

STAFFING

1. REASON FOR ISSUE: To revise the Department of Veterans Affairs (VA) qualification standard for the appointment of Medical Technologist, GS-644, in VA.

2. SUMMARY OF CONTENTS/MAJOR CHANGES: This handbook contains mandatory procedures on staffing. The pages in this handbook replace the existing Medical Technologist Qualification Standard in VA Handbook 5005, Appendix II-G24, in its entirety. The new standards are effective on the date of issuance of this handbook. Any Medical Technologist on the rolls at the GS-5 grade should be promoted to GS-7 effective the pay period following approval of these qualification standards, provided they meet all administrative requirements. Supervisors should review the functional statements of all employees in comparison with the changes in the new qualification standard and make revisions as appropriate. Promotions and/or advancements of employees on the rolls on the date of this change may be recommended by the supervisor in accordance with VA Handbook 5005, Part III, Chapter 4. These changes will be incorporated into the electronic version of VA Handbook 5005, Staffing, that is maintained on the [Office of Human Resources Management Web site](#). Significant changes include:

a. Changes education requirement to a bachelor's degree and adds other education and/or experience combinations.

b. Clarifies that National Accrediting Agency for Clinical Laboratory Sciences (NAACLS) accreditation is required for clinical laboratory science training programs.

c. Accepts categorical or specialist certifications up to and including the full-performance level.

d. Eliminates the GS-5 grade level.

e. Revises experience requirement at the GS-11 level which allows employees to be promoted from the GS-9 grade level to the GS-11 grade level (without going through the GS-10 grade level).

f. Revises titles/assignments at the GS-10 – GS-13 levels.

3. RESPONSIBLE OFFICE: Recruitment and Placement Policy Service (059), Office of the Deputy Assistant Secretary for Human Resources Management.

4. RELATED DIRECTIVES: VA Directive 5005, Staffing.

5. RESCISSIONS: VA Handbook 5005/15, Part II, Appendix G24, dated March 17, 2006.

CERTIFIED BY:

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

/s/Stephen W. Warren
Executive in Charge and Chief Information Officer
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Assistant Secretary for
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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 G24
EFFECTIVE DATE: MAY 12, 2014

**MEDICAL TECHNOLOGIST
QUALIFICATION STANDARD
GS-644
Veterans Health Administration**

1. COVERAGE. The following are the requirements for appointment as a Medical Technologist (MT) in the Veterans Health Administration (VHA). These requirements apply to all VHA MTs in the General Schedule (GS)-644 series. In the health care community, MTs are generally referred to as “medical laboratory scientists (MLS) or clinical laboratory scientists (CLS),” and these terms are considered to be synonymous where stated in this qualification standard.

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. BASIC REQUIREMENTS

a. **Citizenship.** Citizen of the United States. (Non-citizens may be appointed when it is not possible to recruit qualified citizens in accordance with chapter 3, section A, paragraph 3g, this part.)

b. **Education and/or Experience Combination**

(1) A bachelor’s degree or higher from an accredited college or university in medical laboratory science, medical technology, clinical laboratory science or in a related science (e.g., laboratory sciences such as chemistry, biochemistry, biology, microbiology, immunology, etc.).

AND

completion of a medical technology clinical practice program. Clinical practice programs completed after 1974 must have been accredited by the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS), Commission on Accreditation of Allied Health Education Programs (CAAHEP, formerly CAHEA), or the Accrediting Bureau of Health Education Schools (ABHES). The professional curriculum may have consisted of a post-baccalaureate certificate program or be integrated into a four-year program of study that culminated in a baccalaureate degree.

OR,

(2) A bachelor's degree from an accredited college/university, including 16 semester hours of biological science (with one course in microbiology), 16 semester hours of chemistry (with one course in organic or biochemistry) and one course in mathematics,

AND

two years of post-certification clinical laboratory experience (e.g., blood banking, chemistry, hematology, microbiology, immunology, clinical microscopy, etc.) within the last ten years as a certified Medical Laboratory Technician by the American Society for Clinical Pathology Board of Certification (ASCP-BOC), American Society of Clinical Pathology Board of Registry (ASCP-BOR) or American Medical Technologists (AMT). This experience must include performing moderate and/or high complexity testing in blood banking, chemistry, hematology, microbiology immunology and clinical microscopy (or categorical experience which matches categorical certification) in a clinical laboratory.

OR,

(3) A bachelor's degree from an accredited college/university, including 16 semester hours of biological science (with one course in microbiology), 16 semester hours of chemistry (with one course in organic or biochemistry) and one course in mathematics,

AND

five years of clinical laboratory experience within the last ten years performing moderate and/or high complexity testing in blood banking, chemistry, hematology, microbiology, immunology and clinical microscopy (or categorical experience which matches categorical certification) in a clinical laboratory.

c. **Foreign Graduates.** Graduates of foreign baccalaureate degree programs meet the educational and/or experience requirements if the degree is found to be equivalent to degree programs recognized by the NAACLS or clinical laboratory experience as described in paragraph 2b(2) or (3) above. This finding may be based on either of the following:

(1) A letter from a college or university with a baccalaureate program recognized by the NAACLS stating that the individual's foreign degree has been evaluated and been found to

be equivalent to its bachelor of medical technology degree.

(2) A letter from ASCP-BOC or AMT stating that the individual is eligible for the certification examination.

d. **Certification.** Candidates must have either (1) or (2) below:

(1) Candidates must currently possess the appropriate certification as a MT, MLS, or CLS given by the ASCP-BOC, ASCP-BOR, or AMT.

(2) For positions up to the full performance level, candidates must currently possess the categorical or specialist technologist level certification from the certification agencies listed above, such as, but not limited to, chemistry (C/SC), hematology (H/SH), microbiology (M/SM), molecular biology (MB/SMB) and blood bank (BB/SBB). Technologists with categorical or specialist certifications may only perform duties within the area of the laboratory specific to their categorical certification (e. g., an individual with a chemistry (C) certification can only perform duties in chemistry).

(3) **Exception.** Non-certified applicants who otherwise meet the eligibility requirements for certification may be given a temporary appointment up to the full performance level not to exceed one year as a graduate medical technologist under the authority of 38 U.S.C. § 7405(c)(2)(B). This appointment may not be extended. For grade levels above the full performance level, the candidate must be certified in accordance with paragraph 2d(1) above.

(4) **Failure to Obtain Certification.** In all cases, MTs must actively pursue meeting prerequisites for certification from the date of their appointment. At the time of appointment, the supervisor will provide the MT with the written requirement to obtain certification, the date by which the certification must be acquired, and the consequences for not becoming certified by the deadline. Failure to become certified within one year from date of appointment will result in removal from the GS-0644 MT series. Failure to obtain certification during that period is justification for termination of the temporary appointment.

(5) **Loss of Credential.** Once certified, MTs must maintain their certification. Loss of certification will result in removal from the occupation and may result in termination of employment.

e. **Grandfathering Provision.** All MTs employed in VHA in this occupation on the effective date of this qualification standard are considered to have met all qualification requirements for the title, series and grade held, including positive education and certification that are part of the basic requirements of the occupation. For employees who do not meet all the basic requirements in this standard, but who met the qualifications applicable to the position at the time they were appointed to the position, the following provisions apply:

(1) MTs that do not meet the basic requirements for education and certification may be reassigned, promoted up to and including the full performance (journey) level, or changed to lower grade within the occupation, but may not be promoted beyond the journey level or placed in supervisory or managerial positions.

(2) MTs 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.

(3) MTs initially grandfathered into this occupation who subsequently obtain certification that meets all the basic requirements of this qualification standard must maintain the required credentials as a condition of employment in the occupation.

(4) If MTs who were retained in this occupation under this provision leave the occupation, the MT loses protected status and must meet the full VA qualification standard requirements in effect at the time of reentry to the occupation.

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

g. **English Language Proficiency.** MTs must be proficient in spoken and written English in accordance with chapter 2, section D, paragraph 5a, this part.

4. GRADE REQUIREMENTS

a. Creditable Experience

(1) **Knowledge of Current Professional Laboratory Practice.** For positions at or above the full performance level, the experience must have demonstrated the use of knowledge, skills and abilities as a MT and may be paid or non-paid employment.

(2) **Quality of Experience.** Experience is only creditable if it is equivalent to at least the next lower grade level and is directly related to the position being filled.

(3) **Part-time Experience.** Part-time experience as a MT is creditable according to its relationship to the full-time workweek. For example, a MT would receive 1 week of full-time credit for each 2 weeks of half-time work.

(4) **Graduate Education.** Graduate education and graduate degrees may be substituted as specified at each grade level. Education must have been from an accredited college or university in a field related to MT (e.g., biochemistry, chemistry, microbiology, immunology, hematology, immunohematology, biological science, physiology, allied health education, health systems administration, infection control and preventive medicine), which was accredited at the time the candidate completed the program.

b. **Grade Determinations.** The following criteria must be met when determining the grade of candidates.

(1) **GS-7** (Entry Level)

(a) **Experience.** None beyond the basic requirements.

(b) **Assignments.** Employees at this level serve in an entry level MT career development position practicing under close supervision of an MT at or above the full performance level.

(2) **GS-9** (Full Performance Level)

(a) **Experience.** Must have 1 year of creditable experience equivalent to the next lower grade level, which is directly related to the position to be filled.

OR,

(b) **Education.** Must have Master's degree or 2 academic years of progressively higher-level graduate education in medical technology or directly related field.

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

1. Comprehensive knowledge of professional MT principles, practices, concepts and theories providing for sound independent work.
2. Comprehensive knowledge of laboratory quality control and assurance procedures and principles of performance improvement in order to manage reagent and supply inventories and document control systems.
3. Knowledge of laboratory equipment and ability to maintain, troubleshoot and repair instrumentation.
4. Ability to plan, organize, set priorities, work as a team member and effectively complete assignments.
5. Ability to use independent technical judgment to analyze and interpret laboratory results.
6. Ability to read, interpret and apply complex written instructions.
7. Skilled in informatics, laboratory data flow and the understanding of laboratory processes.
8. Ability to communicate, consult and interact with other members of the healthcare team, external relations, customer service and patient education.

(d) **Assignment.** This is considered the full performance level for nonsupervisory positions. A MT at this level carries out the day-to-day operations in the laboratory. This would include routine testing, quality control, routine maintenance of instrumentation and troubleshooting. The MT develops, performs, evaluates, interprets, correlates and validates the accuracy of laboratory procedures and results ensuring all laboratory regulatory requirements are met. Testing procedures are performed on a variety of biological specimens and/or environmental samples using manual or automated techniques, following practices and regulations governing

biosafety and biosecurity in the workplace. These require a broad exercise of independent judgment and responsibility, including organizing and setting priorities with minimal technical supervision. The work performed is in a variety of laboratory disciplines, such as chemistry, microbiology, immunology, hematology, and immunohematology. Such positions include requirements to monitor quality control systems and measures; collaborate in the diagnosis and treatment of patients; and provide education for laboratory healthcare professionals and the public in a professional, courteous and effective manner.

(3) **GS-10**

(a) **Experience.** Must have 1 year of creditable experience equivalent to the next lower grade level, which is directly related to the position to be filled.

(b) **Demonstrated Knowledge, Skills and Abilities.** In addition to the experience above, the candidate must demonstrate the following KSAs:

1. Comprehensive knowledge of and skill in applying a wide range of concepts, principles and methodology of the field to perform advanced techniques.
2. Ability to modify or adapt established methods, procedures or techniques to resolve difficult or complex problems.
3. Knowledge of the application of laboratory regulatory requirements.
4. Ability to provide or coordinate staff development and training.

(c) **Assignments.** MTs at this level generally have a higher level of professional oversight responsibilities and may have responsibility for a specific large-scale automated analytical instrument system; a specific area of laboratory functions, such as employee competency records, supply functions, laboratory safety, quality control review, new method development or employee or student training; or provide professional and technical advice to other technicians and technologists on alternate tours of duty. For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty) and range of variety and be performed by the incumbent at least 25% of the time.

1. **Team Leader.** MTs at this level have professional oversight responsibilities of a laboratory team. The team leader facilitates team or unit processes by working in collaboration with team members to ensure that tasks, priorities and goals are coordinated with laboratory management. The incumbent also provides technical advice to staff and other health care members and oversees work assignments and work flow. The team leader is responsible for ensuring that staff follow all policies and procedures and is a subject matter authority when there are questions of a technical or professional nature. The incumbent may be responsible for reporting personnel absences and may be responsible for staff schedules and other assignments delegated by the departmental supervisors.

2. **Advanced Staff Technologist.** MTs at this level perform more complex laboratory

functions. Duties may include specific targeted laboratory responsibilities or projects such as laboratory safety officer, analyzer specialist, or quality control file maintenance. Duties may include, but are not limited to, any of the following: serves as primary operator on new test systems, assumes responsibility to maintain operations including preventive maintenance and training of technicians and technologists on the operation of the new test systems; assists in writing procedures and other documents as directed; oversight of the clinical training experiences of technical and professional level technologist or technician training programs in order to fulfill educational and professional requirements (where training programs exist); provides technical training and guidance to students, residents, staff and other employees; recommends updated guidelines and policies in compliance with regulatory requirements for non-routine or complex assignments; coordinates the laboratory competency program; and coordinates the Clinical Laboratory Improvement Act (CLIA) laboratory proficiency/survey program.

(4) **GS-11**

(a) **Experience.** Must have 1 year of creditable experience equivalent to the full performance level (GS-9), which is directly related to the position to be filled.

OR,

(b) **Education.** Must have 3 full years of progressively higher-level graduate education or a Ph.D. or equivalent doctoral degree in medical technology or a directly related field.

(c) **Assignments.** These assignments require specialized training and experience and have wide latitude for exercising independent judgment. Employees must have advanced knowledge of specialized and complex subject matter extending beyond the duties of test performance. For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty) and range of variety and be performed by the incumbent at least 25% of the time.

1. **Technical Specialist.** The incumbent serves as an expert providing authoritative advice and consultation for more markedly difficult, complex, unique and/or emerging tests requiring special knowledge. Examples include, but are not limited to, molecular/deoxyribonucleic acid (DNA)/genetic testing, bone marrow examination, and flow cytometry. Advises all organizational levels on various aspects of specialized testing, including appropriateness that takes into consideration clinical context. Advises on alternate testing to overcome ambiguities in the clinical diagnoses. Analyzes emerging trends and technology and adopts appropriate methods and testing. Applies policies, precedents, regulatory, licensing and accrediting requirements to establish, monitor and maintain the specialized testing. The technical specialist often works independently and is given freedom of action under the general guidance of a pathologist or other laboratory practitioner. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

a. Advanced knowledge and understanding of concepts, principles, methodology of medical laboratory technology, regulatory and accrediting agency requirements, medicolegal

requirements and pertinent statistics sufficient to perform complex diagnostic tests.

b. Skill to apply new scientific/technical developments and theories to laboratory testing.

c. Advanced knowledge of instructional techniques to instruct newly hired technologists and clinical pathology residents in proper performance of tests and applications of the laboratory procedures.

d. Ability to develop procedures for new tests and modify existing procedures and methods in order to resolve problems relative to complex and difficult situations.

e. Advanced knowledge of a particular discipline or function with wide latitude for exercising sound independent judgment.

2. Laboratory Education Coordinator. Incumbents provide authoritative representation and interaction with cooperating or affiliated universities or colleges, resource organizations and state and federal officials in order to coordinate program goals, objectives and policies. They spend a significant amount of time administering clinical training programs for medical technology students, facility staff and others assigned for medical technology training. They design, teach and evaluate the training programs. These assignments occur at active affiliated VHA facilities or for VHA NAACLS Clinical Laboratory Programs. Individuals establish, negotiate and maintain affiliation agreements and schedule students for appropriate rotation. They also may serve on curriculum or admission committees of the affiliated colleges. They may coordinate formal in-service and continuing education programs for the laboratory staff, students and residents. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

a. Knowledge of medical technology concepts, principles and practices sufficient to plan and direct an educational program for students and continuing education programs for the staff.

b. Skill in using educational design, development, evaluation techniques and teaching methods.

c. Knowledge of the education program's affiliation agreements and accreditation requirements.

d. Advanced knowledge of a particular discipline or function, such as blood banking or molecular diagnostics, to be recognized as a technical authority for instruction.

e. Knowledge of training methods and teaching skills in order to conduct continuing education sessions for staff development. The training sessions may be technical in nature or may focus on teaching techniques so that staff can improve their technical skills.

3. Quality Management Technologist. Provides authoritative consultative services to management at all levels of the organization as it applies to quality management in a clinical

laboratory setting. Maintains a laboratory quality management program and ensures monitoring of components and customer feedback. Identifies, defines and resolves issues associated with complex aspects of the collected data. Monitors laboratory quality control systems and performance indicators. Interacts with management officials and vendors providing inter-laboratory quality assurance and laboratory proficiency testing. Develops validation plans for equipment and methodology evaluations and evaluates statistical data collected. Responsible for laboratory continuous readiness for regulating agency inspections and accreditation from agencies such as the Joint Commission (JC) and the College of American Pathologists (CAP). In addition to the experience or education above, the candidate must demonstrate the following KSAs:

- a. Advanced knowledge of the concepts, principles and practices of medical technology sufficient to perform the full range of duties involved in planning, coordinating and evaluating laboratory services.
- b. Knowledge of quality management standards.
- c. Knowledge of accrediting agencies and regulatory requirements pertaining to laboratory operations.
- d. Comprehensive knowledge of statistical evaluation and analysis.
- e. Knowledge of laboratory operations and relationships to the organization.
- f. Comprehensive knowledge of laboratory quality control/assurance policies, procedures and principles, as well as safety practices and regulations.

4. Lead Medical Technologist. Facilitates team or unit processes by working in collaboration with team members to ensure that tasks, priorities, goals and achievements are coordinated with management. Responsible for all aspects of operation in their area of specialty including preparation and maintenance of records and reports, analysis of testing methodologies, training, instrumentation and compliance. Acts as a liaison to other departments of the medical center for the appropriate laboratory specialty. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

- a. Knowledge of medical technology applicable to a wide range of duties to solve complex problems involving diverse aspects of clinical laboratory practice.
- b. Knowledge of regulatory, licensing and accrediting agency requirements and statutes governing clinical laboratory operations in order to plan, implement or monitor laboratory programs and services.
- c. Ability to manage and coordinate daily work activities and assignments in a section.
- d. Skill to maintain, troubleshoot and repair laboratory instrumentation.

e. Ability to provide technical oversight in order to manage personnel and work assignments in a manner that assures completion of the laboratory workload.

5. Supervisory Technologist. The incumbent has full supervisory responsibility for smaller, less complex laboratories or laboratories having no GS-11 positions subordinate to the supervisor. Employees in this assignment perform the full range of supervisory duties for one or more sections of the laboratory, including responsibility for assignment of work performed; performance evaluations; recommendations for appointment, awards, advancement and disciplinary actions; identification of continuing education and training needs. The individual ensures compliance with accrediting agency and regulatory requirements; establishes and monitors the quality of the pre-analytical processes as part of the overall laboratory quality management program, and initiates corrective action. This individual will develop policies and procedures, manage document control, develop performance standards, position descriptions and functional statements. Responsible for professional and administrative management of an assigned area, to include budget execution, orientation and competency assessment of assigned staff. The supervisor will maintain effective interdepartmental relations with other services in order to accomplish medical center goals. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

a. Knowledge of Federal and state laws, regulations and accrediting/regulatory requirements in order to develop plans and procedures for the laboratory.

b. Knowledge of laboratory quality management procedures and principles sufficient to establish and monitor a laboratory quality management program and/or education and training of laboratory staff.

c. Demonstrated leadership and managerial skills including skill in interpersonal relations and conflict resolution in order to deal with employees, team leaders and managers.

d. Ability to perform the full range of supervisory duties which includes responsibility for assignment of work, performance evaluations, selection of staff, recommendation of awards, advancements and disciplinary actions.

e. Ability to plan, organize, set short and/or long term goals and conduct studies on technical and administrative problems, including personnel shortages, organizational structure, new technology, etc.

f. Knowledge of concepts, principles and methods of clinical laboratory technology and operations.

(5) GS-12

(a) Experience. Must have 1 year of creditable experience equivalent to the next lowergrade level, which is directly related to the position to be filled.

(b) **Assignments.** For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty) and range of variety and be

performed by the incumbent at least 25% of the time. Candidates at this grade level are in one of the following assignments:

1. **Supervisory Technologist.** The incumbent has full supervisory responsibility in a complexity index group 1 laboratory or in a complexity index group 2 laboratory that performs at least 1 million Standard Billable Tests annually (reported to the Laboratory Management Index Program). The incumbent supervises a large staff of nonsupervisory personnel including at least one GS-11 subordinate. Recommends appointment, plans and assigns work, provides advice and counsel and evaluates work of subordinates. The supervisor is responsible for monitoring test analyses and specimen examinations to ensure acceptable levels of performance and initiate corrective action. Verifies orientation, training and competency assessment of assigned staff. Develops and updates technical policies and procedure manuals. Ensures all staff and affiliate staff are in compliance with accrediting and regulating bodies. Adjusts staffing levels or work procedures to accommodate resource allocation decisions made at the executive level. This individual manages document control, develops performance standards, position descriptions and functional statements, and is responsible for professional and administrative management of an assigned area to include budget execution. The supervisor will maintain effective interdepartmental relations with other services to accomplish medical center goals. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

a. Knowledge of Federal and state laws and regulations, laboratory accrediting and regulatory requirements in order to develop new policies and guidelines, formulate plans and the ability to judge effectiveness of the operation.

b. Knowledge of laboratory quality management procedures and principles sufficient to establish and monitor a laboratory quality management program and/or education and training of laboratory staff.

c. Knowledge of, and ability to, provide the full range of supervisory duties which would include responsibility for assignment of work to be performed; performance evaluations; selection of staff; recommendation of awards, advancements, and disciplinary actions.

d. Ability to analyze organizational, technical and administrative problems to develop and implement solutions that result in efficient overall laboratory operation.

e. Skill in interpersonal relations and conflict resolution to deal with employees, team leaders and managers.

f. Ability to manage fiscal matters, forecast resource and equipment needs and administer the allocated budget.

g. Ability to set short and/or long term goals for the section and conduct studies on technical and administrative problems, including personnel shortages, organizational structure, new technology, etc.

2. **Ancillary Testing Coordinator (ATC).** The incumbent develops and recommends

policies and procedures for the procurement and service requirements for ancillary testing (testing outside the physical confines of the main laboratory as mandated by VHA) including ensuring CLIA licenses are maintained in off-site facilities such as Community Based Outpatient Clinics (CBOC). The ATC consults with program managers or equivalent of clinical services to identify ancillary testing needs and to analyze emerging trends and technology and adopts appropriate methods, serving as a recognized technical expert to provide authoritative advice, training, troubleshooting, quality assessment and ancillary testing program consultation. The ATC develops technical bulletins, procedures, training materials and other program materials, ensuring accreditation and compliance with all regulatory agencies for patient testing, result reporting and proficiency testing including reports, monitors and continuous performance improvement initiatives. Evaluates ancillary testing activities to assess ongoing day-to-day compliance with established protocols and guidelines identifying, defining and resolving issues associated with complex aspects of the data and problems associated with unique aspects of the ancillary testing management program. The ATC has knowledge of accrediting agencies and regulatory requirements, performs and evaluates instruments, performs validation studies, recommends policy/protocol changes to correct deficiencies and improve the program, develops and implements corrective action when deficiencies are identified and coordinates inventory management, supply acquisition and contracts. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

a. Knowledge of medical technology concepts, principles, practices and methodologies sufficient to perform the full range of maintenance of technical, quality assurance and safety accreditation/testing programs.

b. Skill in applying new scientific/technological developments and theories to laboratory testing and a grasp of complex laboratory testing issues.

c. Knowledge of mathematics and statistics as related to quality control, quality assurance, proficiency testing, inspection and accreditation, and continuous quality improvement.

d. Knowledge of the types of surveillance, ability to collect data necessary to monitor variables that affect quality of services, and skill in evaluating, interpreting and teaching others to use quality control procedures and implementing corrective actions.

e. Knowledge of Federal, VHA, and state laws, regulations, reference standards, medicolegal responsibilities, and certifying and accrediting agency requirements in order to carry out the work in each ancillary testing site.

f. Knowledge of laboratory information technology systems and inter-connectivity.

3. Laboratory Information Manager. The incumbent develops and recommends new policies and procedures regarding the installation and use of the laboratory information system (LIS) in conjunction with the overall hospital information system (HIS). Provides authoritative advice and consultation on the information system as they apply to the clinical laboratory. Advises all organizational levels on functions and capabilities of the LIS. Implements and maintains coding and mapping for laboratory test ordering, reporting, billing and workload

recording taking into account compliance principles. Analyzes emerging trends, software and technology and adopts appropriate methods for local programs to meet agency goals. Serves as the local expert for national software developers for the testing and validation of software packages. Responsible for compliance with regulatory agency requirements as related to information systems and performs audits as needed. Provides consultation and training of personnel on computer functions, including ordering options, and responsible for the maintenance of computer security keys. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

a. Knowledge of concepts, principles and methodology of clinical laboratory technology in relation to laboratory information systems.

b. Knowledge and understanding of laboratory operations and their relationship to the organization sufficient to provide advisory, inspection, training and problem-solving services on specific projects, programs or functions.

c. Ability to adapt, implement, and integrate the use of software to specific laboratory applications and processes, including the use of office automation software.

d. Knowledge of laboratory computer system analysis, program techniques, computer language, and program design sufficient to implement various laboratory associated packages and sustain operation of the laboratory system.

e. Ability to independently plan, organize, set priorities, work as a team member and effectively complete assignments.

f. Knowledge of compliance and regulatory requirements for laboratory functions.

4. **Laboratory Manager.** The incumbent works in a smaller, less complex laboratory and is responsible for managing and supervising all phases of laboratory service operations. Provides guidance and serves as an authority and subject matter expert on laboratory medicine, including research, agency policies, new techniques and procedures. Develops guidelines, assesses laboratory effectiveness, establishes and maintains quality assurance and performance improvement programs. Consults with local and network officials. Develops and manages program budget and resource utilization, inventory, acquisition and contracting processes. Assists and participates in educational programs affiliated with institutions providing training for individuals in laboratory or other related medical fields of study. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

a. Ability to balance the administrative and clinical functions in order to coordinate and manage programs and resources.

b. Knowledge and skill in management/administration, which includes strategic and tactical program planning, coordination, interpretation, supervision, consultation, negotiation, problem solving, formulation of policy and guidelines and monitoring of laboratory programs.

c. Ability to effectively communicate, both orally and in writing, on technical information with a wide variety of individuals including senior VHA managers in the medical center, Veterans Integrated Service Network (VISN) level staff and VHA Central Office staff.

d. Skill in applying analytical and evaluative methods and techniques to the measurement and improvement of program effectiveness and/or organizational productivity.

e. Skill to develop new or modified work methods, organizational structures, records and files, management processes, staffing patterns, etc.

f. Knowledge of regulatory, licensing, and accrediting agency requirements, and statutes governing clinical laboratory operations used in planning, implementing and monitoring laboratory programs and services.

g. Skill in administrative management (e.g., budgeting, contracting, procurement and property management) in accordance with VHA regulations.

5. Regional Technical Specialist. The incumbent serves as a recognized expert and provides authoritative consultative services to management at all levels of the organization advising on various aspects of the specialized testing, coordinating VISN or regional specialized services such as, but not limited to, quality management or information management. The Regional Technical Specialist develops new policies and procedures regarding LIS/HIS, conducts studies and recommends changes to correct deficiencies and improve the specialty area and creates and applies re-engineering and continuous performance improvement initiatives. The incumbent analyzes emerging trends, software and technology and adopts appropriate methods. Identifies, defines and resolves issues associated with complex aspects of data or unique/controversial aspects of the testing where no direct precedent exists. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

a. Advanced knowledge and understanding of regulatory and accrediting agency requirements, concepts, principles and practices of medical technology sufficient to perform the full range of duties involved in planning, coordinating and evaluating laboratory services.

b. Ability to apply laws, policies, precedents, regulatory, licensing and accrediting requirements in order to establish, monitor and maintain the specialized testing.

c. Advanced knowledge and understanding of medicolegal and compliance requirements sufficient to provide direction for complex diagnostic testing.

d. Knowledge of laboratory information systems and programming techniques in order to develop, adapt and maintain computer systems for accomplishing diagnostic laboratory work and quality assurance.

e. Knowledge of the types of surveillance needed to monitor variables that affect quality of services including quality control, quality management, proficiency testing, inspection and

accreditation and continuous quality improvement. Skill in evaluating, interpreting and teaching others to use quality control procedures and implement corrective actions.

f. Ability to develop new test procedures and modify existing procedures and methods in order to resolve problems relative to complex and difficult situations.

(6) **GS-13**

(a) **Experience.** Must have 1 year of creditable experience equivalent to the next lower grade level, which is directly related to the position to be filled.

(b) **Assignments.** For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty) and range of variety and be performed by the incumbent at least 25% of the time. Candidates at this grade level are in one of the following assignments.

1. **Regional Commissioner Technologist.** The incumbent serves as an authority to multiple laboratories in a region to ensure compliance with inspection and accreditation requirements and regulations. Provides direction and guidance to resolve technical problems and provides interpretation of existing regulations. Coordinates with VHA Central Office to assure that each testing site is in compliance with inspection and accreditation requirements and regulations, and assists laboratories in the correction of any cited inspection deficiencies. The Regional Commissioner Technologist is responsible for coordinating the CLIA license applications for all VHA laboratories in the region. Serves as a consultant to national program officials and provides professional, technical and training support. Requires verbal, written and electronic communication with accrediting and regulatory bodies. Works under the direction and guidance of the VHA Office of Enforcement in VHA Central Office. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

a. Advanced knowledge of laboratory regulations that pertain to quality control, quality management, and proficiency testing in order to assess and assist with laboratory compliance of quality programs in each facility assigned to that region.

b. Ability to differentiate and interpret accrediting and regulatory requirements in order to provide guidance to laboratories on regulatory requirements and assess compliance for each laboratory assigned to that region.

c. Knowledge of laboratory operations and the laboratory's role within the total organization.

d. Ability to create and deliver educational presentations to a variety of individuals on matters that pertain to inspection and accreditation rules, regulations and standards of all laboratory accrediting agencies.

2. **Laboratory Manager.** The incumbent shares with the chief of laboratory service/medical director full responsibility for managing and supervising all phases of laboratory service

operations in a complexity index group 1 laboratory or in a complexity index group 2 laboratory that performs at least 1 million Standard Billable Tests annually (reported to the Laboratory Management Index Program). The incumbent supervises a large staff of nonsupervisory and supervisory personnel including at least one GS-12 subordinate. Provides guidance and serves as an authority and subject matter expert on laboratory medicine, including research, agency policies, new techniques and procedures. Develops guidelines, assesses laboratory effectiveness, establishes and maintains quality assurance and quality management programs. Consults with or serves as a consultant for local, network and national programs and/or officials. Manages regulatory affairs and compliance. Develops and manages program budget and resource utilization, inventory, acquisition and contracting processes. Assists and participates in educational programs affiliated with institutions providing training for individuals in laboratory or other related medical fields of study. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

a. Advanced knowledge of concepts, principles and methodologies of a major clinical laboratory program and operations in order to assess program effectiveness and provide authoritative guidance for operations, personnel, and management.

b. Ability to work collaboratively with other disciplines, upper management, VISN level staff and/or VHA Central Office.

c. Ability to plan and execute short- and long-range programs and/or goals through project management and tactical/strategic planning.

d. Skill in administrative management (e.g., budgeting, contracting, procurement and property management) in accordance with VHA regulations.

e. Ability to provide advisory, planning and surveillance services to clinicians, laboratory directors and supervisors on specific functions, programs or problems that are particularly difficult, widespread or persistent.

f. Ability to solve complex problems involving unique or controversial aspects of medical technology or laboratory management, new or unconventional methods, program changes or conflicts between scientific/technological requirements, regulatory or program requirements (e.g., cost effectiveness).

g. Knowledge of, and ability to, provide the full range of supervisory duties which includes responsibility for assignment of work, performance evaluations, selection of staff, and recommendation of awards, advancements, and disciplinary actions.

3. **Regional Manager.** The incumbent serves as a manager or administrator for Pathology and Laboratory Medicine Service at the VISN or regional level. Acts as a liaison to other sites of the VISN and medical center for the appropriate laboratory areas. Coordinates VISN Pathology and Laboratory Medicine performance measures, data collection, performance improvement activities, initiatives and projects, as well as instrumentation acquisitions and other VISN contracts. Coordinates discussion between VISN laboratories to ensure compliance with rules and regulations of assorted regulatory agencies such as CAP, JC,

American Association of Blood Banks (AABB), and Occupational Safety and Health Administration (OSHA) when dealing with new and evolving technology and regulations. Researches methods, performs statistical analysis, monitors quality assurance, prepares and presents reports, and maintains administrative information. In addition to the experience or education above, the candidate must demonstrate the following KSAs:

- a. Advanced knowledge of concepts, principles and methodology of medical technology programs and operations sufficient to assess program effectiveness in order to provide authoritative guidance for operations, personnel, and management.
- b. Knowledge of accrediting and regulatory agency requirements regarding consolidated oversight of clinical laboratories, and ability to delineate and interpret accreditation standards.
- c. Knowledge of laboratory operations and relationships to the organization.
- d. Ability to work collaboratively with other disciplines, upper management, VISN level staff and/or VHA Central Office.
- e. Ability to plan and execute short and long range programs.
- f. Skill in administrative management (e.g., budgeting, contracting, procurement, and property management).
- g. Ability to provide advisory, planning, and surveillance services to clinicians, laboratory directors and supervisors on specific functions, programs or problems that are particularly difficult, widespread or persistent.
- h. Ability to solve complex problems involving unique or controversial aspects of medical technology or laboratory management, new or unconventional methods, program changes, or conflicts between scientific/technological requirements, regulatory or program requirements (e.g., cost effectiveness).

5. DEVIATIONS

- a. The appointing official may, under unusual circumstances, approve reasonable deviations to the grade determination requirements for medical technologists in VHA whose composite record of accomplishments, performance and qualifications, as well as current assignments, warrant such action based on demonstrated competence to meet the requirements of the proposed grade.
- b. Under no circumstances will the certification or educational requirements as a medical technologist be waived.
- c. The placement of individuals in grade levels not described in this standard must be approved by the Under Secretary for Health, or designee, in VHA Central Office.

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)