience, or Licensure.** None beyond the basic requirements.

(2) **Assignments.** [Individuals assigned at the GS-9 grade level serve as OT practitioners in a career development position progressively expanding their ability to provide assessment and treatment interventions for a wide range of human function systems. The entry level therapist has a basic foundation of OT and generally practices independently. OTs at this level typically have guidance from more experienced therapists. OTs that are not licensed must practice under the supervision of a licensed OT.]

b. **Occupational Therapist, GS-11**

(1) **Education, Experience, or Licensure.**

(a) Completion of one year of experience equivalent to at least the GS-9 grade level and directly related to the position being filled;]

or

(b) Three years of progressively higher level graduate education leading to a degree in occupational therapy or a directly related field;

[or

(c) Doctorate in occupational therapy.]

(2) **Demonstrated [Knowledge, Skills, and Abilities (KSAs)].** In addition to the [experience or education above, the candidate] must demonstrate all of the following KSAs:

[(a) Knowledge of occupational therapy practice.

(b) Ability to administer/interpret evaluation findings to develop and coordinate intervention plans, including goals and methods of treatment.

(c) Ability to implement intervention plans directly or in collaboration with others.

(d) Skill in monitoring an individual's response to interventions and modify treatment plans and reevaluating as indicated.

(e) Ability to communicate and or collaborate with patients, family members, caregivers, interdisciplinary professionals and/or other individuals verbally and in writing.

(f) Knowledge of health and safety regulations to minimize risk in the provision of patient care and the environment of care.

(g) Knowledge of applicable regulations governing documentation, reimbursement and workload entry in accordance with established professional practice.]

(3) **Assignment.** [OTs at this grade level practice independently and are responsible for the assessment of functional and occupational roles using standardized tools. The OT modifies standardized and non-standardized evaluation tools. OTs select and provide direct occupational therapy interventions and procedures with routine complexity to enhance safety, wellness, performance in activities of daily living (ADL); and instrumental activities of daily living (IADL), education, work, play, leisure, and social participation. Occupational therapists require guidance with higher complexity conditions. OTs demonstrate an understanding of the theories of treatment in occupational therapy and their proper application through the use of activity analysis, behavioral intervention, frame of references, and therapeutic procedures. They are assigned to all program areas within VHA and provide professional, independent occupational therapy services.]

c. Occupational Therapist, GS-12

(1) **Education, Experience, and Licensure.** [] Completion of one year of experience equivalent to at the [GS-11 grade level and directly related to the position being filled.]

(2) **Demonstrated KSAs.** In addition to the [experience above, the candidate] must demonstrate all of the following KSAs:

[(a) Knowledge of occupational therapy principles and techniques consistent with current clinical standards based on OT theory and evidence based practice.

- Knowledge is inclusive of physical, occupational, cognitive, and psychosocial functional deficits.
- (b) Ability to collaborate and communicate orally and in writing with all internal and external stakeholders.
 - (c) Ability to use critical analysis, clinical reasoning, and creativity to independently solve complex problems related to adapting and modifying assessments, treatment plans, activities and procedures to meet the needs of patients.
 - (d) Skill in procuring, fabricating, adjusting, adapting, and modifying orthoses, splints, and adaptive equipment for activities of daily living (inclusive of durable medical equipment).
 - (e) Ability to conduct OT related in-service and clinical training.]

(3) **Assignment.** [OTs at this level practice independently and are responsible for comprehensive assessment of functional and occupational roles using standardized and non-standardized evaluation tools. OTs select and provide direct occupational therapy interventions and procedures with varying degrees of complexity to enhance safety, wellness, and performance in ADL, instrumental IADL, education, work, play, leisure, and social participation. OTs demonstrate a full professional understanding of the theories of treatment in occupational therapy and their proper application through the use of activity analysis, behavioral intervention, frame of references, and therapeutic procedures. They are assigned to all program areas within VHA and provide professional, independent occupational therapy services. OTs at this level may be given assignments in any area where advanced specialized knowledge is not required on a recurring basis due to the patient population served and complexity of the facility and/or treatment area. Individuals may perform ancillary assignments, including program management duties on an occasional basis, where the complexity and amount of work is not substantial (less than 25% of the duty time).]

d. Occupational Therapist [(Clinical Specialist)], GS-13

(1) **Education, Experience, and Licensure.** Completion of one year of experience equivalent to at least the [GS-12 grade] level and directly related to the position being filled [and one of the following]:

- [(a) A minimum of 2,000 hours of clinical practice directly in the advanced practice area. This time must be within the past five years;
- (b) Certification in an area recognized by the AOTA;
- (c) Completion of a fellowship/residency or advanced degree program in the advanced practice area; or
- (d) An additional advanced degree in a related field.]

[(2) **Demonstrated KSAs.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:]

- (a) Knowledge of contemporary occupational therapy across multiple areas of practice[].
- (b) [Ability to provide clinical guidance in the advanced practice area to other OT practitioners.
- (c) Knowledge of advanced specialized evaluation, interventions and services to independently develop treatment strategies for area of specialization.
- (d) Skill in developing protocols and procedures for intervention programs based on current occupational therapy theory, recent research, and practice.
- (e) Ability to provide consultation to other health care practitioners and outside groups about occupational therapy scope of practice for area of specialization.
- (f) Ability to implement, revise/update evidence based occupational therapy services and programming in area of specialization.]

(3) **Assignment.** [Clinical OT specialists at this grade level serve as subject matter experts and as consultants to occupational therapists and other medical center staff in evaluating and treating patients in the areas of occupational therapy that are beyond the general practice of occupational therapy. This individual must demonstrate skills and techniques for a specific patient population that has highly complex occupational and/or psychosocial impairments. Clinical OT specialist may initiate, lead, and support research projects related to clinical needs. This may include grant writing, guiding others in the process, and direct clinical participation in research.]

e. [Lead] Occupational Therapist, GS-13

[(1)] **[Education, Experience, and Licensure.** Completion of one year of experience equivalent to at least the GS-12 grade level and directly related to the position being filled.

(2) **Demonstrated KSAs.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:

- (a) Knowledge of contemporary occupational therapy across multiple areas of practice.
- (b) Ability to apply advanced occupational therapy knowledge to provide clinical guidance and mentorship to OT practitioners.
- (c) Ability to independently monitor and evaluate clinically appropriate treatment programs.

- (d) Ability to act as a liaison between OT practitioners and the supervisor by coordinating clinical activities, program development, outcome management, and strategic planning.
- (e) Ability to assess, prioritize, and address interpersonal or programmatic conflicts at the lowest possible level.
- (f) Ability to implement, revise and update evidence based protocols, procedures and approved competencies for occupational therapy services.]

(3) **Assignment.** [Lead OTs provide professional guidance and consultation for OT practitioners. They monitor and evaluate clinically appropriate treatment programs with great autonomy. Individuals assigned as a lead OT are responsible for completing complex evaluations and treatments. They are required to apply advanced evaluation methodologies and treatment theories in the provision of care to a vast array of functional impairments and patients. They provide clinical practice guidance for other OT practitioners. Lead OTs collaborate with staff throughout the medical center to coordinate care and triage operations for their assignment. Lead OTs generally would be found in more complex facilities or departments.]

f. [Supervisory Occupational Therapist, GS-13

- (1) **Education, Experience, and Licensure.** Completion of one year of experience equivalent to at least the GS-12 grade level and directly related to the position being filled.
- (2) **Demonstrated KSAs.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
 - (a) Ability to balance multiple responsibilities, set priorities, delegate tasks, meet multiple deadlines, analyze organizational problems, and develop and implement effective solutions.
 - (b) Ability to analyze organizational and operational problems to develop and implement solutions that result in efficient operations and use data effectively to manage workload, quality performance, and productivity within the service.
 - (c) Skill in dealing with employees, team leaders, and managers to include conflict resolution.
 - (d) Ability to utilize evidence-based practices and clinical practice guidelines in a professional area and to guide the staff in applying these tools.]
- (3) **Assignment.** [Supervisory OTs at this level are generally found at complex facilities. The supervisory occupational therapist is responsible for the supervision, administrative management and direction of the occupational therapy program in an OT section or equivalent work group. They have oversight for planning and directing the staff assignments in a variety of clinical settings. The supervisory OT provides a

Veteran/client centered environment while enhancing staff engagement. Typical duties include: assigning work; monitoring clinical performance; resolving staff conflicts; identifying continuing education and training needs; and preparing performance standards and ratings. They interview candidates for positions; recommend appointments, advancements, or when appropriate, disciplinary actions; administer leave; and coordinate staffing needs. Supervisory OTs may provide occupational therapy and have capacity to care for more complex patients. They develop/initiate new treatment programs which integrate outcomes and advancements in practice from current research findings. The supervisory OT serves as an instructor in the facility's in-service clinical training program. They serve as an advocate and resource consultant to the therapy staff and facility-at-large through communication with other departments, physicians, external agencies and other groups regarding programs and operation of the occupational therapy section.]

g. [Occupational Therapist (Program Coordinator), GS-13

- (1) **Education, Experience, and Licensure.** Completion of one year of experience equivalent to at least the GS-12 grade level and directly related to the position being filled.
- (2) **Demonstrated KSAs.** In addition to the experience above, the candidate must demonstrate all the following KSAs:
 - (a) Knowledge of contemporary occupational therapy within specialty area to provide clinical guidance, training, or education for internal and external stakeholders.
 - (b) Ability to set priorities, delegate tasks, meet multiple deadlines, and balance responsibilities.
 - (c) Ability to articulate and communicate the assignment, project, problem to be solved, actionable events, and objectives; as well as provide direction on work methods, practices and procedures in administration and/or education methodologies.
 - (d) Ability to monitor and report on the status and progress of work, evaluate the program to ensure that methods, deadlines and quality have been met, and ensure adjustments to the work process are in accordance with priorities.
 - (e) Ability to develop and coordinate treatment and/or educational programs within a concentrated field or specialty area, such as amputee, spinal cord injury, chronic pain, student clinical education/residency programming, polytrauma/traumatic or brain injury.
 - (f) Ability to effectively motivate and manage a diverse clinical staff with widely divergent backgrounds, interests, and points of view.]
- (3) **Assignment.** [Occupational therapy program coordinators in this assignment

evaluate, plan and direct a program to ensure proper coordination of care within the local facility inclusive of regional/national stakeholders such as The Joint Commission and the Commission on Accreditation of Rehabilitation Facilities (CARF), Universities, AOTA, and the VHA, Office of Academic Affiliation as appropriate. The OT program coordinator has full responsibility for managing the day-to-day activities of the program. They may be responsible for the coordination of assignments for multiple professionals comprising of an interdisciplinary team.

These programs may include but are not limited to polytrauma/traumatic brain injury, chronic pain, amputation, caregiver support program, spinal cord injury and clinical education programs. The OT program coordinator successfully collaborates with leadership, supervisors and staff to facilitate efficient and effective delivery of patient-centered care. They develop and modify standard operating procedures and ensure procedures are applicable to the assigned program. This assignment requires administrative direction and decision making skills, but does not necessarily require formal supervisory responsibility. The OT program coordinator makes decisions that affect staff and other resources with a wide latitude of control and independent judgment. They assist with special administrative projects such as strategic planning, performance improvement, and coordination and training of interdisciplinary team members.]

h. Supervisory Occupational Therapist, GS-14

- (1) **Education, Experience, and Licensure.** [] Completion of one year of experience equivalent to at least the GS-13 level and [directly related to the position being filled].
[]
- (2) **[Demonstrated KSAs.** In addition to the experience above, the candidate must demonstrate all the following KSAs:]
 - a. [] Knowledge of evidence-based practices and clinical practice guidelines in multiple professional areas [] to use these resources to guide the program staff in providing clinically appropriate treatment interventions.
 - b. Skill in interpersonal relationships and conflict resolution in dealing with a diverse range of employees, team leaders, and administrators.
 - c. Ability to manage [resources] for a large, integrated service including not only occupational therapy, but also other focused rehabilitation, ancillary, or other health care services.
 - d. Ability to communicate effectively orally and in writing with a diverse group of professional staff.
 - e. Ability to translate extensive rehabilitation knowledge into cogent and useful policy in complex facilities and/or across multiple sites.
 - f. [] Skill in providing clinical and administrative oversight [and supervision of]

multidisciplinary rehabilitation programs in complex facilities and/or across multiple sites.

- g. Ability to collaborate with strategic planning committees at local, VISN or national levels for new ventures addressing patient care delivery systems, facilities management, and system reorganizations.

(3) **Assignment.** [The supervisory OT, service care line manager or service chief is responsible for the supervision, administrative management, and direction of an occupational therapy program or equivalent service-level department which typically consists of a multi-discipline staff and/or multiple facilities that may be separated geographically. The incumbent provides supervision of clinical and training programs, including the overall technical oversight of the OT practitioners whom they supervise. They are responsible for the development and implementation of policies and procedures that address focused clinical needs and the overall services provided within the section or service. They provide a Veteran/client centered environment while enhancing staff engagement. OTs at this level demonstrate a great deal of autonomy in performing responsibilities that include, but are not limited to, assigning work to employees, monitoring workload and clinical volume, reviewing work of employees to assure accuracy and validity of submissions, assuring adequate clinical staffing, imposing disciplinary measures, and monitoring clinical privileges. The OT supervisor, service care line manager or service chief serves as an advocate and resource consultant to the therapy staff and facility-at-large through communication with other departments, physicians, and external agencies. They select and monitor quality and performance measures for process improvement and patient satisfaction; obtain data from national and local databases; review and analyze various reports and complex data, complete trend analysis relating to quality improvement to ensure desired outcomes; monitors clinical service's compliance with the standards of external bodies and accrediting agencies; and recommends and assures remedial action. This level of assignment is typically located at VA medical centers or healthcare systems that are complex in nature and are affiliated with local colleges and universities.

i. Occupational Therapist [] (Program Coordinator), GS-14

- (1) **Education, Experience, and Licensure.** Completion of one year of experience equivalent to at least the GS-13 grade level and directly related to the position being filled.
- (2) **Demonstrated KSAs.** In addition to the experience above, the candidate must demonstrate all the following KSAs:
 - (a) Ability to plan, evaluate and coordinate the wide ranging programmatic elements for services provided in concert with internal and external stake holders.
 - (b) Ability to serve as a facilitator and/or negotiator in coordinating program initiatives among local, regional or national coordinators and interdisciplinary teams to

- improve quality of care for patients.
- (c) Ability to set priorities, delegate tasks, meet multiple deadlines and balance responsibilities and work with great autonomy.
 - (d) Ability to articulate and communicate the assignment, project, problem to be solved, actionable events and objectives; as well as provide direction on work methods, practices and procedures.
 - (e) Knowledge of internal and external resources related to the program managed.
- (3) **Assignment.** OTs at this level serve as a VISN/national/regional program coordinator and manage all aspects of a program or service at the VISN, national and/or region level and are generally found at regional centers or assigned to the national program office and function with great autonomy. The program coordinator is knowledgeable about local, regional and national policies to ensure compliance. OTs in this assignment are responsible for strategic planning to ensure the provision of high quality services that meet the needs of the Veterans being served. OTs in this assignment are responsible for developing and implementing short and long term goals and objectives consistent with the program's strategic plan. They may supervise employees assigned to the program. The coordinator may be responsible for tracking and maintenance of program outcomes, providing information and pertinent data elements for continuous quality improvement and adherence to all applicable standards such as The Joint Commission, CARF or other pertinent stakeholders.

j. Occupational Therapist, GS-15

- (1) **Education, Experience, and Licensure.** Completion of one year of experience equivalent to at least the GS-14 grade level and directly related to the position being filled.
- (2) **Demonstrated KSAs.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
 - (a) Knowledge of operations and systems to resolve policy implementation issues with medical center directors/chiefs of staff, VISN management, and various professional service representatives.
 - (b) Ability to oversee program development of assigned specialized national clinical programs.
 - (c) Advanced knowledge of health care organizations and inter-relationships of subgroups within health care and rehabilitation organizations.
 - (d) Advanced skill in managing advocacy roles and planning activities within the Rehabilitation and Prosthetics Service and the greater rehabilitation community.

(e) Ability to generate protocols, to write and coordinate directives, handbooks, program guides and other administrative products relevant to rehabilitation.

(f) Skill in data analysis and review from a national perspective.

(g) Ability to develop new programs in support of the field and coordinate with intra/inter agency stakeholders.

(3) **Assignment.** The OT is a key program official in the VHA program office and is aligned with physical medicine and rehabilitation services. The incumbent is responsible for the management of national initiatives having a high degree of visibility and a significant impact on health care across VHA. Provides direct consultation via telecommunications and onsite visits for the purpose of data management, performance compliance and policy implementation, and problem resolution from a national perspective. Examples include national initiatives in the care and treatment of patients, educational programs, program evaluation, quality assurance, etc. These programs typically include collaboration with other Federal and state agencies, professional organizations, and services within VHA. This position affects changes at VHA-level and has higher reaching impact than the GS-14 level. OTs in this assignment will administratively coordinate national contracts that have a significant financial impact and understand the budget process to assure appropriate funding for program development. OTs in this assignment may provide data and documents to congress and other legislative entities.

6. DEVIATIONS.

- a. An approving official may, under unusual circumstances, approve reasonable deviations to the grade determination requirements for an employee whose composite record of accomplishments, performance, and qualifications, as well as current assignment warrants such action based on demonstrated competence to meet the requirements of the proposed grade.
- b. Under no circumstances will education be waived. Under no circumstances will certification/state licensure requirements be waived above the GS-9 level.
- c. The placement of individuals in grade levels or assignments not described in this standard must be approved by the Under Secretary for Health, or designee, in VHA Central Office prior to placement in the position.]

RESPONSIBLE OFFICE: Human Resources and Administration/Operations, Security and Preparedness (HRA/OSP) (006), Office of the Chief Human Capital Officer (OCHCO) (05), Recruitment and Placement Policy Service (059)