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## CHAPTER 2. RECRUITMENT AND APPOINTMENT

### SECTION A. RECRUITMENT

#### 2.01 SCOPE

This section establishes policies and procedures relating to recruitment of personnel (other than trainees and students) appointed on a full-time, part-time or intermittent basis under 38 U.S.C., chapter 73 or 74. "Employee" means all the preceding categories unless otherwise specified.

**Authority: 38 U.S.C. 7304.**

#### 2.02 REFERENCES

- a. 38 U.S.C., chapter 73 or 74.
- b. VHA (Veterans Health Administration) Manual M-3.
- c. MP-1, part II, chapter 2.
- d. MP-5, part I, chapters 300, 316 and 332.
- e. MP-7, part I, chapters 1 and 2.

#### 2.03 RESPONSIBILITY

- a. The Under Secretary for Health initiates actions to fill positions authorized under 38 U.S.C. 7306, health care facility Director and Chief of Staff positions, and other Headquarters and centralized field positions.
- b. Facility Directors, through the efforts of Human Resources Management Officers and other key professional staff members, are responsible for recruiting qualified employees to meet decentralized staffing needs.
- c. Human Resources Management Officers are responsible for developing and coordinating plans to meet current and long-range staffing needs and will assist and advise directors and professional staff members on recruitment matters, including the following:
  - (1) Identifying specific staffing needs; establishing formal and cost effective recruitment strategies; and requesting funding to accomplish recruiting goals.
  - (2) Assuring recruitment initiatives of top management and other key personnel are coordinated and consistent with the facility's recruitment strategies; recruitment strategies and action reflect the facility's responsibility for providing equal employment opportunity; and there are effective communications and other arrangements which result in appointment commitments and actions.

(3) Using appropriate recruitment sources and techniques, such as paid and unpaid advertisements, college placement officials, faculty and alumni associations and employee referral programs.

(4) Coordinating recruitment activities with other initiatives to meet the facility's long-range personnel needs (e.g., intra- and extramural training, upward mobility training, etc.).

**Authority: 38 U.S.C. 7304.**

## **2.04 THE RECRUITMENT PROCESS**

a. **Implementing a Recruitment Program.** Effective recruitment is achieved by identifying and publicizing employment needs and opportunities; developing and cultivating productive sources of candidates, selecting well-qualified candidates; and by expeditiously processing actions leading to appointment. It requires a continuous awareness of and contacts with recruitment sources, a proper blending of publicity, and established relationships with educational institutions and professional organizations. It is important to remember that a recruitment program can be successful only through continuous recruitment activities. Once vacancies are filled, recruitment efforts should not stop. Although hiring ceases, valuable recruitment contacts should be maintained by continuing to accept applications, referring applicants to other facilities when appropriate, and continuing to participate in recruitment events such as conventions, job fairs and career days.

b. **Coordination of Recruitment Initiatives.** Coordination of recruitment initiatives and networking with other VHA recruiters who have similar staffing needs should be considered. In pooling resources and talents, officials have the potential for unique and innovative approaches while presenting a united effort, as well as the potential for improved cost-effectiveness.

**Authority: 38 U.S.C. 7304.**

## **2.05 RECRUITMENT INITIATIVES**

Recruitment needs, resources, and circumstances will largely determine the extent to which various recruitment sources and strategies will be used. An important consideration in designing a recruitment approach is the VA-wide policy of mutual recruitment assistance between health care facilities. Consistent with this policy, local recruitment efforts are extended to also represent the interests of other VA medical facilities and Headquarters. Some of the available recruitment strategies and sources include:

### **a. Strategies**

(1) Intensive cultivation of newspaper, radio, and television outlets for news about VA job opportunities. This includes public service announcements, cable television advertising, and paid advertisement.

- (2) Use of mailing lists of professionals in the community, schools, vocational counseling offices, and particularly of professional associations. Such organizations may be willing to circulate information to their members about VA career opportunities.
- (3) Inviting students and others to indicate their vocational interests for possible future employment. When vacancies occur, facility officials will have a ready list of candidates to contact about VA employment.
- (4) Careful development of institutional relationships with teachers, editors, influential professionals, etc.
- (5) Preparation and strategic distribution of well-illustrated pamphlets on specific occupations of professions, medical center fact sheets, and local Chamber of Commerce brochures, etc.
- (6) Periodic visits and programs directed to college/university campuses to interest students in working for VA.
- (7) Maintaining impressive and informative exhibits of VA careers at conventions, State fairs, and similar events where large numbers of persons are attendance.
- (8) Sponsoring an "open house" or "job fair."
- (9) Personalized letters to applicants who are interested in employment instead of patterned or xeroxed letters.
- (10) Telephone contacts, particularly by officials from those facilities actively seeking candidates, demonstrate a genuine interest in the prospect and provide for an expeditious exchange of pertinent information.
- (11) Paying travel expenses for pre-employment interviews and for reporting to the first duty facility, if such actions may be authorized.

**b. Sources**

(1) **Schools.** Through its close ties with medical and other schools, VA is associated on a day-to-day basis with potentially productive recruitment sources. Professional contacts by operating and program officials with their academic counterparts are invaluable and should be cultivated and maintained. However, such contacts in themselves do not assure that these recruitment sources are being fully utilized. Positive and aggressive recruitment efforts should be undertaken at educational institutions to capitalize on recruitment opportunities.

(2) **Professional Associations.** Placement services are often provided by professional associations. Recruitment at professional conventions and meeting, many of which feature on-site placement operations, can provide a source of candidates. In addition to these formal approaches, informal contacts with professional associates at the national, regional, State, and local levels are often productive.

**(3) Organizations Representing Minorities or Applicants With Disabling Conditions**

(a) **Minority Applicants.** A program to recruit minority applicants should include ongoing relationships with historically black colleges and universities, the Hispanic Association of Colleges and Universities, alumni associations, and other organizations involved in the placement of minority applicants.

(b) **Applicants With Disabling Conditions.** Efforts to recruit applicants with disabling conditions should include contacts with local facility Equal Employment Opportunity manager or VISN office; rehabilitation agencies connected with State, county or private health-care facilities; local, State or national offices of professional, veterans or other associations furthering employment opportunities for the disabled; and colleges, universities and other schools with candidates for employment in occupations covered by this chapter.

(4) **Veterans Organizations and U.S. Military Services.** To reach the veteran population, information about vacancies may be communicated to U.S. Veterans Assistance Centers and veterans organizations. When feasible, recruitment contacts may also be made with military separation centers.

(5) **VA Placement Service.** The VA Health Care Staff Development and Retention Office, 1555 Poydras Street, Suite 1971, New Orleans, LA 70112 or telephone 1-800-949-0002, maintains placement and referral services for physicians, dentists, physician assistants, occupational therapists, physical therapists, and pharmacists. Those filing application forms with the VA Placement Service are referred, based on their geographic preference and specialty, to medical centers requesting lists of candidates. Applicants desiring referral, employment information or application forms may obtain further information by calling the VA Health care Staff Development and Retention Office toll free on 1-800-949-0002.

(6) **State Licensing Bodies.** State licensing organization will often furnish names and addresses of newly licensed individuals.

(7) **Office of Personnel Management.** Registers of eligibles maintained by the U.S. Office of Personnel Management constitute an often overlooked source of potential applicants. In addition, Federal Job Information Centers should be provided with information about Title 38 employment opportunities at the facility.

(8) **Intermediaries.** Information about specific vacancies can be communicated to organizations or individuals who may be in a position to refer names of prospects. These include: (a) professional employment offices of the State Employment Service, (b) officials of other Federal, State, municipal, or even private hospitals, and (c) officials of community and minority group organization.

c. **Headquarters Assistance.** The Customer Advisory and Consulting Group (051) and the Affirmative Employment Service (06A) are available to assist in the development of recruitment programs.

d. **Assistance from Headquarters Program Officials.** When health care facilities have been unsuccessful in recruiting for funded vacancies they may request assistance from the appropriate Service Director in Headquarters. Requests should contain all pertinent information on the assignment involved. For physicians, the request should identify the specialty, required qualifications, and intended assignment.

e. **Recruitment of Registered Nurses in Grades IV and V.** Information on the recruitment of nurses in these grades is provided in Appendix 2L.

**Authority: 38 U.S.C. 7304.**

## 2.06 STUDENT EMPLOYMENT

a. **General.** Directors of health care facilities may approve appointments of students under authority of 38 U.S.C. 7405(a)(1)(A) in accordance with provisions of paragraph 2.31.

### b. Selection

(1) Candidates normally will be selected from among students whose interests or career objectives are in health care areas.

(2) 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 selecting official will choose applicants for employment from the listing developed by the qualification screening panel.

(3) 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.

(4) The Human Resources Management 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 determination once they are made.

### c. Funds

(1) 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.

(2) This employment has no relation to authorized training programs or clinical clerkships under which paid or WOC (without compensation) students receive credits from affiliated universities. **Authority: 38 U.S.C. 7304.**

**2.07 - 2.15 (Reserved.)****SECTION B. GENERAL APPOINTMENT PROVISIONS****2.16 SCOPE**

a. **General.** This section 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 includes such employees as physicians, dentists, podiatrists, optometrists, nurses, nurse anesthetists, PAs (physician assistants), EFDAs (expanded-function dental auxiliaries,) RTs (certified respiratory therapy technicians or registered respiratory therapists), PTs (licensed physical therapists), LPNs (licensed practical or vocational nurses), OTs (occupational therapists), and pharmacists. This section also applies to medical personnel appointed under authority of 38 U.S.C., chapter 73 or 74.

b. **Headquarters Appointments.** Provisions of this section apply to Headquarters 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” refer in Headquarters to the Under Secretary for Health or designee.

c. **Residents.** Medical, dental, podiatry and optometry 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.

**Authority: 38 U.S.C. 7304****2.17 REFERENCES**

- a. Title 38, U.S.C., chapter 73 or 74.
- b. MP-5, part II, chapter 2.
- c. M-2.
- d. M-3.
- e. M-8

**2.18 AUTHORITY AND RESPONSIBILITY**

a. **Effecting Appointments.** Appointments will be effected only by appointing officers designated in MP-5, part I, chapter 250. These appointing officers will effect appointments after the approval of the qualifications and the selection for appointment has been made by the officials designated in this paragraph.

b. **Approval of Qualification and Selection for Appointment.** The approving authorities for appointment of certain research personnel, residents, and associated health trainees are contained in M-3 and M-8. In addition to approving authorities contained in appropriate paragraphs in this chapter, the technical responsibility for the approval of qualifications and/or selection of personnel 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 Facility Directors appointed under the authority of Section 7401(1).

(c) The approval of VISN Directors appointed under this authority Section 7306 or 5 USC 3393.

(2) The Under Secretary for Health or Designee in Headquarters. Except as limited by subparagraph (1), the Under Secretary for Health or designee is the approval authority for all assignments to centralized positions and for the following appointments.

Note: See Appendix A of VHA Supplement, MP-5, Part I, Chapter 250, for a listing of centralized positions.

(a) Headquarters. The approval of the qualifications and selection of all individuals who are appointed in Headquarters under 38 U.S.C., Chapter 73 or 74, respective of the type of appointment, title, or grade.

(b) Nurse Anesthetists (NAs). Approval of assignments to Nurse V NA Qualification Standard.

(c) OTs. The approval of the appointment of all OTs to assignments other than Section Chief at GS-13 and above .

(3) VISN Directors. The authority to appoint Chiefs of Staff. Facility Officials will continue to forward Chief of Staff nominations to the Management and Administrative Support Office (MASO/163B). The Chief of Staff program staff in MASO will provide a technical review of the nomination, arrange for appropriate approvals and/or reviews with VHA Headquarters officials as necessary, and forward the completed nomination to the VISN Director for approval.

(4) Facility Directors. Except as limited by subparagraphs (2) and (3), 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 Sections 7401(1) and 7405, including Associate Chiefs of Staff, Chiefs of Neurology Sections, and physicians in service chief or comparable positions. See Appendix E for procedures for appointing physicians to service chief and comparable positions.

(b) Dentists. The approval of the qualifications and selection of dentists appointed under the authority of Sections 7401(1) and 7405, including chiefs of dental service or comparable positions and staff dentists. See paragraph 2.22c for procedures for appointing dentists.

(c) Nurses. On recommendation and approval of qualifications by an appropriate Nurse Professional Standards Board, the approval of the grade and selection of nurses appointed under the authority of Sections 7401(1) and 7405, including Chiefs, Nursing Service; Associate Chiefs of Nursing Service for Nursing Home Care; Supervisors of Nursing Home Care Units, Associate Directors for Nursing or Associate Directors for Patient Care Services, and other key nursing personnel (i.e., RNs in Nurse IV or above who are not Chiefs of Nursing Service, Associate Directors for Patient Care Services). In addition, for appointments of personnel to Nursing Home Care Units, travel and relocation expenses will be centrally funded.

(d) Podiatrists. The approval of the qualifications and selection of all podiatrists appointed under authority of sections 7401(1) and 7405 (a)(1)(A). Refer to Appendix 2F for procedures for appointing podiatrists.

(e) Optometrists. The approval of the qualifications and selection of all optometrists appointed under authority of sections 7401(1) and 7405 (a)(1)(A). Refer to Appendix 2G for procedures for appointing optometrists.

(f) Nurse Anesthetists. The approval of the qualifications and selection of nurse anesthetists, including Chiefs of Nurse Anesthesia Sections. Refer to Appendix 2H for procedures for making appointments to Chief, Nurse Anesthesia Section positions.

(g) PAs. The approval of the qualifications and selection of all PAs, including those in Chief Grade. Refer to Appendix 2I for procedures for making appointments of PAs to Chief Grade.

(h) 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 in grades GS-13. Refer to Appendix 2J for procedures for appointing chiefs of pharmacy service, clinical pharmacy/pharmacy specialists, and program specialists at grades GS-13 and above. In addition, the Director may delegate authority 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.

(i) PTs and OTs. The approval of the qualifications and selection of PTs and OTs for section chief positions and positions at GS-12. The Director may delegate approval authority for appointments of PTs and OTs to the Chief of Staff. Refer to Appendix 2K for procedures for making appointments to section chief positions.

(j) Respiratory Therapists. The approval of the qualifications and selection of all RTs. The Director may delegate approval authority for appointments of RTs to the Chief of Staff.

(k) LPNs. The approval of the qualifications and selection of all LPNs. The Director may delegate approval authority for appointments of LPNs to the Chief of Staff or to the Chief, Nursing Service.

(l) EFDAs. The approval of the qualifications and selection of all EFDAs. Refer to paragraph 2.22c for procedures for appointing EFDAs.

(4) **Boards.** See paragraph 2.20 for provisions relating to the establishment, membership, and functions of Professional Standards Boards and Standards Boards.

c. **Human Resources Management Officer Responsibilities.** The Human Resources Management Officer will be responsible for:

- (1) Adherence to administrative and regulatory requirements;
- (2) Review of each case for completeness before forwarding to Headquarters;
- (3) Advising boards on administrative and regulatory requirements pertaining to appointments, advancements and probationary reviews;
- (4) Notifying prospective appointees of their selection

**Authority: 38 U.S.C. 7304.**

## 2.19 APPOINTMENT REQUIREMENTS AND DETERMINATIONS

### a. Preference to Veterans

(1) The primary consideration in making appointments 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 eligibles as defined in 5 U.S.C. 2108.

(2) When candidates for positions identified in 38 U.S.C. 7401(3), such as RTs, PTs, LPNs, OTs, or pharmacists, 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 among these candidates will be made in the following order:

- (a) Disabled veterans who have a service-connected disability of 10 percent or more.
- (b) Preference eligibles under 5 U.S.C. 2108(3)(C) through (G) other than those in subparagraph (a) (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 their life in wartime or other designated service period; mother of a service-connected permanently and totally disabled veteran.)

(c) Preference eligibles under 5 U.S.C. 2108(3)(A) and (B) (i.e., veteran who served on active duty in wartime or other designated service period.)

(d) All other candidates.

**b. Dual Employment and Dual Compensation Restrictions**

(1) The following personnel may hold more than one appointment provided it is not contrary to 5 U.S.C. 5533 and MP-5, Part I, Chapter 550, Section E: 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). Paid trainees in medical support programs funded through the Office of the Chief Academic Affiliations Officer 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., Chapters 73 or 74 are covered by the provisions of subparagraph b(2) through b(4).

(2) 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 2.19b(3) are met and such an appointment would not be contrary to Department conflict of interest regulations (38 CFR 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. (CFR Part 304.) Facilities wishing to use this authority should identify the particular 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.

(3) 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 medical 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.

(4) 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(3) 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. (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.

(5) Recommendations to approving officials should include sufficient information to indicate that dual employment is justified.

c. **Equal Opportunity for Employment.** See MP-5, Part II, Chapter 2, Section B.

d. **Member of Family Restrictions.** See MP-5, Part II, Chapter 2, Section B.

e. **Restrictions Regarding Political Activity.** See MP-5, Part II, Chapter 2, Section B.

f. **Qualification Standards and Requirements.** See MP-5, Part II, Chapter 2, Section B.

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 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 that qualified citizens are not available, necessary personnel may be appointed 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 United States Information Agency (USIA) for waiver of the 2-year home residence requirement under 22 CFR Part 514 must be approved by Office of Patient Care Services (11). No appointment may be effected or commitment made until the required approval is received from the Immigration and Naturalization Service. Requests to petition USIA will be submitted in accordance with instructions contained in Appendix 2B of this chapter.

(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:

1. All noncitizens as residents (see M-8, Pt. II);
2. Immigrants (aliens who have been admitted for permanent residence.) By September 20, 1994, all immigrants are required to have an Alien Registration Receipt Card, Form I-551.

**NOTE:** *The Form I-151 and all previous forms are no longer valid after September 19, 1994. Form I-551 has the lawful holder's photograph, fingerprint and signature on a white background; it is commonly known as the "green card;"*

3. All nonimmigrants (e.g., exchange visitors, alien students, visiting professors), provided employment is authorized by the Immigration and Naturalization Service. 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 Immigration and Naturalization Service 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 Official Personnel Folder.

(a) The Facility Director is the approval authority for the appointment of noncitizens to centralized positions, except for the appointment of noncitizen allied health trainees. 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 par. 2.31b.)

#### **h. 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, execute the affidavit on striking against the Federal Government and the affidavit on purchase and sale of office, all found on Standard Form (SF) 61, Appointment Affidavits, and also to complete the Optional Form 306, Declaration for Federal Employment. Noncitizens shall be required to execute only those SF 61 affidavits outlined in the Office of Personnel Management's Guide to Processing Personnel Actions, chapter 3, subchapter 4, paragraph 4-3 c 2. SF 61 shall be executed in accordance with the requirements set forth in MP-5, Part I, Chapter 300.

(2) The services of those employees to whom authority to administer oaths has been delegated by MP-5, Part I, Chapter 250, will be used for administering oaths necessary for effecting appointments in VHA.

i. **Exception from the Competitive Service and the Provisions of 5 U.S.C. Chapter 51.** The appointments of persons under the authority of sections 7306, 7401(1), and 7401(3), and under sections 7405 and 7406 to occupations identified in those sections, are excepted from the competitive service and from 5 U.S.C. Chapter 51.

j. **Security Requirements for Employment.** See VA Manual MP-1, Part I, Chapter 5, for VA instructions concerning security requirements.

k. **Effective Date of Appointment.** Appointments will be effective on the entrance-on-duty day, except as follows:

(1) Full-Time Physicians, Dentists, Podiatrists, Optometrists, 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) Nurses, Nurse Anesthetists, PAs, EFDAs, RTs, PTs, LPNs, OTs and Pharmacists. 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.

l. **Overseas Employment.** See MP-5, Part I, Chapter 301.

**Authority:** 38 U.S.C. 7304; 38 U.S.C. 7402, 7403(a), 7423, 7407(a) and (b)(1).

## 2.20 BOARDS

### a. Establishment

(1) Professional Standards Boards act for, are responsible to, and are agencies of the Under Secretary for Health in matters concerning appointments, advancements, and probationary reviews of physicians, dentists, podiatrists, optometrists, nurses, nurse anesthetists, PAs and EFDAs.

(2) Standards Boards act for, are responsible to, and are agencies of the Under Secretary for Health in matters concerning appointments and advancements of individuals appointed under 38 U.S.C. 7401(3), and under 38 U.S.C. 7405(a)(1)(B) to occupations identified in 38 U.S.C. 7401(3). This includes individuals such as RTs, PTs, LPNs, OTs and pharmacists.

(3) Members of boards serve in a dual capacity. They must deal with matters in which they must divest themselves of their identity with the particular facility at which they are employed

and must become representatives of and primarily concerned with the needs and problems of the entire VHA.

(a) **Locations.** Boards are established in VA Headquarters, medical centers, medical and Regional office centers, domiciliarys, and independent outpatient clinics. Additionally, boards are established as follows:

(1) **Boards for Nurses**

(a) **Actions on Positions Below Nurse IV.** A VISN Nurse Professional Standards Board will be established within each VISN, at the facility designated by the VISN Director, to consider appointments, advancements, and probationary reviews involving nurses in centralized positions below the grade of Nurse IV. In addition, the board will act on appointments, advancements, and probationary reviews for the Assistant Chief, Nursing Service (Day); Associate Chief, Nursing Service; Associate Chief, Nursing Service for Education; Associate Chief, Nursing Service for the Nursing Home Care Unit; and Associate Chief, Nursing Service for Research, below Nurse IV. An alternate board will be established within each VISN, at another facility designated by the VISN Director, to process appointments, advancements, and probationary reviews initiated by the facility where the primary board is located and to serve as a substitute board when the primary board cannot be properly constituted.

(b) **Actions on Positions at Grades Nurse IV and V.** For purposes of appointment, advancement, change in assignment and reassignment of registered nurses in Grades IV and V, all of the facilities in each VISN are assigned to a particular facility's NPSB as specified in Appendix 2L.

(2) **Regional Boards for RTs, PTs, LPNs, OTs and Pharmacists.** A Regional Standards Board for each occupation will be established within each region, at the facility designated by the Regional Director, to consider appointments and advancements of individuals in these occupations. (See MP-5, Part II, Chapter 5 Appendix C, for a list of Regional Boards.) The Regional Board will act on appointments and advancements when the facility board cannot be properly constituted, and will consider requests for reconsideration or review of promotions initially considered by a facility Standards Board. An alternate board will be established within each region, at another facility designated by the Regional Director, to process appointments and advancements initiated by the facility where the primary board is located and to serve as a substitute board when the primary board cannot be properly constituted.

**NOTE:** *A VA Headquarters Standards Board will consider requests for promotion reconsideration from registered nurses and VHA Headquarters employees.*

c. **Approving Authorities for Board Membership.** The following officials will approve board membership:

(1) **Headquarters Boards.** The Under Secretary for Health, or designee, will approve membership of Headquarters boards.

(2) **VISN Boards.** The facility Director at locations where VISN boards and their alternates are located will approve membership of boards. The Chief, Nursing Service, will recommend nurses and LPNs for board membership. For actions on nurses in grades IV and V the Chief, Nursing Service or nurse assigned as Associate Director for Nursing or Associate Director for Patient Care Services will designate nurses for board membership. The Chief, Pharmacy Service, will recommend pharmacists for board membership. The Chief of Staff will recommend RTs, PTs, and OTs for board membership.

(3) **Facility Boards.** The facility Director will approve membership of boards. The Chief of Staff will recommend physicians, nurse anesthetists, PAs, RTs, PTs, and OTs for board membership. The Chief, Nursing Service, will recommend nurses and LPNs for board membership. The Chief, Pharmacy Service, will recommend pharmacists for board membership.

(4) **Dentist and EFDA Boards.** The facility Director at designated locations for boards will approve board membership on recommendation of the Chief, Dental Service. (See VHA Supp., MP-5, Pt. II, Ch. 5, for locations of boards.) No board will act on the advancement, or conduct a probationary review, of a dentist or EFDA assigned at the same facility at which members of the board are assigned. Facilities unable to constitute Dental Professional Standards Boards shall make arrangements to have their boards conducted at other locations.

#### (5) **Designation of Alternate Board**

(a) Whenever necessary, the Under Secretary for Health, or designee, will designate a facility board to serve one or more facilities.

(b) When the facility board cannot be properly constituted, actions will be referred to the appropriate VIS/Regional Board or its alternate. If there is no VISN/Regional Board for the occupation, the appointing official will designate an alternate board at another facility to consider the action.

#### d. **Board Membership**

(1) Persons selected to serve on boards will be chosen from the most capable, experienced and responsible personnel. Unless otherwise indicated, no specific grade or specialty is required of members of boards considering candidates for appointment, advancement, or probationary review. For a nurse, nurse anesthetist, PA, EFDA, RT, PT, LPN, OT or pharmacist, board members will be in a grade equal to or higher than the grade for which the candidate is being considered. Where appropriate, nurse and nurse anesthetist board members must be at or above the level in the grade for which the employee is being considered.

(2) Insofar as possible, facility Directors who are physicians or dentists, Chiefs of Nursing Service, and Chiefs of Pharmacy Service will not serve as members of boards. These officials and the Chief of Staff will be responsible for the effective functioning of boards in professional matters.

(3) Boards will be composed of three employees appointed under 38 U.S.C. Chapter 73 or 74 or their alternates, except that other members may be appointed by the Under Secretary for

Health, or designee, in VA Headquarters. For nurses, the board may have either three or five members. One of the members will be appointed as chairperson of the board.

(4) The Human Resources Management Officer or designee will serve as technical advisor on all board actions. Attendance at Board meetings is not required.

**e. Composition of Boards**

(1) **Physicians.** The board will be composed solely of physicians. The Chief of Staff will serve as chairperson of the facility board for appointments and advancements of physicians, except that when the positions of Director and Chief of Staff are combined, a senior chief of service will serve as chairperson. Members of the facility board for appointments and advancements of physicians will be senior chiefs of services.

(2) **Dentists.** Dental Professional Standards Boards will include 2 dentists, and the Chief of Staff or designee will serve as the Chairperson. No board will act on the advancement, or conduct a probationary review, of a dentist assigned at the same facility at which any members of the board are assigned.

(3) **Podiatrists.** The board will be composed of one physician and two podiatrists. The chairperson will be a physician.

(4) **Optometrists.** The board will be composed of one physician and two optometrists. The chairperson will be a physician.

(5) **Nurses.** The board will be composed solely of nurses. Members of the VISN and Alternate VISN boards will be assigned to a centralized position or to the position of Assistant Chief, Nursing Service (Day); Associate Chief, Nursing Service; Associate Chief, Nursing Service for Education; or Associate Chief, Nursing Service for Research. For actions on nurses in grades IV and V, board members will be designated from Nurse IVs and Vs at facilities serviced by the NPSB (see procedures in Appendix 2L).

(6) **Nurse Anesthetists.** The board will be composed of three physicians, two physicians and one nurse anesthetist, or one physician and two nurse anesthetists. The chairperson will be a physician.

(7) **PAs.** The board will be composed of three physicians, two physicians and one PA, or one physician and two PAs. Physicians on boards dealing with PAs should generally be from services which utilize PAs. The chairperson will be a physician.

(8) **EFDA.** The board will be composed of three dentists, or two dentists and one EFDA. The Chief of Staff or designee, will serve as chairperson of the board for the advancement of EFDAs. (See MP-5, Pt. II, Ch. 5)

(9) **RTs.** The board will be composed of three physicians, or two physicians and one RT. The chairperson will be a physician.

(10) **PTs.** The board will be composed of one physician and two PTs, or two physicians and one PT. The chairperson will be a physician. The membership of VA Headquarters boards will typically be the same, but individuals with related expertise may be appointed when appropriate.

(11) **OTs.** The board will be composed of one physician and two OTs, or two physicians and one OT. The chairperson will be a physician. The membership of Headquarters boards will typically be the same, but individuals with related expertise may be appointed when appropriate.

(12) **Pharmacists.** The board will be composed of three pharmacists, one of whom will be designated chairperson. The membership of Headquarters boards will typically be the same, but individuals with related expertise may be appointed when appropriate.

f. **Board Functions.** The primary functions of boards are to:

(1) Review and act on employment applications and determine whether the applicant meets the requirements set forth in VA qualification standards. Sound professional and administrative judgment will be exercised in reviewing applications to ensure that VA obtains the best qualified personnel. Care will also be exercised to see that all applicants are treated courteously. All applicants, following board action, will be informed of the status of their applications. Those who are found ineligible for appointment in VHA will be informed of the reason.

(2) Review completely an individual's qualifications for advancement by an examination of the Official Personnel Folder, Proficiency Reports or performance appraisals, supervisory evaluations, and other pertinent records; and to make recommendations based on their findings.

(3) Conduct probationary reviews for individuals appointed under 38 U.S.C. 7401(1) as outlined in MP-5, part II, chapter 4.

(4) Execute VA Form 10-2543, Board Action.

(5) Make recommendations to the Under Secretary for Health or designee on appointments and advancements, and on probationary reviews of individuals appointed under 38 U.S.C. 7401(1), which require approval in Headquarters. This includes recommendations on requests for promotion reconsideration by registered nurses.

**g. Director Disagreement With Board Recommendation**

When the facility Director is the approving authority for an action involving a physician, dentist, podiatrist, optometrist, nurse, nurse anesthetist, PA, EFDA, RT, PT, LPN, OT, or pharmacist, the Director's decision is final. This does not preclude employees from requesting promotion reconsideration under the provisions of VA Manual MP-5, Part II, Chapter 5, para. 5i.

**Authority:** 38 U.S.C. 7304; 38 U.S.C. 7403(a) and (b).

**2.21 APPOINTMENTS UNDER 38 U.S.C. 7306.**

See MP-5, part II, chapter 2, section B.

**Authority:** 38 U.S.C. 7304; 38 U.S.C. 7306, 7403(a), 7404, 7421.

**2.22 APPOINTMENTS UNDER 38 U.S.C. 7401(1)****a. General**

(1) Only full-time appointments of physicians, dentists, podiatrists, optometrists, nurses, nurse anesthetists, PAs, and EFDAs are made under authority of section 7401(1). These appointments are subject to probationary period requirements specified in MP-5, part II, chapter 4. Credentialing requirements are contained in section C of this chapter.

(2) 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 career probational appointments under this authority, Professional Standards Boards and selecting 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 career appointment authority should essentially provide tenure for the applicant and ensure the continuation of quality service for VHA. (See pars. 2.24, 2.25 and 2.28 for procedures concerning full-time, part-time, intermittent or fee basis appointments under 38 U.S.C. 7405.)

**b. Appointment of Physicians, Podiatrists, Optometrists, Nurse Anesthetists, and PAs**

**NOTE:** *In addition to the qualification requirements contained in MP-5, Part II, Chapter 2, Appendix B, Physician Qualification Standard, the appointment of physicians must conform to the board certification criteria in Appendix 2M of this Supplement.*

(1) **Applications Received by Facilities.** Applications received by facilities will be referred promptly to Human Resources Management Service. The Human Resources Management Officer 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 candidates who meet VHA requirements for appointment will be referred to the appropriate Professional Standards Board for necessary action as follows:

**(a) Selection and Appointment Action**

1. The Professional Standards Board will evaluate professional qualifications and recommend a grade level based on VA qualification standard requirements. The board will also recommend

a rate of pay with due consideration being given to prior service and professional achievement. (See MP-5, pt. II, ch. 3 and its VHA Supp.) The board will complete the Board Action, VA Form 10-2543, and forward all documents through the approving authority to the Human Resources Management Officer, who will effect the appointment action. For actions which require the approval of the Under Secretary for Health or designee, the facility board will enter its recommendations on VA Form 10-2543, and forward all documents through channels for approval. On approval, the originals will be returned to the facility.

2. **For Physician service chiefs and comparable positions, see Appendix 2E.**
3. **For Podiatrists, see Appendix 2F.**
4. **For Optometrists, see Appendix 2G.**
5. **For Chiefs of Nurse Anesthesia Sections, see Appendix 2H.**
6. **For Physician Assistants (PA) at Chief Grade, see Appendix 2I.**
7. **For Chiefs of Pharmacy Service (all grades), Clinical Pharmacy/Pharmacy Specialists, and Program Specialists at Grades GS-13 and above, see Appendix 2J.**
8. **For Occupational and Physical Therapists as Section Chief, see Appendix 2K**
9. **For Registered Nurses in Grades IV and V, see Appendix 2L**

**NOTE:** See section C of this chapter for provisions relating to Deans Committee recommendations. See M-3 for selection of Medical Investigators and Clinical Investigators appointed under this authority.

(b) **Action When No Facility Vacancy.** When a facility receives an application from a physician, podiatrist, optometrist, nurse anesthetist, or PA and no appropriate vacancy exists at that facility, and the applicant wishes employment elsewhere, the HRM Officer will consult the VA Recruitment Bulletin and advise the applicant of the location of current vacancies. The application will be referred for employment consideration to the VA facility of the applicant's choice which has a suitable vacancy.

(c) **Action When No Appropriate Board at Facility.** If a facility board cannot be properly constituted, the appointing official will designate a board at another facility to consider the action. (See par. 2.20).

(2) **Applications Received by Headquarters.** 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 Headquarters assignment, an interview may be conducted in Headquarters or at a VA facility determined to be more convenient. The Headquarters Professional Standards Board will consider the applicant's professional qualifications, enter its recommendations on VA Form 10-2543, and forward all

forms to the appropriate approving authority. The Headquarters and Executive Resources Team (052) in Headquarters will take the necessary appointment action.

(3) **Applicants Not Recommended for Appointment** When an applicant is not recommended for appointment, the Professional Standards Board shall record its findings on VA Form 10-2543, and send this form to the approving official. After approval of the Board Action, the applicant will be notified by the chairperson of the Professional Standards Board in a letter over the signature of the 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 Human Resources Management Officer for adherence to technical requirements.

**c. Appointment of Dentists and EFDAs.**

(1) Dentist and EFDA applications received by facilities will be referred promptly to the HRM Service. The HRM Officer will review applications for compliance with administrative and regulatory requirements.

(2) Applications from dentists who meet administrative and regulatory requirements will be forwarded to the VA Placement Service located in New Orleans, Louisiana. Dentist applicants will be informed that they will be considered for appointment within their location of preference along with other qualified candidates.

(3) The VA Health Care Staff Development and Retention Office will maintain a centralized repository for all dentist applications and, for dentists who meet all basic requirements for appointment, obtain related reference materials including academic performance records, letters of reference, etc. The VA Health Care Staff Development and Retention Office will notify candidates that their applications will be retained in an active status for a period of one year. Candidates who are not selected during the initial one year period and who do not notify the VA Health Care Staff Development and Retention Office of their continued interest will have their applications disposed of in accordance with current VHA instructions.

**(4) 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. Announcements via TWX and /or FORUM 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 Director 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 5 working days to make comments or recommendations concerning the proposed selection.

(e) The recommendation is forwarded through channels to the facility Director for consideration (for new appointments the Director must consider the recommendation of a Dental Professional Standards Board). 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.

(5) 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. 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 Chief of Staff or designee is to discuss the proposed selection with the Office of Dentistry which has 5 working days to make comments or recommendations concerning the proposed selection.

(d) The 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. New appointments must also consider the recommendations of the Dental Professional Standards Board.

(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 Network Management Support (10NA) are notified.

(6) Appointment to EFDA Positions

(a) Candidates who apply for EFDA positions will be informed whether such a position has been established at the facility. Candidates will also be informed that their applications will be maintained in an active status for 6 months. Candidates not selected during the initial 6 month

period and who do not notify the HRM Office of their continued interest will have their applications disposed of in accordance with current VHA instructions.

(b) When an EFDA vacancy occurs, the facility initiates recruitment and contacts the Office of Dentistry which may recommend additional candidates for the position.

(c) The service chief screens, interviews and tentatively selects a candidates.

(d) A recommendation is forwarded through channels to the facility Director (for new appointments the facility Director must consider the recommendation of the Dentist Professional Standards Board).

(e) The facility Director approves or disapproves the appointment or assignment.

(f) The facility advises the Office of Dentistry of the selection.

(7) Facility officials are to maintain documentation regarding the process of recruiting dentists and EFDAs. This documentation is to include:

(a) A summary of any comments from Headquarters program officials regarding the recommended candidate; and

(b) 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 selected for the position.

(8) With regard to communication between facilities and Headquarters on dentist and EFDA appointments:

(a) Facility communications with VA Headquarters officials need not be in a formal written format.

(b) Submissions to the Headquarters Professional Standards Board shall include the application form, curriculum vitae and evidence of current licensure.

(9) Dentists and EFDAs who fail to meet administrative and regulatory requirements and thus fail to qualify for appointment in VHA will be notified by the HRM Officer or VA Health Care Staff Development and Retention Office, as appropriate. Applications will be disposed of in accordance with current VHA instructions.

#### **d. Appointment of Nurses**

(1) **Responsibilities of the Chief, Nursing Service.** The Chief, Nursing Service is responsible to facility management for:

(a) Recommending qualified applicants for employment and position assignment, after board action has been completed. This responsibility may be delegated.

(b) Effective functioning of the Nurse Professional Standards Board through recommending qualified members for assignment to the board; ensuring that board members are interpreting and implementing professional qualification standards accurately; and providing for staff development needs through planned rotation of board officers and members.

(c) Determining applicants who will be considered at local facilities. Such determinations will be based on local needs on the availability of applicants. For example, the Chief, Nursing Service, may elect to consider applicants for full-time positions who do not meet the requirements for appointment under 38 U.S.C. 7401(1) but do meet the requirements for appointment under 38 U.S.C. 7405. Consideration may also be given to appointing nurses on a part-time or intermittent basis.

(2) **Responsibilities of the Human Resources Management Officer.** The Human Resources Management (HRM) Officer is responsible for providing administrative and technical assistance to the Nurse Professional Standards Board and to Nursing Service. In providing such assistance, the HRM Officer will designate a personnel specialist to assist the Nurse Professional Standards Board. The HRM specialist will be assigned responsibility for:

(a) Receipting and maintaining all applications and related correspondence.

(b) Preparing and processing applications prior to action by the Nurse Professional Standards Board.

(c) Serving as technical advisor and administrative assistant to the board.

(d) Notifying applicants of disposition of application and maintenance of application files.

(e) Referring qualified applicants after completed board action to the selecting official.

(3) **Application Processing**

(a) **Receipt of Application.** On receipt, all applications and correspondence from applicants will be routed to HRM Service. Each application will be date stamped.

(b) **Initial Review.** The HRM specialist will review each application to determine if the applicant meets administrative and regulatory requirements for appointment.

(c) **Acknowledgment.** The HRM specialist will acknowledge applications and correspondence directly after the initial administrative review. Ordinarily, applications will be acknowledged within 3 days of receipt and will inform applicants of employment possibilities. Applicants who cannot be given early consideration will be encouraged to apply at other VA facilities. A copy of the most recent Recruitment Bulletin may be included with the letter to the applicant.

(d) **Failure To Qualify.** On initial review, some applicants will clearly fail to meet the requirements for appointment. In such cases, the application will be processed in accordance with subparagraph 1 or 2 and the letter of acknowledgment will inform the applicant accordingly.

1. Applicants who clearly fail to meet requirements for appointment which cannot be waived will not be considered further.

2. Applicants who either fail to meet a requirement which can be waived, or fail to meet requirements for appointment under 38 U.S.C. 7401(1) but who could qualify for appointment under section 7405(a), may be considered at facilities where there are not sufficient applicants fully qualified for appointment under section 7401(1). In such cases these applications will be processed the same as applications of fully qualified applicants. However, at those facilities where there are sufficient applicants who are fully qualified for appointment under section 7401(1), applicants will be told why they cannot be employed at the local facility and will be referred to facilities having vacancies if the applicant is willing to have the application referred.

3. The applications of nurses who will not be considered further will be placed in the inactive file.

(e) **Qualified Applicants.** Applications of nurses who are to be considered for appointment will be placed in the pending file until they are processed for board action.

(4) **Interview and Reference Checks.** See section C.

(5) **Processing for Board Action**

(a) Applications will be reviewed and referred to the Nurse Professional Standards Board by the Chief, Nursing Service or a designee. Care should be exercised to ensure that the best qualified applicants are referred to the board. Applications and related material will be referred to the board only when it is expected that the applicant will be considered for appointment in the near future.

(b) The HRM specialist will:

1. Periodically review applications and check with applicants to ensure that they are still available for appointment. VA Form Letter 5-20 will be used for this purpose.

2. Obtain references, secure transcripts and other pertinent material, and verify current registration. (See sec. C, this supp.)

3. Submit applications and related material to the Nurse Professional Standards Board for evaluation of qualifications and determination of appropriate grade and step rate. Action by the Nurse Professional Standards Board will be documented on a Board Action, VA Form 10-2543.

(c) Applications of nurses found to be qualified for appointment will be filed in the active file. Applications of those who fail to qualify will be filed in the inactive file. The personnel specialist will prepare letters informing applicants who fail to qualify of the reason.

(6) **Processing for Appointment** - for information on procedures for appointing nurses to Nurse IV and V positions, see Appendix 2L.

(a) On notification of a vacancy, the HRM specialist will refer applications of nurses who have been boarded to the Chief, Nursing Service, or designee, for selection.

(b) On selection, the HRM specialist will refer the Board Action, VA Form 10-2543, to the facility Director for approval.

(c) On approval of the appointment, the HRM specialist will prepare a letter of commitment to the applicant contingent on a satisfactory meeting of physical requirements in MP-5, part II, chapter 10.

#### (7) Nurse Application Files

##### (a) Pending File

1. Applications of candidates who meet administrative and regulatory requirements for appointment, but whose applications have not been acted on by the Nurse Professional Standards Board, will be filed alphabetically in Human Resources Management Service and will be maintained for 1 year. If no selection is made during that time, or if the applicant becomes unavailable for employment, the application will be placed in the inactive file.

2. VA Form Letter 5-20 may be used to determine whether candidates are still interested in VA employment. Application will be referred to other VA facilities if the applicant indicates availability elsewhere.

(b) **Active File.** Applications of candidates who have been considered by the Nurse Professional Standards Board will be filed alphabetically in HRM Service. A sufficient number of applicants should be boarded in advance to meet normal turnover needs. If a candidate becomes unavailable for employment, the application will be placed in the inactive file.

(c) **Inactive File.** Applications will be filed alphabetically in HRM Service and will be disposed of in accordance with current VHA instructions. The file will include applications of candidates who:

1. Either cannot or do not wish to be considered at another VA facility and who fail to meet the requirements for appointment under 38 U.S.C. 7401(1) when there are applicants available who qualify for such an appointment.

2. Are determined ineligible for appointment in VHA by the Nurse Professional Standards Board.

3. Become unavailable for appointment.

e. **Grade and/or Step Adjustments.** If, on review of board actions by the appropriate Professional Standards Board, it is determined that an employee has been appointed at a grade and step rate within the grade which is not commensurate with qualifications, the approving authority for initial appointment may approve an adjustment in the grade and/or step rate within

the grade. (See par. 2.26 for limitations on adjusting step rates within the grade for this purpose.) These adjustment 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 grade prior to grade adjustment will not be credited toward meeting required time-in-grade for promotion. 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.*

**Authority:** 38 U.S.C. 7304; 38 U.S.C. 7401(1).

## 2.23 APPOINTMENTS UNDER 38 U.S.C. 7401(3)

### a. General

(1) Only full-time appointment of RTs, PTs, LPNs, OTs and pharmacists are made under authority of section 7401(3). These appointments are subject to Title 5 probationary period requirements. Employment application, interview and credentialing requirements are contained in section C of this supplement.

(2) 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, Standards Boards and selecting officials are required to determine that the candidate's qualifications, physical and mental capacity, emotional stability, and any other pertinent qualifying factors, warrant this type of appointment. The use of this career appointment authority should essentially provide tenure for the applicant and ensure the continuation of quality service for VHA. (See pars. 2.24, 2.25 and 2.28 for procedures relating to temporary full-time, part-time, intermittent or fee basis appointments under 38 U.S.C. 7405).

### b. Appointment Processing Requirements

(1) **Applications Received by Facilities.** Applications received by facilities will be referred promptly to HRM Service. The HRM Officer 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 HRM Officer. Applications from candidates who meet VHA requirements for appointment will be referred to the appropriate Standards Board for necessary action as follow:

(a) **Selection and Appointment Action.** The Standards Board will evaluate qualifications and recommend a grade level based on VA qualification standard requirements. Determination of an appropriate step rate within the grade will be made in accordance with provisions of MP-5, part

II, chapter 3 and its VHA supplement. The board will complete the Board Action, VA Form 10-2543, and forward all documents through the HRM Officer to the approving official. The HRM Officer will effect the appointment action.

(b) **Action When No Facility Vacancy.** When a facility receives an application and no appropriate vacancy exists at that facility, and the applicant wishes employment elsewhere, the HRM Officer will consult the VA Recruitment Bulletin and advise the applicant of the location of current vacancies. The application will be referred for employment consideration to the VA facility of the applicant's choice which has a suitable vacancy.

(c) **Action When No Appropriate Board at Facility.** If a facility board cannot be properly constituted, the candidate's application and related documentation will be forwarded to the appropriate VISN/Regional Standards Board for consideration and recommendation. (See par. 2.20)

(2) **Applications Received by Headquarters.** 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 Headquarters assignment, an interview may be conducted in Headquarters or at a VA facility determined to be more convenient. The Headquarters Standards Board will consider the applicant's qualifications, enter its recommendations on VA Form 10-2543, and forward all forms to the appropriate approving authority. The Headquarters and Executive Resource Team (052), OHRM in VA Central Office will take the necessary appointment action.

(3) **Applicants Not Recommended for Appointment**

(a) When an applicant is not recommended for appointment, the Standards Board shall record its findings on VA Form 10-2543, and send this form to the approving official. After approval of the Board Action, the applicant will be notified by the chairperson of the Standards Board in a letter over the signature of the 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 HRM Officer for adherence to technical requirements.

b. **For procedures for appointing Chiefs of Pharmacy Service (all grades), Clinical Pharmacy Specialists, and Program Specialists at Grades GS-13 and above, see Appendix 2J.**

c. **For procedures for appointing Occupational and Physical Therapists as Section Chief, see Appendix 2K.**

d. **Grade and/or Step Adjustments.** If, on review of board actions by the appropriate Standards Board, it is determined that an employee has been appointed at a grade and/or step rate within the grade which is not commensurate with qualifications, the approving authority for initial appointment may approve an adjustment in the grade and step rate within the grade. (See MP-5, pt. II, ch. 3 and its VHA Supp. 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 action will be "38 U.S.C. 7403." The following statement will be placed in "Remarks" on SF 50-B for such actions: "Adjustment for consistency with standardized qualification requirements."

**NOTE:** *Service in a lower grade prior to grade adjustment will not be credited toward meeting required time-in-grade for promotion. 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.*

**Authority:** 38 U.S.C. 7304; 38 U.S.C. 7401(3).

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

**NOTE:** *In addition to the qualification requirements contained in MP-5, Part II, Chapter 2, Appendix B, Physician Qualification Standard, the appointment of physicians must conform to the board certification criteria in Appendix 2M of this Supplement.*

a. **General.** Temporary full-time appointments are made under authority of section 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 nurses, nurse anesthetists, PAs, EFDAs, RTs, PTs, LPNs, OTs or pharmacists pending processing of probational appointment when the applicants meet the basic requirements for appointment. Such appointments may be effected without board action. This includes appointments above the minimum step of the grade for nurses, nurse anesthetists, PAs and EFDAs provided the application and related documentation show evidence of superior qualifications as described in paragraph 2.26.

(3) To employ physicians pending processing of probational appointments when probational 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 probational appointment.

(5) To reemploy annuitants.

(6) To employ noncitizens when qualified citizens are not available.

(7) To employ nonlicensed physicians, dentists, podiatrists, and optometrists for utilization in research or academic positions or in positions where there is no direct responsibility for the care of patients. (See sec. C.)

(8) To employ nonlicensed physicians, dentists, podiatrists, optometrists, nurses and nurse anesthetists who are not registered in a State where the individual is to serve in a country other than the United States and the licensure or registration is in the country in which the individual is to serve. (See sec. C.)

(9) To employ physicians in the Research and Development Program as Research Associates who have been selected in accordance with procedures in M-3.

(10) To employ physicians in the Distinguished Physician Program who have been selected in accordance with procedures in M-2, part I.

**NOTE:** *This authority may not be used to appoint any candidate on a temporary basis pending headquarters approval if the candidate has ever held a flawed or impaired license or registration.*

**b. Duration of Appointments.** Temporary full time appointments may be made for any period up to 3 years depending on the needs of the service. Such appointments may be renewed, but the aggregate period of temporary service normally will not exceed 6 years. The facility Director may grant exceptions to permit renewals beyond 6 years when this type of appointment best meets the needs of the VA medical program.

**c. Consideration for Probational 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 at any time by a board for an appointment under 38 U.S.C. 7401(1) or 7401(3), as appropriate, on recommendation of the appropriate service chief. 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 nurse, nurse anesthetist, PA, RT, PT, LPN, OT and pharmacist applicants being considered for temporary full-time appointments pending processing of a probational appointment will be reviewed by the appropriate service chief. The service chief will make a recommendation for appointment to the facility Director. Action by a board is not required for renewal of a temporary appointment.

**e. Grade and/or Step Adjustments.** The approving authority for initial appointment may approve an adjustment in the grade and/or step rate within the grade of a full-time, part-time or intermittent employee appointed under 38 U.S.C. 7405(a)(1) if it is determined on review of a Board Action that the employee was appointed at a grade and/or step rate not commensurate with qualifications. (See pars. 2.22e and 2.23c.)

**Authority: 38 U.S.C. 7304; 38 U.S.C. 7405(a)(1).**

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

**NOTE:** *In addition to the qualification requirements contained in MP-5, Part II, Chapter 2, Appendix B, Physician Qualification Standard, the appointment of physicians must conform to the board certification criteria in Appendix 2M of this Supplement.*

a. **Use of Part-Time and Intermittent Personnel.** VHA's policy is to use the services of qualified individuals on a part-time or intermittent basis where necessary to alleviate recruitment difficulties or when practicality would not indicate employment on a full-time basis.

**b. Types and Duration of Appointments**

(1) A part-time appointment requires the employee to work a tour of duty scheduled in advance and limited to less than the specified hours or days of work for full-time employees. An intermittent appointment is appropriate when the need for the services is of such a nature that it is not possible or desirable to establish a regular and prearranged schedule.

(2) 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.

**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) in the same manner as regular full-time appointments. Appointees must meet the basic requirements for appointment in VHA.

(2) The proportionate part of the basic workweek required to perform required services will be determined before an appointment is effected. For the method of controlling per annum utilization beginning with the date of appointment, see MP-4, part II. The proportionate per annum utilization scheduled will be recorded on SF 50-B and will not be exceeded unless the facility Director authorizes the excess. The appointment will be effected in accordance with MP-6, part V, supplement No. 1.5. Part-time and intermittent appointments will be reviewed periodically to ascertain whether the utilization specified is realistic. Where the actual utilization is likely to exceed the original projection, the appointment action will be amended to show the new conditions of utilization.

(3) A part-time or intermittent employee may not be scheduled for employment which will exceed five-eighths of full-time employment during a service year. Exceptions to this limitation may be approved on an individual basis by the facility Director. These appointments or conversions approved as exceptions will not exceed seven-eighths of full-time employment during a service year. They will be effected only when such arrangements are in the best interest of VA and with the assurance that, on this basis, VA patient care needs will be adequately met. Under no circumstances can utilization be approved in excess of seven-eighths, including all types of utilization at all facilities. (See VHA Supp., MP-5, pt. II, ch. 3, sec. A.)

**Authority:** 38 U.S.C. 7304; 38 U.S.C. 7405(a)(1).

## 2.26 APPOINTMENT ABOVE THE MINIMUM FOR SUPERIOR QUALIFICATIONS

**NOTE:** *Individuals appointed under authority of 38 U.S.C 7401(3), or under authority of 38 U.S.C. 7405 to occupations identified in section 7401(3), may be appointed above the minimum step of the grade under provision of MP-5, part II, chapter 3, section F. This includes RTs, PTs, LPNs, OTs, and pharmacists. Paragraph 2.26 of this section does not apply to individuals in these occupations.*

a. **Policy.** Full-time, part-time, or intermittent physicians, dentists, podiatrists, optometrists, nurses, nurse anesthetists, 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 rate (See MP-5, pt. II, ch. 3, sec. A., and VA Circular 00-93-7, Locality Pay System.)

b. **Criteria.** 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. 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.

**NOTE:** *Prior to recommending approval or approving actions based on certification, Professional Standards Boards will verify the possession of such recognition by the individual.*

c. **Processing.** The approval of step rates above the minimum is subject to the following requirements:

(1) **Physicians.** The facility Director, on recommendation, justification, and documentation by the facility Professional Standards Board, may approve the appointment of physicians to any step above the minimum of Chief grade or below.

(2) **Nurses.** The facility Director, on recommendation, justification, and documentation by the appropriate Nurse Professional Standards Board, may approve the appointment of nurses at any step above the minimum of the grade.

(3) **Nurse Anesthetists.** The facility Director, on recommendation, justification, and documentation by the facility Professional Standards Board, may approve the appointment of nurse anesthetists to any step above the minimum of the grade. Nurse anesthetists appointed on and 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.

(4) **PAs.** The facility Director, on recommendation, justification, and documentation by the facility Professional Standards Board, may approve the appointment of PAs to any step above the minimum of Senior grade or below.

(5) **Other occupations.** For all other employees, approval of the facility Director on recommendation of the appropriate Professional Standards or Standards Board, is required.

**NOTE:** *Action by a Professional Standards Board is not required for the appointment of a nurse, nurse anesthetist, PA or EFDA above the minimum step of the grade under authority of 38 U.S.C. 7405(a)(1) pending processing for probational appointment as provided in paragraph 2.23.*

**NOTE:** *See chapter 3, section A, paragraph 7, for authority to provide special pay adjustments in unusual circumstances.*

**Authority: 38 U.S.C. 7304.**

## **2.27 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 expertness 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 Headquarters consultants.

(2) The facility Director is the approval authority for appointments and reappointments not requiring approval of the Under Secretary for Health or designee. This includes reappointments of consultants and attendings initially appointed on approval by 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.

1. 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.

2. When a consultant or attending is unavailable for a particular period, the individual will be in a nonpay 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.

3. 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 HRM 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 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 2.32. Approving officials are listed in subparagraph c.

**e. Employment Requirements and Determinations**

(1) **Qualification Requirements.** Consultants, attendings and nonmedical consultants must meet the basic requirement of section 7402 and/or other appropriate qualification standards, in addition to having outstanding professional ability in their respective fields. Action by a board is not necessary.

(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 HRM 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 paragraph 2.19. 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 C of this supplement for application, interview, and credentialing requirements relating to the appointment of consultants and attendings.

(2) **Processing**

(a) For Headquarters consultants, FL 10-332, Standardized Letter of Appointment - Consultants and Attendings 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

1. The HRM 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.

2. When processing security forms is required, the HRM Officer located nearest the residence of the consultant or attending, or as agreed on locally by the HRM Officers of the applicable facilities, will prepare the necessary security forms. The HRM Officer, after processing the forms, will notify the HRM Officers 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 MP-1, part 1, chapter 5.

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

1. **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 \_\_\_\_\_."

b. Indicate under item 23 the per annum salary.

c. In the "Remarks" space will be shown "Computation of annual salary of \$\_\_\_\_\_ is based on an estimated \_\_\_\_\_ visits at \$ \_\_\_\_\_ per visit during the fiscal year 19\_\_.  
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" space will show the revised basis of computation of the per annum salary.

2. **Lump-Sum Fee Basis.** FL 10-332, Standardized Letter of Appointment - Consultants and Attendings 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

1. **Per Annum.** Per annum consultants and attendings will be processed for reappointment as described in subparagraph (c) 1, except that the nature of action will be "Conversion to excepted appointment NTE 9/30 \_\_\_\_\_."

2. **Lump-Sum Fee Basis.** Fee-basis consultants and attendings will be reappointed using VA Form 10-2418b, Consultant/Attending Appointment Renewal Card, in accordance with current VHA instructions. The form will be signed by the Director, Chief of Staff, or HRM Officer.

#### (e) Disposition of Forms

1. VA Forms 10-2850, 10-2850a, 10-2850c, SF 171 and other forms for per annum consultants and attendings will be filed in SF 66, Official Personnel Folder. Applications and other form for fee-basis consultants and attendings will be placed in a file folder (not SF 66) with a green tab listing the individual's name, date of birth, and Social Security number.

2. Folders will be maintained alphabetically by appointment category and filed behind the official personnel folder of other employees.

**Authority: 38 U.S.C. 7304; 38 U.S.C. 7402, 7405.**

### **2.28 APPOINTMENT OF PROFESSIONAL AND TECHNICAL PERSONNEL ON A FEE BASIS UNDER 38 U.S.C. 7405(a)(2)**

a. **General.** On recommendation of the 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. (**NOTE: EFDAs may be utilized only at facilities where such a position has been established in accordance with current VHA instructions.**)

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, and Optometrists; VA Form 10-2850a, Application for Nurses and Nurse Anesthetist; VA Form 10-2850c, Application for Associated Health Occupations; or SF 171, Application for Federal Employment. 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 sec. C for credentialing requirements, including those related to emergency appointments.)

c. **Selection**

(1) The Chief of Staff will determine qualifications, select and recommend physicians, dentists, podiatrists, optometrists, nurses, nurse anesthetist and PAs. The Chief, Dental Service will do this for dentists and EFDAs.

(2) The HRM Officer will determine qualifications for other personnel, 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 Human Resources Management Officer (HRM) 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 Human Resources Management Service, Fiscal Service, and the utilizing service.

(3) **Special Duty Nurses.** These nurses will normally be appointed on an intermittent basis not to exceed 1 year under 38 U.S.C. 7405(a)(2) using a SF 50-B. They are subject to Social Security coverage and are processed for security purposes under Executive Order 10450, unless the period of employment is specifically limited to 6 months or less. However, special duty nurses may be appointed without a VA Form 5-4650 on a fee basis and without Social Security coverage when services are in the nature of a single transaction, or on a limited basis, and are not part of a continuing employer-employee relationship.

(4) **Disposition of Forms.** Records of special duty nurses appointed by SF 50-B will be placed in SF 66, Official Personnel Folder. Records of all other personnel will be placed in a file folder (not SF 66, Official Personnel Folder) with a buff colored tab listing the individual's name, date-of-birth and Social Security Number. These records will be maintained alphabetically by appointment category and filed behind the Official Personnel Folders of other employees.

(5) **Nonselection.** The facility Director or a designee will notify applicants of their nonselection and explain the reason.

- e. **Pay.** See MP-5, part II, chapter 3 and its VHA Supplement.

**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 and VHA Manual M-4, chapter 3.*

**Authority:** 38 U.S.C. 7304; 38 U.S.C. 7405.

## **2.29 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)(B), (e.g., student nurse technician, physical therapist, pharmacist) 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) 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.

#### **(3) 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.). Appointment may not be extended.

(b) A graduate nurse or LPN who fails to qualify for registration will be separated from the service on 2 weeks' notice regardless of the termination date of the temporary appointment. In no instance will an individual be retained pending the results of reexamination.

(c) A graduate [PA,] RT, PT, OT or pharmacist who fails to qualify for licensure, registration or certification 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] (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. (See MP-5, pt. II, ch. 2, sec. C.)

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. (See MP-5, pt. II, ch. 2, sec. C.)

c. **Approval Authority.** On recommendation of the appropriate service chief, the facility Director may approve technician appointments. The Director may delegate approval authority for RT, PT, LPN, OT and pharmacy technician appointments as indicated in paragraph 2.18.

d. **Processing**

(1) Student technicians will submit SF 171. 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 will forward SF 52, Request for Personnel Action, to the HRM Officer. Following approval by the Director, the HRM Officer will effect the appointment. Action by a board is not required.

e. **Pay.** See MP-5, part II, chapter 3 and its VHA supplement.

f. **Nonselection.** The appropriate service chief or a designee will notify applicants of their nonselection and explain the reason.

g. **Conversions** Processing technicians for conversion should be initiated prior to their eligibility dates whenever possible, including consideration by a board. 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. Action by a board is not required.

(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 time-in-grade or any other restrictions. A board action is required, unless a temporary appointment is made under paragraph 2.24 pending further processing.

(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). A Board Action is required, unless a temporary appointment is made under provisions of paragraph 2.24 pending further processing.

**Authority:** 38 U.S.C. 7304; 38 U.S.C. 7405

### 2.30 Appointment of Residents Under 38 U.S.C. 7406

a. **General.** Medical and dental residents are appointed under authority of 38 U.S.C. 7406 for graduate training leading to qualification in a specialty. (See M-8, pt. II, for policies relating to the establishment and maintenance of medical and dental residency programs in VA.) The term resident includes interns.

b. **Methods of Appointment and Compensation.** Medical and dental residents may be given full-time or intermittent appointments and paid directly by VA. (As indicated in M-8, part-time appointments may not be used.) Residents may also be utilized on a WOC (without compensation) basis. Alternatively, when authorized pursuant to the provisions of M-8, part II, chapter 5, they may be appointed and paid through a disbursement agreement with a medical school or other appropriate third party.

c. **Appointment Documentation.** For residents paid directly by VA, the nature of action on the SF-50-B is either "170 Excepted Appointment" or "170 Excepted Appointment-Intermittent," as appropriate, with the following statement in "Remarks:" "This appointment is for the duration of this training unless sooner terminated and is subject to periodic review by the Resident Review Board."

d. **Conditions of Direct Compensation.** The VA medical center may elect either pay mechanism stipulated in VHA Supplement, MP-5, part II, chapter 3. That is, under the first option, it may elect to pay residents only during VA rotations. When the resident leaves the VA medical center to receive training at a non-VA hospital while not receiving a VA stipend, the resident is placed in a nonpay status. This nonpay status is a condition of employment and is not LWOP (leave without pay) for which the individual makes application. It must be recorded, however, as LWOP for certain other purposes. These periods of LWOP are documented on the

SF 50-B. For the pay period beginning an assignment to another medical center, VA Form 4-5631, Time and Attendance Report, will reflect in the "Remarks" section: "Assigned to (name of medical center and date of assignment)." On return to the VA medical center, the time and attendance report for that period will reflect in the "Remarks" section: "Assigned to VA medical center (date)." The second option is to pay a resident under a without compensation exchange mechanism. Under this option, the resident continues to receive pay from VA while training rotations to non-VA facilities based on the presence of exchange residents who hold VA WOC appointments.

e. **Without Compensation.** Residents may be utilized on a WOC basis. They will be processed for appointment as indicated in subparagraph h and appointed in accordance with paragraph 2.32.

f. **Disbursement Agreements.** When VA medical centers are authorized to appoint and pay residents through disbursement agreements, PAID processing instructions are issued on an individual facility basis.

g. **Details.** Details are documented and controlled by the office responsible for supervising the resident's training. The documentation includes the resident's name, period and location of detail, and salary. (See ch. 3, concerning details for residents.)

#### h. **Processing**

(1) VA Form 10-2850b, Application for Residency, and, when requested by the facility Director, SF 88, Report of Medical Examination, will be submitted. (See ch. 10.)

(2) Ordinarily, applications will be submitted to the Resident Review Board and to the Deans Committee for review and recommendation as to appointment and grade. Recommendations will be documented on VA Form 10-2850b.

(3) On approval by the facility Director, the HRM Officer will effect the resident's appointment. On rejection by the Resident Review Board or the Deans Committee, the Chairman, Resident Review Board, will notify the applicant and explain the reasons. The SF 88 and VA Form 10-2850b will be returned to the applicant.

i. **Human Resources Management (HRM) Officer's Responsibilities.** As part of the HRM Officer's overall staff responsibilities to provide advice and assistance on personnel matters, the HRM Officer will:

(1) Advise and assist the Resident Review Board, Deans Committee and appropriate professional personnel in all aspects of the administrative processes.

(2) Review resident appointments in relation to scheduling at the end of each 6-month interval. (It is the continuing responsibility of the appropriate service chief to schedule residents in accordance with the resident's appointment and pay plan.)

**j. Chief Resident**

(1) **Purpose.** Facility Directors may approve, with the concurrence of the Resident Review Board and Deans Committee or Medical Advisory Committee, the designation of medical and dental Chief Residents where required for the successful linkage of quality medical care with effective residency training.

(2) **Responsibilities.** As the first level representative of the service chief, the Chief Resident will be assigned specific responsibility for administration, consultation and education in the total program area. Typical assignments would be: duty scheduling, liaison officer with other facility services including the referrals for consultations, serving as a junior consultant, conducting the morning report and chart review conferences with service chiefs, serving as a junior member of the facility, scheduling conferences and other educational activities, teaching students and house staff in formal and informal rounds, and consulting with house staff on the performance and progress of medical and dental residents assigned to the service.

(3) **Selection.** The Chief Resident will be in at least the second year of residency training, and will have demonstrated exceptional ability in the specialty as well as teaching and administrative talents. The resident should have tact, understanding, maturity, and the respect of contemporaries. On recommendation of the concerned service chiefs, the Chief of Staff will nominate candidates for Chief Resident. Nominations will be reviewed for concurrence by the Resident Review Board and Deans Committee or Medical Advisory Committee. Final approval of Chief Resident nominees rests with the facility Director.

(4) **Service as Chief Resident.** Following approval by the Director, the Chief Resident will be paid the approved Chief Resident stipend rate on the date such duties are assumed. The duration of service as Chief Resident will be for any period approved by the Director during the remaining portion of the resident's approved residency training, except that the period may not exceed 1 year beyond the time the resident completes board requirements. Except for receiving the Chief Resident stipend rate in lieu of the rate otherwise payable, the Chief Resident will continue to serve in the same manner as other residents, in the position of "Physician (Resident)" or "Dentist (Resident)" at the grade appropriate to the year of training in accordance with the provisions of this manual.

**NOTE:** See chapter 3 of this supplement for information on Chief Resident stipends and MP-6, part V, supplement No. 1.5, for information on PAID processing requirements.

**Authority:** 38 U.S.C. 7304; 38 U.S.C. 7405.

**2.31 APPOINTMENT OF MEDICAL SUPPORT PERSONNEL UNDER 38 U.S.C. 7405(a)(1)****a. General**

(1) Section 7405(a)(1) is primarily used to obtain the services of physicians, dentists, nurses and other individuals in occupations identified in 38 U.S.C. 7306, 7401(1) and 7401(3). However, it may be used under certain conditions to obtain the services of medical support

personnel. 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 3-years, or on a] part-time or intermittent basis for a period not to exceed 1-year. [Full-time appointments under this authority may be renewed for one or more additional periods not in excess of 3-years each. Part-time and intermittent appointments are non-renewable.] Appointments of associated health trainees and students may be made on a temporary full-time basis not to exceed one year, or on a part-time or intermittent basis for more than a year, consistent with individual training program requirements. (See par. b.)

(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 one year, or on a part-time or intermittent basis for a period of time consistent with individual training program requirements. (See M-8, pt. II)

(2) **Qualification Requirements.** Trainees must meet the citizenship requirements and shall be qualified as prescribed in VHA Supplement, MP-5, part I, chapter 338. Requests for approval to appoint paid noncitizen trainees will be forwarded to the Chief Network Officer (10N\_/051). WOC appointments of noncitizen trainees may be approved by the facility Director.

(3) **Selection and Appointment of Candidates.** M-8, part II sets forth the selection process and the approval authority for appointment of trainees.

(4) **Appointment Action.** The HRM Officer, with the approval of the facility Director, will effect the appointment on SF 50-B. The type of action will be "Excepted Appointment."

c. **Student Summer Employment.** Student summer employees are appointed under authority of 38 U.S.C. 7405(a)(1) on a temporary full-time or part-time basis not to exceed 90 days for temporary summer jobs that begin after May 12 and end before October 1 of the same year. (See par. 2.06)

#### **d. 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 MP-5, pt. II, ch. 3, sec. A.)

(2) **Approval Authority.** Facility Directors are authorized to approve appointments of medical support personnel, except for paid noncitizen associated health trainees. (See par. 2.19 for approval authorities for other noncitizen applicants.)

(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 SF 171 and SF 78 and will be processed for appointment in the same manner as other similar appointees.

**Authority: 38 U.S.C. 7304; 38 U.S.C. 7405.**

### **2.32 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 residents 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 sec. C, for credentialing requirements.)

#### **(2) Processing**

(a) VA Forms 10-2850, 10-2850a, 10-2850b, or 10-2850c, 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, Letter of 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 HRM Officer. The form letter will be prepared in duplicate, with the original given to the employee and the duplicate filed in HRM Service and later disposed of in accordance with existing VHA instructions.

**c. Student Trainees, 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 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 and dental laboratory technicians.

**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 current VA policy.*

(d) Scientific and technical personnel and laboratory assistants who are utilized in the 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 the provisions of VHA Manual M-3.

(e) The facility Director is the approving authority for WOC appointments of individuals identified above or of other individuals who seek WOC appointment at the facility.

(2) **Full- or Part-Time Utilization.** They may be utilized on a temporary full-time or part-time basis, depending on the particular 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 paragraph 2.19 and/or credentialing requirements of section C.

(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. Instructions for making such payments "in kind" are contained in VHA Manual M-1. If a payment "in kind" is authorized, a third copy of VA Form Letter 10-294 will be prepared and submitted to the interested service at the facility.

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 service. Approval authorities for the appointment of noncitizens are indicated in paragraph 2.19.

**Authority: 38 U.S.C. 7304; 38 U.S.C. 7405.**

## **2.33 REEMPLOYMENT**

### **a. Reemployment After Military Service or Compensable Injury**

#### **(1) The Right To Be Restored**

(a) VHA boards, approving officials, and HRM Officers will follow Office of Personnel Management regulations contained in 5 CFR (Code of Federal Regulations) Part 353, when effecting the reemployment of former employees on their discharge from the Armed Forces or on their return following separation as a result of sustaining a compensable injury.

(b) Employees occupying nontemporary positions are entitled to statutory restoration rights, at the VA facility from which they were separated or from which they resigned, to the last position they occupied prior to entrance into the military service or separation for compensable injury, or to a position of like seniority and status. Employees are entitled to restoration provided (1) they resigned or were separated from VA specifically for the purpose of entering the military service or were separated based on the compensable injury and (2) they are qualified to perform the duties of such position. Applicants for reemployment must meet the qualification standard requirements in effect at the time of their initial appointment to the occupation in VHA. This includes the maintenance of active, current, full and unrestricted licensure, registration and/or certification, as appropriate.

(2) **Determining Reemployment Rights.** On receipt of an application for reemployment after separation from military service, the HRM Officer will determine whether or not an applicant has reemployment rights and meets the conditions contained in 5 CFR 353.

(3) **Advancement Upon Return From Military Service.** An employee who would otherwise have been eligible for advancement if not absent on military duty will be considered for advancement upon return. The effective date of the advancement will be the date the employee would have become administratively eligible and qualified for advancement notwithstanding the absence because of military service. When it is impossible to complete any board action on advancement prior to the date of reemployment, the employee will be restored to the rolls as soon as possible and in any event within 30 calendar days at the old grade with appropriate periodic step increases. If the standards board subsequently finds that the employee met the requirements for advancement during the period of military service, the advancement will be made effective retroactively to the date on which the employee became administratively eligible and qualified. Persons found administratively eligible and qualified for advancement at the time of reemployment will have their reemployment and advancement actions reported simultaneously on one SF 50-B, Notification of Personnel Action. Effective dates of

advancements effected simultaneously with reemployment will be shown in the "Remarks" space on the SF 50-B.

(4) **Placement of Individuals Whose Positions Have Been Abolished.** In the event a facility receives notice of intent to return to VA after military service from a person who left a nontemporary position in a VA facility which has subsequently been abolished, the Director of the facility at which application is made will place the individual in another comparable position at that facility. The Director may also seek appropriate placement at another VA facility if the individual is willing to relocate. The Chief Network Officer, Office of the Under Secretary for Health (10N\_/051) will be advised promptly by the facility Director of any placement difficulties.

b. **Reemployment of Civil Service Annuitants.** The procedures to be followed in effecting reemployment actions of retired employees are contained in OPM's CSRS/FERS Handbook for Payroll Officers, Chapter 100. Annuitants will be reemployed on a full-time, part-time or intermittent basis under 38 U.S.C. 7405(a)(1). They may also be utilized under 38 U.S.C. 7405 on a WOC or fee basis appointment, including as a consultant or attending.

c. **Utilization on a Fee Basis**

(1) Individuals who render service to VA on a fee basis, such as employees paid according to a schedule of fees (par. 2.28), or consultants or attendings used by letter of appointment (par. 2.27), may not be converted to appointments under the provisions of sections 7306, 7401(1), 7401(3), and 7405(a)(1). Fee-basis employees will be terminated prior to appointment under these authorities.

(1) Full-time, part-time, or intermittent employees appointed under sections 7306, 7401(1), 7401(3), or 7405(a)(1), may not be converted to utilization on a fee basis. A full-time employee whose appointment on a fee basis has been approved must resign from the full-time position. A part-time or intermittent 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.

d. **Approval of Qualifications and Selections.** The same officials authorized to approve qualifications and selections for initial appointment will approve reemployment actions.

e. **Effecting Reemployment.** When a former employee applies for reemployment, a determination will be made whether the person has reemployment rights and is otherwise eligible for reemployment in VHA. The responsibility for determining whether former employees are administratively eligible for reemployment after active military service or are eligible for reemployment under the provisions of 5 U.S.C., chapter 83 rests with the HRM Officer. The responsibility for determining whether former employees meet qualification standard requirements and are otherwise eligible rests with VHA boards and approving officials. The procedure to be followed in processing reemployment actions shall be determined by the type of employment which is available, e.g., full-time, part-time, intermittent, fee basis, etc. When this has been administratively determined, the procedure contained in this chapter for the particular type of appointment will be followed.

**Authority: 38 U.S.C. 7304.**

### 2.34 CONVERSION

a. **Definition.** All personnel actions changing an employee from one type of appointment to another under authority of 38 U.S.C., chapter 73 or 74 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 attendings under authority of 38 U.S.C. 7405(a)(2). (See pars. 2.27 and 2.28.)

**NOTE:** *Conversion 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.*

#### b. Action by Board

(1) A board 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 7401(3), and on any conversion involving a change in grade and/or step rate within the grade. No action by a board will be required on conversion from an appointment under 38 U.S.C. 7405(a)(1) to an appointment under 38 U.S.C. 7401(1) or 7401(3) provided the employee has previously acquired permanent status under 38 U.S.C. 7401(1) or 7401(3), as appropriate, and has had continuous service under 38 U.S.C., chapter 73 or 74 since acquiring such status.

(2) The board will determine that the employee's past and expected future performance and physical, mental and emotional ability warrants the change in employment status. VA Form 10-2543, Board Action, will be used to document the board's recommendation to the approving authority.

c. **Approval Authority.** All conversion actions may be approved by the facility Director except those involving a change in grade or step rate for which the approving authority is vested in Headquarters or where Headquarters approval is specifically required. Noncitizens previously approved by Headquarters need not be resubmitted for approval solely due to citizenship provided the facility Director determines that administrative and regulatory requirements for the conversion are met.

#### d. Processing Requirements

(1) Personnel actions necessary to effect conversions to appointments 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 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.

(2) The nature of action will indicate conversion 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), 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.

(3) A new application is not required for conversions when one is already on file and VA Form 10-2850, 10-2850a. or 10-2850c is not specifically required.

e. **Conversion to Appointment Under Section 7401(1) From Appointment Under Section 7306.** Employees serving under section 7306 appointments will notify the Under Secretary for Health (10) if they desire full-time appointments under section 7401(1). (See MP-5, pt. II, ch. 2, sec. B.) A Headquarters Professional Standards Board will recommend to the Under Secretary for Health the grade and rate of pay and type of assignment which should be made on conversion. On approval of the board’s recommendation by the Under Secretary for Health, personnel action will be taken to effect the conversion.

f. **Conversion to Residency Appointments Under Section 7406.** An employee who requests conversion to a residency appointment will apply using VA Form 10-2850b, Application for Residency. The application will be processed in accordance with provisions of M-8, part II.

**Authority: 38 U.S.C. 7304.**

**2.35-2.40 (Reserved.)**

## SECTION C. CREDENTIALING AND LICENSURE

### 2.41 SCOPE

a. **General.** 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. This includes such employees as physicians, dentists, podiatrists, optometrists, nurses, nurse anesthetists, PAs (physician assistants), EFDAs (expanded-function dental auxiliaries), RTs (certified respiratory therapy technicians or registered respiratory therapists), PTs (licensed physical therapists), LPNs (licensed practical or vocational nurses), OTs (occupational therapists), and pharmacists. Provisions of this section apply to Headquarters 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.

**NOTE:** *The determination has been made that credentialing provisions of this section will apply to individuals who are utilized on an on-facility contract or on-facility sharing agreement basis.*

b. **Residents.** Medical, dental, podiatry and optometry residents and trainees appointed under 38 U.S.C. 7405 or 7406 are included within the scope of this section. As indicated in paragraph 2.64, 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 paragraph 2.45 through 2.56 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) The terms “medical center officials” and “facility Director or designee” refer in Headquarters to the Under Secretary for Health or designee.

(2) The term “credentialing” refers to 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) The term “licensure” refers to 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.

**Authority: 38 U.S.C. 7304**

## **2.42 REFERENCES**

- a. Title 38 U.S.C., chapter 73 or 74.
- b. MP-5, part II, chapter 2.
- c. M-2
- d. M-3
- e. M-8

## **2.43 GENERAL**

**a. Responsibilities of VA Officials**

(1) Facility Directors are responsible for implementing policy and procedures outlined in this chapter 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 or 74, Chiefs of Staff, selecting officials, boards and HRM officials 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 2D for a credentialing checklist. Officials described in this paragraph will ensure that all applicants and employees covered by this policy are made aware of their responsibilities with respect to credentialing and licensure.

(2) The credentialing and licensure verification process is a shared responsibility, requiring extensive interchange and continuing communication between the Chief of Staff and HRMO. 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.

(3) Compliance with credentialing and licensure provisions of this chapter does not obviate the responsibility to determine suitability for employment following guidelines in 5 CFR Part 731 or to initiate background investigations of employees using procedures specified in 5 CFR Part 736.

b. **Documentation.** Information obtained through the verification process must be documented in writing, either by letter or report of contact, or as appropriate on the employment application form.

c. **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. A nurse, nurse anesthetist, 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 receipt of transcripts, references, and/or related information, and action by a board. However, a physician, dentist, podiatrist or optometrist will be appointed only after credentialing information is received and action has been taken by a Professional Standards Board.

(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 or optometrist under 38 U.S.C. 7405 without prior action by a Professional Standards Board. The 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 State licensure has been obtained, a judgment has been made that the individual is fully qualified for the assignment.

d. **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 chapter, 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.

e. **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 and be recommended by

the appropriate board, if action by a board is normally required for the type of appointment being considered. Facility officials will verify any licensure or qualification information that has not previously been documented in the Official Personnel Folder or the Credentialing and Privileging Folder, as appropriate. The official designated by the facility Director will note on the application form, in the space reserved for verification of credentials, 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 par. 2.64 for resident credentialing procedures.)

**Authority: 38 U.S.C. 7304**

## 2.44 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, and Optometrists;
- (2) VA Form 10-2850a, Application for Nurses and Nurse Anesthetists;
- (3) VA Form 10-2850b, Application for Residency;
- (4) VA Form 10-2850c, Application for Associated Health Occupations;

(5) Standard Form 171 and 171A, Application for Federal Employment. This form is to be used by applicants for whom none of the above forms is appropriate; primarily, this includes applicants for medical support or nonmedical consultant appointments.

### b. Health Care Staff Development and Retention Office

(1) In addition to applying directly to VA medical centers, physicians, dentists, pharmacists, PTs and OTs may file applications with Health Care Staff Development and Retention Office (HCSD&RO). Names of applicants who file such an application may be referred by the VA Placement Service to facilities requesting lists of candidates to fill vacant positions. Facility officials are encouraged to inform those candidates for whom no local vacancies exist or who are interested in VA employment elsewhere that filing with the HCSD&RO may increase the potential for employment with VA. The address of the HCSD&RO is 1555 Poydras Street, Suite 1971, New Orleans, LA 70012, telephone 1-800 949-0002.

(2) Medical center officials may ask the HCSD&RO for names and applications of candidates, which are referred based on the individual's geographical preference and, where appropriate, specialty. Medical center officials are responsible for the credentialing of these candidates, including reference checks and verification of licensure.

### c. Application Review

(1) The HRM 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 HRMO will review applications for compliance with administrative and regulatory requirements. Applicants who do not meet appointment requirements should be so notified.

(2) For designated occupations, the appropriate officials at the HCSD&RO will review each employment application to assure all questions are answered and that additional information is provided where required. This does not abrogate the HRMO's responsibility for review of the applicant's application prior to appointment as indicated in subparagraph (1).

**Authority: 38 U.S.C. 7304**

## **2.45 EDUCATIONAL CREDENTIALS**

### **a. Verification of Educational Credentials**

(1) 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 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 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 ECFMG (Educational Commission for Foreign Medical Graduates) that the applicant has met requirements for certification, and must obtain a copy of the ECFMG certificate, if claimed by the applicant.

(3) 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) When practical, applicants should be asked to provide a transcript of their qualifying education for evaluation by the appropriate board 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. A registered nurse or LPN must provide an official transcript of their nursing education program prior to appointment. Transcripts may be requested from other applicants, including nurse anesthetists, 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. A master's degree or post-graduate certificate program providing entry-level qualifying education should not be credited at the graduate level. For example, individuals who have a baccalaureate degree in an unrelated field and earn a master's degree in nursing or a post-baccalaureate certificate in occupational therapy would qualify on the same basis as an individual with an undergraduate degree and no experience.

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.

**Authority: 38 U.S.C. 7304**

## 2.46 EMPLOYMENT HISTORIES AND PREEMPLOYMENT REFERENCES

a. **References.** As a minimum, a reference will be obtained from each applicant's current or most recent employer. Additional references should be obtained, if possible, particularly from employer(s) or other individuals who are knowledgeable about the applicant's work history during the preceding 5 years. For physicians and dentists, at least three references will be obtained and for other candidates, every effort will be made to obtain such additional references.

(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, references listed on the application form, and/or other agencies, institutions or persons who would have reason to know the individual's professional 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 par. (3)). 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 Official Personnel Folder and, as appropriate, in the Credentialing and Privileging Folder.

(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 Official Personnel Folder should be obtained before the individual is given a probationary or permanent appointment. If an applicant has prior VA service, an effort should be made to obtain a reference from officials at the facility where the applicant was previously employed.

**Authority: 38 U.S.C. 7304**

#### **2.47 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 MP-5, part I, chapter 571. The Chief Consultant in Headquarters may require that a personal interview be conducted for individuals in any occupation included within the scope of this section. All registered nurses and LPNs will be interviewed prior to appointment.

**Authority: 38 U.S.C. 7304**

#### **2.48 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 2.55 through 2.59.

**Authority: 38 U.S.C. 7304**

#### **2.49 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, the Chief of Staff will sight evidence of specialty certification claimed by a physician, dentist or podiatrist, and document that verification on the employment application, VA Form 10-2850. 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 sight the documentation and indicate this on the employment application form. For other applicants, the official designated by the facility Director will document verification of specialty certification where required on the appropriate application form. See paragraph d for procedures on documenting specialty documentation.

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 must 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, or 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 Official Personnel Folder and, as appropriate, in the Credentialing and Privileging Folder. (Also see ch. 3, for procedures relating to verifying board certification for special pay purposes.)

(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 this for verification as requested throughout VA employment.

**Authority: 38 U.S.C. 7304**

## **2.50 DRUG ENFORCEMENT ADMINISTRATION CERTIFICATION**

a. **Background.** Physicians, dentists, podiatrists and certain other professional persons may apply for and be granted renewable certification by the DEA (Drug Enforcement Administration) to prescribe controlled substances as a part of their practice. Certification by DEA is not required for VA employment, since employees may use the facility's institutional DEA certificate. 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 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 certificate, if applicable. Any applicant whose DEA 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 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 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 pars. 2.55 and 2.59)

d. **Verification.** Current DEA certification will be sighted prior to appointment, and a copy of the DEA certificate will be obtained. Current DEA certification will also be sighted during VA employment at the same time as State licensure. (See pars. 2.55 and 2.59). 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 certificate has the effect of restricting the individual's only State license, immediate action will be initiated to separate the employee under provision of chapter 9, this supplement.

(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 as follows. For permanent employees appointed under 38 U.S.C. 7401(1), the proposed revocation will be combined with action to discharge the employee under 38 U.S.C. 7461 through 7464 using procedures in MP-5, part II, chapter 8 and its VHA supplement. For probationary employees appointed under 38 U.S.C. 7401(1), the proposed revocation will be combined with probationary

separation procedures contained in MP-5, part II, chapters 4 and 9 and their VHA supplements. For employees appointed under 38 U.S.C. 7405 to occupations identified in 38 U.S.C. 7401(1), the proposed revocation will be combined with separation procedures contained in MP-5, Part II, Chapter 9 and its VHA Supplement.

(3) Individuals appointed under authority of 38 U.S.C. 7405 may be terminated in accordance with provisions of MP-5, part II, chapter 9 and its VHA supplement, without regard to the procedural requirements in subparagraph (2), when this is determined to be in the best interests of VA.

**Authority: 38 U.S.C. 7304**

## 2.51 CLINICAL PRIVILEGES

**NOTE:** *Additional VHA policy concerning clinical privileges is contained in VHA Handbook 1100.19*

- 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.

**Authority: 38 U.S.C. 7304**

## 2.52 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 the individual's explanation of specific circumstances in each case, and may require the applicant or 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.

**Authority: 38 U.S.C. 7304.**

### **2.53 DEANS COMMITTEE, MEDICAL ADVISORY COMMITTEES, AND OTHER ADVISORY BODIES**

At health care facilities having teaching programs, the Under Secretary for Health will approve the establishment of Deans Committee, Medical Advisory Committees, and other advisory bodies. (See M-8, pt. I, ch. 3) The Deans Committee may nominate, for consideration by the Director, physicians and dentists for appointment to the professional staff of the facility, including chiefs of service. This applies to individuals appointed on a paid or without compensation basis to full-time, part-time or intermittent assignments; to those appointed on an on-facility fee-basis; and to consultants and attendings. The Director should consider the recommendations of the Deans Committee, but the final decision on the appointment of a physician or dentist rests with the facility Director.

**Authority: 38 U.S.C. 7304**

### **2.54 SUITABILITY**

a. **General.** If adverse information is obtained during the credentialing process, facility officials will review this against suitability criteria and make a determination in accordance with 5 CFR Part 731 [FPM Chapter 731 sunsetted by OPM, replaced by CFR]. Questions concerning the use of adverse information in making suitability determinations should be directed to the Regional Counsel or to the Customer Advisory and Consulting Group (051), as appropriate. Questions concerning the legality of adverse determinations and personal liability involvement will also be referred to the Regional Counsel.

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 has been 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 or 74. If continued employment is not in the best interest of the service, the employee's appointment will be terminated under MP-5, part II, chapter 9 and its VHA supplement, or, for employees appointed under 38 U.S.C. 7401(3), under MP-5, part I, chapter 315 (for employees in their probationary period) or MP-5, part I, chapter 752 (for non-probationary employees). (See subpar. a for criteria to be used in making suitability determinations.)

**Authority: 38 U.S.C. 7304**

## **2.55 GENERAL LICENSURE AND REGISTRATION REQUIREMENTS**

a. **General.** Specific licensure, registration and certification requirements for individuals appointed under 38 U.S.C., chapter 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 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 by the State issuing the license (e.g., the State considers the license 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. **State.** The term "State" means any of the several States, Territories, and possessions of the United States, the District of Columbia, and the Commonwealth of Puerto Rico.

c. **Active Licensure.** An active, current, full and unrestricted license or registration in a State is one which 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 restricting status.

d. **Failure to Maintain Licensure.** See paragraph 2.59.

e. **Changes in Authority to Prescribe.** A State licensing board may restrict an individual's license for a variety of reasons. In addition to other reasons, for VA purposes, the license of an individual in an occupation authorized to prescribe is considered to be restricted or impaired if the State licensing board 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 DEA certification and/or with a separately issued State authorization to prescribe. (See par. 2.50.) 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.** An employee is responsible for complying with any changes in licensure and/or registration requirements which may be imposed by the State(s) of licensure. If an employee can show he or she was not notified of the new requirement and proceeded in good faith under the assumption that the license remained full and unrestricted, this will be accepted as prima facie evidence of licensure up until discovery of the change in requirements. When the employee is notified through any source of a change in requirements, the employee is to act immediately to make the license whole at the earliest possible date, normally no more than 15 workdays after notification. If the employee is unable to make the

license whole and, as a result, holds no full unrestricted license in a State, action to separate for failure to meet qualification requirements will be taken under chapter 9. Personnel appointed under 38 U.S.C. 7401(3) will be separated under appropriate procedures for Title 5 employees in MP-5, part I.

**g. Administrative Delay by State Licensing Board**

(1) Facility officials who learn that a State licensing board will be delayed in processing renewal applications past the licensure or registration expiration date should notify the Customer Advisory and Consulting Group (051) so that a general notice to all VHA facilities can be issued. If no such notice has been issued, facility officials should verify with the State board that VA employees are considered to be fully licensed or registered during the delay period. Verification of current licensure or registration may be obtained through telephone contact with the State board pending receipt of the renewal.

(2) If an employee is unable to present evidence of current licensure or registration prior to the expiration date, facility officials should verify through written or telephone contact with the State board that the employee's application for renewal has been received and that the employee is considered to be fully licensed or registered. If officials are unable to verify this with the State board prior to the expiration date of licensure, the employee may be permitted to continue in a work status only if the employee certifies that application was made on a timely basis prior to the expiration date of licensure. The certification must include a statement that the employee understands that separation action may be initiated under provisions of chapter 9 of this supplement, or the appropriate provisions of MP-5, part I, if evidence of renewal is not received within 30 workdays of the expiration date. Where possible, evidence of the employee's application for licensure or registration renewal should be sighted. If there is any question about whether to separate an employee based on failure to maintain current licensure or registration, facility officials will contact the Customer Advisory and Consulting Group (051) and/or the Chief Network Officer, Office of the Under Secretary for Health (10N\_). (See par. 2.59 for provisions relating to separation for failure to maintain current licensure or registration, or for failure to present evidence of this.)

**h. Questionable Licensure Status.** Circumstances may cause the status of an employee's license or registration to be questioned. If facility officials are uncertain whether an employee's license or registration meets statutory or regulatory requirements, a decision by the Regional Counsel will be requested. (Also see MP-5, pt. II, ch. 9 and its VHA Supp.).

**i. Payment of Licensure or Registration Renewal Fees.** VA employees are responsible for the payment of any required fees on a timely basis to assure that their license or registration is maintained on a current, active basis. If an affiliated institution normally pays such fees for VA employees who work part-time or have teaching agreements at that institution, this does not relieve the employee of the responsibility for assuring that licensure or registration is maintained in an active, current status.

**Authority: 38 U.S.C. 7304**

**2.56 LICENSURE FOR PHYSICIANS, DENTISTS, PODIATRISTS AND OPTOMETRISTS**

a. **General.** Any physician, dentist, podiatrist or optometrist appointed under 38 U.S.C., chapter 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., chapter 73 or 74.

b. **Exceptions.** The only exceptions to the licensure requirements are as follows:

(1) An individual who has met all the professional requirements for admission to the State licensure examination and has passed the examination, but who has been issued a State license which is limited on the basis of noncitizenship or not meeting the residence requirements of the State.

(2) An individual who has been granted an institutional license by the State which permits faculty appointment and full, unrestricted clinical practice at a specified educational institution and its affiliates, including the VA health care facility; or, an institutional license which permits full, unrestricted clinical practice at the VA health care facility. This exception will be used only to appoint an individual who is a well-qualified, recognized expert in the individual's field, such as a visiting scholar, clinician, and/or research scientist, and only under authority of 38 U.S.C. 7405. It may not be used to appoint an individual whose institutional license is based on action taken by a State licensing board as described in subparagraph d.

(3) An individual who has met all the professional requirements for admission to the State licensure examination and has passed the examination, but who has been issued a time-limited or temporary State license or permit pending a meeting of the State licensure board to give final approval to the candidate's request for licensure. The license 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) A resident who holds a license which geographically limits the area in which practice is permitted or which limits a resident to practice only in specific health care facilities, but which authorizes the individual to independently exercise all the professional and therapeutic prerogatives of the occupation. In some States, such a license may be issued to residents in order to permit them to engage in outside professional employment during the period of residency training. The 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 Chief of Staff will ensure that the licensure and registration of physicians, dentists, podiatrists and optometrists is verified prior to their appointment under 38

U.S.C. 7306, 7401, or 7405. (See part. (1) through (3)). 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 Chief of Staff will document, on the VA Form 10-2850, Application for Physicians, Dentists, Podiatrists and Optometrists, that the status of all licenses has been verified with the appropriate State licensing board 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. Although Professional Standards Boards for initial appointments of dentists, podiatrists and optometrists are normally held in Headquarters or at a designated field facility, the Chief of Staff or designee is responsible for sighting verification of the licensure of these individuals.

(2) **Review of Employment Application.** For candidates with recent employment in a State in which no licensure is indicated on the application form, the State board should be contracted to assure that no restriction or revocation action has occurred.

(3) **Physician Screening with FSMB (Federation of State Medical Boards)**

(a) A query is no longer a mandatory requirement of the credentialing process.

(b) There may be times that a facility may want to query FSMB as a supplement to other information obtained in the credentialing and privileging process. Facilities wishing to query the FSMB are to obtain the appropriate software directly from the FSMB. Queries are to be submitted directly from the querying entity to the FSMB and paid for by the querying entity.

c. **Licensure History.** An individual who has current, unrestricted license in one State, but who has, or has ever had, any license to practice revoked, suspended, denied, restricted, limited, issued/placed on a probational basis, or who has entered into any other type of voluntary or involuntary agreement with a State licensing board regarding the individual's practice, will not be hired without prior approval of the appointing official. No prior approval is required for an individual who has allowed license(s) to lapse because the individual has not paid a registration fee, no longer practices in a State, or does not meet a residency requirement.

d. **Waiver of Licensure Requirement**

(1) The Appointing Official may waive the licensure requirement if a physician, dentist, podiatrist or optometrist is to be used in a research, academic, or administrative position where there is no direct responsibility for patient care.

(2) The facility Director may waive the licensure requirement if the individual is to serve in a country other than the United States and the licensure is in that country (i.e., Philippines).

**Authority: 38 U.S.C. 7304**

**2.57 REGISTRATION FOR NURSES AND NURSE ANESTHETISTS**

a. **General.** Any nurse or nurse anesthetist appointed under 38 U.S.C., chapter 73 or 74 is required to possess active, current, full and unrestricted registration as a graduate professional nurse in State, and must furnish evidence of this prior to appointment. Current registration will be maintained and evidence of this must be presented by the employee for verification periodically as requested throughout VA employment. A limited registration or any other registration less than a full, unrestricted State registration will not meet the registration requirement for appointment.

b. **Verification.** The HRMO or Chief, Nursing Service, (or equivalent position) or designee, as appropriate, must verify the registration of all nurses and nurse anesthetists prior to their appointment under 38 U.S.C., chapter 73 or 74. (See subpars. (1) through (3)). This includes full-time, part-time, intermittent and on-facility fee basis nurses and nurse anesthetists (including consultants), whether they are paid or serving without compensation. Nurses utilized on an on-facility contract or on-facility sharing agreement basis are also covered by provisions of this paragraph (See par. 2.41a.).

(1) Except as provided above, every VHA nurse and nurse anesthetist must have at least one active, current, full and unrestricted registration as a graduate professional nurse in a State.

(2) The appropriate official will document on VA Form 10-2850a, "Application for Nurses and Nurse Anesthetists," 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 nurses and nurse anesthetists 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 registered nurse or nurse anesthetist who has previously had impaired registration, provided candidate currently has full/unrestricted registration.

d. **Waiver of Registration Requirement.** The facility Director may waive the registration requirement of a nurse or nurse anesthetist if the individual is to serve in a country other than the United States and the registration is in that country (i.e., Philippines).

**Authority: 38 U.S.C. 7304.**

**2.58 LICENSURE, REGISTRATION AND/OR CERTIFICATION FOR TITLE 38---  
ASSOCIATED HEALTH PERSONNEL**

a. **General.** Any PA or EFDA appointed under 38 U.S.C. 7401(1) or 7405(a)(1)(A) must meet licensure 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) or 7306 to

occupations listed in 7401 must meet licensure, registration and/or certification requirements in the appropriate qualification standard for the occupation. Current licensure, registration and/or certification will be maintained and evidence of this must be presented by the employee for verification periodically as requested throughout VA employment. 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:

(1) The facility Director will designate the official(s) who will be responsible for documenting on VA Form 10-2850c, "Application for Associated Health Personnel," that the status of all license(s) or registration(s) has been verified with the appropriate State board(s) for all State(s) in which the applicant lists having ever had licensure or registration. This includes licenses or registration(s) which the applicant lists as active, current, full and unrestricted as well as license(s) or 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.

(2) RTs, OTs, and dental assistant EFDAs must present evidence of registration or certification by the appropriate national certifying body prior to appointment for verification by the official(s) designated by the facility Director. This will be documented on VA Form 10-2850c.

(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. This will be documented on VA Form 10-2850c, "Application for Associated Health Personnel." 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 will verify licensure status with the State licensing board(s) as a part of the credentials review.

(4) For candidates with recent employment in a State in which no licensure or registration is indicated on the application form, the State board should be contacted to assure that no restriction or revocation has occurred.

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.

**Authority: 38 U.S.C. 7304**

## **2.59 CONTINUING LICENSURE, REGISTRATION, AND/OR CERTIFICATION REQUIREMENTS FOR EMPLOYEES**

**NOTE:** See *VHA Handbook 1100.19*.

a. **Verification of Primary License**

(1) The expiration date of an appointee's primary license, registration and/or certification, as appropriate, will be coded for follow-up purposes as provided in VA Manual MP-6, part V, supplement No. 1.5 (PAID). The appointee will specify the State in which primary licensure is claimed. The facility Director will designate the official(s) who will be responsible for the follow-up verification of these credentials. For this purpose, verification will consist of sighting evidence of renewal. VA Form 5-4682, Certification of Licensure, Registration, or Bar Membership, will be used and will be filed on the right side of the employee's personnel folder.

(2) Only the initial verification, which may have been certified on VA Form 5-4682 or the employment application form, and the latest VA Form 5-4682 are required to be on file. No follow-up expiration date need be coded for employees whose registration or certification is issued on a one-time basis for whom there is no continuing requirement to maintain currency. (See pars. 2.55 to 2.58 for licensure verification requirements on initial appointment.)

**b. Other Verification.** Individuals with multiple licenses, registrations, and/or certifications are responsible for maintaining these credentials in good standing and of informing the Director or designee of any changes in the status of these credentials. The Director is 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.** If it is learned that an employee has an active, current, full and unrestricted license or registration in a State, but has had any other license or registration to practice revoked, suspended, denied, restricted, limited, issued/placed on a probational basis, or has entered into any other type of voluntary or involuntary agreement with a State licensing board regarding the employee's practice, facility officials will take steps to ascertain the full circumstances and, if appropriate, will initiate a review of clinical privileges, disciplinary action and/or termination procedures.

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

(1) An employee who does not maintain active, current, licensure, registration and/or certification (if required), or who fails to show evidence of such when requested to do so, must be separated under appropriate procedures in MP-5, part II, chapter 9 and its VHA supplement, or, for employees appointed under 38 U.S.C 7401(3), under appropriate procedures in MP-5, part I. If there is any question about whether to separate an employee based on failure to maintain current licensure or registration, facility officials will contact the Customer Advisory and Consulting Group (051) and/or the Chief Network Officer, Office of the Under Secretary for Health (10N).

(2) Some states authorize a grace period after the licensure and/or registration expiration date, during which an individual is considered to be fully licensed and/or registered 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 or registration on an employee whose only license and/or registration has expired if the State has such a grace period and considers the employee to be fully and currently licensed/registered.

**Authority: 38 U.S.C. 7304**

## **2.60 REPORTING TO STATE LICENSING BOARDS**

Licensed or registered employees and former employees will be reported to State licensing or registration boards and/or to other monitoring bodies in accordance with provisions VHA Handbook 1100.18. This requirement applies to all licensed and/or registered employees included within the scope of this chapter, including residents.

**Authority: 38 U.S.C. 7304**

## **2.61 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 chapter 10.

b. **Preemployment Physical Examination.** For full-time, part-time and intermittent employees, a preemployment physical examination is required prior to appointment.

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, will be 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. (For residents, see par. 2.64.)

## **2.62 CAUTIONARY LIST [Discontinued]**

## **2.63 CREDENTIALS OF RESIDENTS AND TRAINEES**

**NOTE:** See M-8, part II, for residency and trainee program requirements. See M-2, part I, chapter 26, for clinical practice and privileging requirements.

a. **General.** Medical, dental, podiatry and optometry residents and trainees appointed under 38 U.S.C. 7405 or 7406 must meet the licensure requirements for residents and trainees specified in the appropriate qualification standard for the occupation. (See MP-5, pt. II, Chapter 2, sec. C.) If licensure is required, evidence of licensure must be furnished prior to appointment and periodically throughout VHA employment as requested.

**b. Verification**

(1) Before the Director approves the appointment of any resident or trainee in an integrated program, whether paid or without compensation, an RCVL (Resident/Trainee Credentials Verification Letter) signed by the program director of the affiliate, for the occupation or specialty involved, must be submitted through the Chief of Staff for approval by the Director. If the residency or training program is not integrated with an affiliate, for the approval by the Director. 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 RCVL. A new RCVL is required for each academic year that the resident or trainee is appointed to a VA facility.

(2) The RCVL must certify 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 ACGME (Accreditation Council for Graduate Medical Education), 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, ECFMG (Educational Council for Foreign Medical Graduates) certification, DEA certification, and all State professional licenses held prior to entry into the program or obtained during residency training), and affirm that the resident or trainee is physically and mentally fit to take care of patients. (See App. 2C for sample RCVL letter.)

(3) The program director will notify the facility Director if a resident or trainee has had any problems concerning credentials. 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 for medical and dental residents, and VA Form 10-2850c or Standard Form 171 for other residents and trainees.

(4) Residents functioning within the scope of their training program must meet clinical practice requirements as specified in M-2, part I, chapter 26. The RCVL must certify that ACGME-established criteria for the essentials and special requirements for residency training programs have been followed by the program director, or in certain cases, by the appropriate VA service chief. Such residents are generally excluded from clinical privileging requirements required for VHA staff physicians. (See subpar. d.)

(5) A sample format for the RCVL is contained in appendix 2C. 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 original RCVL from each program director for the academic year must be retained for 5 years by the Chief of Staff, or designee, in a Resident/Trainee Credentials Verification File.

(7) Until the facility Director countersigns the program director's RCVL, a resident or trainee cannot 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 the appointment of any resident or trainee, the Chief of Staff or the facility Director's designee will document on the employment application, VA Form 10-2850b or Form 10-2850c, as appropriate, that evidence of current, full and unrestricted licensure and registration (if required) have been sighted for all State(s) in which the applicant claims to have ever been licensed. The RCVL may be sighted as evidence of licensure verification and as evidence of verification of other required credentials. If the RCVL is sighted as evidence of credentials verification, this will be noted on the VA Form 10-2850b or 10-2850c, or on VA Form 5-4682 (licensure or registration verification only).

d. **Employment of Residents as Admitting Physicians.** (See ch. 3, sec. A.) A medical resident functioning outside the scope of his or her training program who is appointed as an admitting physician 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.

**Authority: 38 U.S.C. 7304**

**ENGLISH LANGUAGE PROFICIENCY**  
**Veterans Health Administration**

**a. General**

(1) 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. This includes all full-time, part-time, intermittent, without compensation, consultant, attending, and on-facility fee-basis appointments.

(2) The facility Director is responsible for identifying all positions involving direct patient-care responsibilities and for determining which applicants are proficient in English. The Director may delegate responsibility for carrying out the administrative functions required to make the language proficiency determinations to the HRM officer or designee.

(3) When a VA facility serves a substantial number of veterans with limited English-speaking ability, the Director must ensure the identification of sufficient numbers of staff members who are fluent in both the language most appropriate to these veterans and in English.

(4) The General Counsel has determined that in making language proficiency determinations and assessments, the Uniform Guidelines on Employee Selection Procedures (FPM Supplement 335-1, app. A) do not apply. However, the facility Director should try to minimize, if possible, any disproportionate adverse impact on members of groups whose primary and native written and spoken language is not English.

**b. Definitions**

(1) Required **English Language Proficiency**. Ability to communicate in spoken and written English with patients and other health care personnel with sufficient fluency to satisfactorily carry out assigned responsibilities.

(2) Direct **Patient-Care Capacity**. Face-to-face contacts with a patient for the purpose of providing care, diagnosis, counseling, or treatment. (This does not include personnel in nondirect patient-care capacities who may come in contact with patients incidental to their primary job responsibilities but does include trainees in all health care occupations.) This may include, but is not limited to:

(a) Any person technically and/or professionally responsible for supervising the performance of direct patient-care activities such as the Chief of Staff, service or section chief, clinical service supervisors, etc;

(b) Any person responsible for contributing diagnostic, treatment, or counseling information for the patient's medical record;

(c) Any physician or dentist (including residents), podiatrist, optometrist, nurse, nurse anesthetist, PA or EFDA, except those appointed under authority of 38 U.S.C. 7405 solely for

the purpose of carrying on activities other than direct patient care, such as purely academic or research activities;

(d) Any RRT, CRTT, PT, LPN, OT or pharmacist appointed under 38 U.S.C. 7401(3) or 7405; and

(e) Any person who serves in an allied health capacity in support of the total treatment team effort, such as clinical psychologists, social workers, rehabilitation medicine therapists, nursing assistants, and laboratory and radiology personnel, dietitians, etc., who are in direct contact with patient in a diagnostic, treatment, counseling, or care capacity.

(3) Appointment. Any action to assign an individual to a direct patient-care capacity is considered an appointment for the purpose of this appendix. This includes initial appointment and any initial assignment to a direct patient-care position, such as transfer, reassignment or promotion.

c. **Determination of Proficiency.** One of the following criteria will be used to determine English language proficiency:

(1) The candidate's primary and native written and spoken language is English.

(2) The candidate has completed a combination of 4 or more years of education and/or experience as follows:

(a) Education in this country or in any school in which the basic curriculum is conducted in English, which may include any time spent in graduate and postgraduate training.

(b) Successful work experience in a health care facility in which the primary written and spoken language is English and in which the individual is required to communicate in English.

(3) For physicians, any of the following additional criteria may be considered as qualifying for English language proficiency:

(a) Graduation from a medical school accredited by the LCME (Liaison Committee on Medical Education), as listed in the current Association of American Medical Colleges' Directory.

(b) Graduation from a foreign medical school whose curriculum was taught and examined in English.

(c) United States citizenship by birth and graduation from a foreign medical school.

(d) Certification by the ECFMG (Educational Council for Foreign Medical Graduates) with a certificate dated 1976 or later.

(e) Successful completion of the VQE (Visa Qualifying Examination).

(f) Certification by an American Specialty Board.

(g) For residents appointed to an integrated graduate training program (i.e., accredited in the name of an affiliated institution), certification by the Deans Committee or Medical Advisory Committee of having met the written and spoken English proficiency requirements.

**d. TOEFL (Test of English as a Foreign Language)**

(1) If a physician, dentist, podiatrist, optometrist, nurse, nurse anesthetist, or PA does not meet the above criteria or if proficiency is questionable even though one or more criteria are met, the candidate must successfully complete the TOEFL before a determination of proficiency is made. Successful completion of this test is the achievement of a minimum converted total score of 550 and, where the three-part test is taken, a minimum unconverted of 55 on each of the three parts.

(2) The TOEFL is administered by Educational Testing Services, Inc., of Princeton, NJ, several times each year in centers around the country. For application materials and information about tests (including testing center locations, filing, deadlines, and test dates), facilities or applicants should call 609-771-7100, or access the website at [www.TOEFL.org](http://www.TOEFL.org). Payment for testing and training of applicants for employment will not be made by VA.

**e. Questionable Proficiency**

(1) If an individual in any occupation not listed in subparagraph d, including any EFDA, RRT, CRTT, PT, LPN, OT or pharmacist, does not meet the proficiency criteria or if proficiency is questionable even though one or more criteria are met, the facility Director will determine on an individual basis whether the individual is sufficiently proficient for the assignment involved. Although English language proficiency tests are not required, extreme caution should be exercised in assessing written and spoken English proficiency. This can normally be accomplished through personal interview, reference checks, etc., conducted by the appointing official. In doubtful cases, a final determination should be made only after review and interview by a second management official whose native language is English.

(2) If any person, at a facility where the primary written and spoken language of the predominant number of patients is other than English, has not demonstrated proficiency as indicated above, or if proficiency is questionable, the facility Director will determine on an individual basis whether the individual is sufficiently proficient for the assignment involved. This determination will be made as described above.

**f. Documentation.** The determination that an employee is proficient in English will be documented on the appointment VA Form 5-4652, Request for Personnel Action, which will be retained for the duration of VA employment.

**g. Temporary Appointment Pending Proficiency Determination**

(1) A physician, dentist, podiatrist, optometrist, nurse, nurse anesthetist, or PA may be appointed under 38 U.S.C. 7405(a)(1)(A) pending successful completion of the TOEFL. The

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facility Director or designee will determine on an individual basis, through personal interview, reference checks, etc., that the candidate is sufficiently proficient to have a reasonable assurance of successfully completing the examination.

(2) A written statement will be provided to any candidate thus appointed explaining the requirement for the TOEFL and that continued employment is contingent upon its successful completion.

(3) The TOEFL must be successfully completed during the first year of VHA employment in a direct patient-care assignment. An employee whose test scores fail to qualify for successful completion of the exam will be terminated from the service on 2-weeks' notice. If the employee's temporary appointment expires in less than 2 weeks, the employee may not be retained beyond this date.

**Authority: 38 U.S.C. 7304; 38 U.S.C. 7402, 7405.**

**SECTION I. REQUESTS FOR APPROVAL TO PETITION THE UNITED STATES INFORMATION AGENCY (USIA) FOR SUPPORT OF A WAIVER OF THE 2-YEAR HOME RESIDENCE REQUIREMENT OF THE UNITED STATES EXCHANGE VISITOR PROGRAM BY THE IMMIGRATION AND NATURALIZATION SERVICE (INS)**

1. This appendix establishes criteria for requesting the Under Secretary for Health, or designee's approval to petition USIA for support in behalf of an individual on a J-1, Exchange Visitor, visa for a waiver of the 2-year home residence requirement by INS, (See Section II for Definitions.)

2. **Background.** The Immigration and Nationality Act requires that certain foreign nationals, who are in the United States (U.S.) as participants in the Exchange Visitor Program, leave the U.S. for 2 years to apply newly acquired training and skills in their home countries. This 2-year home residence requirement also prevents circumvention of the usual methods of immigration to the U.S. Under unusual circumstances, the head of an interested Federal agency may request a waiver of this requirement when that agency determines that such a waiver is in the interest of a program of the U.S. and in the public interest. (Title 22 CFR, Part 514, and the Immigration and Nationality Act, Section 212(e), as amended.)

3. **Policy.** The Department of Veterans Affairs (VA) supports the Exchange Visitor Program and the 2-year home residence requirement and will seek waivers only when it is clearly in the interest of the Department and its programs. For VHA the Secretary has delegated to the Under Secretary for Health, or designee, authority to approve such requests and to determine when submission of requests for waiver are appropriate.

4. **Sections**

- a. **Definitions.** Definitions of terms used in this appendix are in Section II.
- b. **Submission of Requests.** Requests are to be submitted in accordance with Section III.
- c. **Actions Required After Request is Approved.** Instructions and further information for processing approved requests are contained in Sections IV and V.

**SECTION II. DEFINITIONS**

1. **Adjustment** means changing from a nonimmigrant status to immigrant status while remaining in the U.S. Individuals whose authorized stays have expired are required to leave the U.S. and may not reenter unless they have been granted another visa.

**NOTE:** *Individual holding J-1 visas, who were admitted for the purpose of acquiring graduate medical education or training, are barred from adjusting to another nonimmigrant status, including a change to H-1B whether or not a waiver of the 2-year home resident requirement has been approved. See 8 CFR 248.2(c). This means any holder of such a J-1 visa who wishes to*

*change to H-1B must first leave the United States and return on another visa, whether or not they have a waiver of the 2-year home residence requirement.*

2. **Alien Labor Certification.** Certification by the U.S. Department of Labor (DOL) that:

a. There are not sufficient U.S. workers able, willing, qualified, or available at the place where the alien is to be employed when the alien applies for an immigrant visa; and

b. The employment of the alien will not adversely affect the salaries and working conditions of similarly employed U.S. workers

**NOTE:** *Alien labor certification is only required when a facility plans to petition INS for immigrant status based on their need for the alien's skills. Aliens married to or related to U.S. citizens who are petitioning in their behalf are not required to obtain an alien labor certification in conjunction with their petition for immigrant status. This paragraph primarily deals with alien labor certification requirements for physicians. Different alien labor certification requirements may apply for other occupations. For further information about these other occupations, facilities should contact their local State Employment Office.*

3. **Exchange Visitor.** A foreign national who is a participant in the Exchange Visitor Program (e.g., foreign medical school graduates admitted to the U.S. for medical training).

4. **Exchange Visitor Program.** A program administered by USIA which is intended to promote an interchange of persons; knowledge and skills; and developments in the fields of education, arts, and sciences, which promote a mutual understanding between the people of the U.S. and the people of other countries.

5. **Immigrant.** An alien who has been admitted to the U.S. for permanent residence. By September 20, 1994, all immigrants are required to have an Alien Registration Receipt Card, Form I-551. The Form I-151 and all previous forms are no longer valid after September 19, 1994. The Form I-551 has the lawful holder's photograph, fingerprint, and signature on a white background; however, it is commonly known as the "green card"

6. **Immigration and Naturalization Service (INS).** The Agency of the U.S. Department of Justice which administers the Immigration and Nationality Act. INS is responsible for approving or disapproving waivers of the 2-year home residence requirement for Exchange Visitors.

7. **Nonimmigrant.** An alien temporarily admitted to the U.S. for specific purposes and periods of time.

8. **Nonimmigrant Visas**

a. **J-1.** A nonimmigrant visa issued to an Exchange Visitor which allows the participant to enter or remain in the U.S. while participating in the Exchange Visitor Program.

b. **J-2.** A nonimmigrant visa issued to the spouse of an Exchange Visitor which allows the individual to remain in the U.S. while their spouse is participating in the Exchange Visitor Program.

c. **H-1B.** A nonimmigrant visa granted to professionals or those of distinguished merit and ability for a period of up to 3-years. H-1B visas are granted for specific positions and may be extended 3 years for a total of 6 years. Noncitizen physician graduates of foreign medical schools may be granted H-1B visas for patient care positions if they have passed the United States Medical Licensing Examination (USMLE) or its equivalent and the English language proficiency examination given by the Educational Commission on Foreign Medical Graduates (ECFMG).

**NOTE:** *Facilities may wish to use the H-1B instead of the permanent resident visa, as the H-1B visa is employer-specific and does not require alien labor certification. A labor condition application must be submitted and approved by DOL prior to a submission to INS for an H-1B visa (Title 20, CFR, section 655.730).*

9. **“TN” Classification.** A nonimmigrant classification granted under the provisions of the North American Free Trade Agreement to citizens of Canada and Mexico. The TN classification is available only for certain professional occupations and is issued pursuant to a job offer by an U.S. employer. Aliens are admitted for an initial period of up to 1 year and may be granted extensions in 1-year increments. Physicians may only be admitted on a TN classification to perform teaching or research (no direct patient care). The TN classification is replacing the TC classification for Canadian citizens.

10. **2-Year Home Residence Requirement.** Certain Exchange Visitors must return to their country of nationality or to their last legal permanent residence after they have completed their education for at least 2 years before they can apply for an immigrant or nonimmigrant visa.

11. **United States Information Agency (USIA)** The agency which administers the Exchange Visitor Program and recommends to INS approval or disapproval of petitions for waiver of the 2-year home residence for Exchange Visitors.

### SECTION III. SUBMISSION REQUIREMENTS

#### 1. General Policies

a. Facility Directors may request the approval of the Under Secretary for Health (10N\_/051) to petition USIA for support of a waiver by INS of the 2-year home residence requirement only if it can be shown that the loss of the Exchange Visitor’s services would necessitate discontinuance of a program or a major phase of it, and recruitment efforts have failed to produce a qualified citizen or permanent resident applicant for the position.

**b. Waiver requests will not be considered if;**

- (1) They are based solely upon the personal desire of the Exchange Visitor to remain in the U.S. or the needs of the affiliated university.
- (2) They are not part of an ongoing and comprehensive recruitment effort. Recruitment efforts shall not be initiated solely for the purpose of placing Exchange Visitors.
- (3) They are to facilitate routine hiring in nonspecialized assignments; for appointments of less than 4/8ths time; or for appointments on a without compensation or fee basis.
- (4) Another facility has a pending request for a waiver in behalf of the candidate.
- (5) The position to be filled is a trainee, fellowship or otherwise time limited, including medical support appointments under 38 U.S.C. 7405(a)(1)(D).
- (6) There are other qualified citizens or permanent resident applicants for the position. Title 38 U.S.C. Section 7407(a), provides that noncitizens may only be employed if it is not possible to recruit citizens for necessary services. It is not enough to demonstrate that a noncitizen is more qualified. Interested citizen or permanent resident applicants must be found unqualified for the position, i.e., that they have failed to meet the requirements of the position. For example, physicians who are not board certified or who do not possess specialized skills may not be considered unqualified if such requirements are only desirable or the recruitment advertisement fails to specify such requirements.

**c. Post Audit.** Requests submitted under this directive may be post audited by VA Headquarters to ensure compliance with this Appendix's provisions, as well as applicable VHA personnel policies and procedures. Department of Veterans Affairs (VA) officials who fail to comply with provisions of this Appendix may be subject to appropriate administrative or disciplinary action.

**2. Submission of Requests.** Requests are to be assembled in the following order, with each item tabbed on a separate piece of paper, and sent to the Chief Network Officer, Office of the Under Secretary for Health (10N\_\_/051. Approved requests will be forwarded directly to USIA by VA Headquarters. Facilities should retain copies of material submitted with their request.

**a. Director's Letter.** The request is to contain a letter signed by the facility Director which addresses each of the following items:

- (1) A complete description of the proposed assignment, including the percentage of time spent in research or educational activities and the responsibilities at the affiliated university, where appropriate. The description shall include the proposed grade and step rate of the applicant, whether the position is full-time or part-time, and the proportion which part-time employment bears to full-time employment, where appropriate.

(2) The proposed appointment date and the anticipated immigration status of the proposed candidate after appointment (i.e., TN classification, H-1B visa, or permanent resident alien status).

(3) A description of the health-care needs the Exchange Visitor would meet and how those needs are or are not being met at the present time. The description should also include any patient care problems, an explanation of how the loss of the Exchange Visitor would result in discontinuance of a program or a major phase of a program of official interest to the Department, and information on additional expenditures associated with alternative methods of patient care (fee for service, contracting, etc.)

(4) A complete description of recruitment efforts, including the time the position has been vacant, areas covered, contacts made, rationale for selecting recruitment methods used, etc.

**NOTE:** *Also see the documentation requirements in subparagraph b.*

(5) The letter is to provide the name, title, and telephone number of a facility employee who can answer technical questions about the request and provide additional information, which may be required by VA Headquarters.

**b. Documentation of Recruitment Efforts (tab each item on separate piece of paper)**

(1) Advertisements

(a) Provide dated photocopies of ads placed in professional journals, newspapers, etc. Except as provided in paragraph 2b(1)(b), ads must be placed in nationally recognized journals or periodicals, which are, appropriate to the specialty and have nationwide circulation. Ads may not be over 1-year old at the time of submission. The primary focus of the ads is to be VHA employment; they must indicate VHA is an equal opportunity employer; and contain any special requirements of the position, e.g., special professional skills, board certification, etc. Applications are to be directed to the appropriate VHA facility servicing Human Resources Management office. They are not to be forwarded through the affiliated university. Upon receipt, all applications will be forwarded to the appropriate facility program official. Any inquiries concerning the position are to be documented by a report of contact, a copy of which will be kept by the contacted VA official. If the position is less than full-time at VA the ad must include information about associated employment at the affiliated university, where appropriate.

(b) Facility Directors will not be required to place ads in appropriate national journals if the position is in a scarce medical specialty for special pay purposes or is one for which geographic special pay has been authorized. Any exception under this subparagraph is to be documented in the facility Director's letter described in paragraph 2a.

**NOTE:** *An exception under this subparagraph does not relieve a facility from undertaking active recruitment efforts to attract qualified candidates, meeting DOL alien labor certification requirements, or from taking other recruitment efforts as outlined in following paragraph (2), where appropriate.*

(2) **Other Efforts.** An active recruitment effort will be demonstrated by a combination of the following: letters to medical schools, specialty boards, professional organizations and local advertising. Facilities shall send a nationwide Teletype advertising the vacancy and request referrals from the Health Care Staff Development and Retention Office, 1555 Poydras Street, Suite 1971, New Orleans, LA 70112, or telephone 1-800-949-0002.

(3) **Interested Individuals.** For each individual (other than the Exchange Visitor) expressing interest in the position, requesting information about the position, or filing an application provide:

- (a) Name, address and telephone number;
- (b) A copy of any employment application and/or curricula vitae submitted;
- (c) Citizenship status. For noncitizens provide immigration status (permanent resident, J-1, etc.);
- (d) Whether the position was offered;
- (e) Copies of reports of contact discussing the position with all citizen and permanent resident applicants; and
- (f) A narrative explanation as to why the individual was not qualified, not selected, or declined further consideration.

**c. Exchange Visitor's Qualifications (tab each item on separate sheet of paper)**

(1) **Application.** The application form must be complete. (**Application forms which refer to the curriculum vitae for further information will be returned as incomplete.**) All periods following graduation from professional school must be accounted for; where appropriate, the Chief of Staff must have certified on the application that licensure, registration, visa status, and any board certification of the applicant have been verified; and the employment application must be signed and dated by the applicant.

**(2) Curriculum Vitae**

(3) **License.** Include copies of each license **and** documentation of the verification of licensure with each state in which the Exchange Visitor claims to have been licensed.

(4) **Clinical Privileges.** Provide a copy of the proposed VHA clinical privileges, and, if available, a copy of the clinical privileges from the most recent employer.

(5) **Federation of State Medical Boards (FSMB) Screen.** No longer a mandatory requirement.

(6) **Deans Committee Recommendation.** Submit a copy of the Deans Committee recommendation, where appropriate.

(7) **References.** As a minimum, a reference will be obtained from the applicant's current or most recent employer. Facilities are, however, encouraged to obtain information from authoritative sources, other than the applicant's references, which contain informed opinions on the applicant's scope and level of performance.

(8) **Certification from the Educational Commission for Foreign Medical Graduates (ECFMG).**

(9) **USMLE, National Board of Medical Examiners (NBME) or Foreign Language Examination (FLEX) Scores.**

(10) **Board Certification.** Documentation concerning board certification or of progress towards obtaining board certification.

(11) **Visa.** Submit photocopies of the USIA Certificate of Eligibility for Exchange Visitors (J-1) Status (Form IAP-66) for all periods covered by the J-1 visa. **Do not submit copies of the applicant's passport in lieu of these forms.**

(12) **Waiting Period.** Provide the Exchange Visitor's residence and a telephone number where they can be reached during the waiting period between the time the waiver of the 2-year home residence requirement is approved and the applicant's appointment in VHA.

**NOTE:** *Documentation requirements in paragraphs b and c to physicians. For other occupations, facilities should contact the Customer Advisory and Consulting Group (051) for further information.*

#### **SECTION IV. ACTION ON APPROVED REQUESTS**

1. **Action Taken After Requests Approved by Under Secretary for Health or Designee.** VA Headquarters will advise the facility whether the request to petition USIA has been approved and submits the approved request to USIA. The facility is to advise the Exchange Visitor in writing that VHA is supporting the petition for waiver of the 2-year home residence requirement. This letter should also:

a. Outline the terms of the employment (i.e., the title of the position, duties and responsibilities, proposed work schedule, proposed salary, anticipated starting date, etc.).

b. Ask the Exchange Visitor to keep the facility advised of any changes in their address or telephone number.

c. Advise the Exchange Visitor of their responsibility to contact the facility within 15 days of being notified by INS of approval or disapproval of the waiver. The exchange Visitor will be advised that if they fail to report for duty or to complete one year or more of service, the facility

will ask INS to reconsider the request for a waiver, as the individual is no longer fulfilling the need upon which the waiver of the home residence requirement had been based.

2. **Action by Other Agencies.** The following information is provided so facilities will have a better understanding of the processing, which occurs after the request leaves VA.

a. USIA reviews requests for potential effect on U.S. policy, programs, and foreign relations. USIA's recommendations are forwarded to INS for final adjudication.

b. **Alien Labor Certification**

(1) Alien labor certification is required if a facility is applying for an immigrant visa on behalf of the Exchange Visitor. Aliens married to or related to U.S. citizens who are petitioning in their behalf are not required to obtain an alien labor certification in conjunction with their petition for immigrant status. For occupations on Department of Labor's (DOL's) list of the occupations for which there are labor shortages in the U.S. (Schedule A), INS automatically determines eligibility for alien labor certification as part of its adjudication of the preference visa petition. DOL designations for shortage categories are reviewed periodically and subject to change. Currently physicians are not included on that list.

(2) State Employment Offices are responsible for administering the DOL Alien Labor Certification Program. It is advisable for facilities wishing to employ an alien to contact their local State Employment Office for guidance. Approval of VA Headquarters is not required to initiate procedures for obtaining alien labor certification. To expedite the hiring process, a facility should consider filing for the certification with the local State Employment Office concurrently with their request for approval to petition USIA. Section VI contains a list of DOL Regional Certifying Officers and Regional Administrators that have jurisdiction over local State Employment Offices. Facility officials are encouraged to contact the appropriate Regional Certifying Officer, or Regional Administrator, in cases where problems arise in connection with the alien labor certification process at the local level.

c. **INS.** INS makes the final determination concerning the Exchange Visitor's request for a waiver of the 2-year home residence requirement.

**NOTE:** *Alien labor certification is not required if the facility is petitioning for an H-1B visa on behalf of the Exchange Visitor.*

3. **Action on Requests Processed by INS:** After being notified that INS has made a decision on a request, the following actions are to be taken:

a. **Appointment.** Before the Exchange Visitor may be appointed, the facility must comply with the requirements of paragraph 2.19g. This may include petitioning for a permanent resident or H-1B visa or verifying the Exchange Visitor's authorization to accept employment.

b. If the Exchange Visitor reports for duty, the Network Management Support (10NA/051) will be advised in writing of the date the Exchange Visitor reported.

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c. If the Exchange Visitor does not report for duty, or reports for duty, and fails to complete 1 years of service, the facility Director shall ask INS to reconsider the waiver. (See par. 1b(3) and Section V.) An information copy of any request and INS response will be forwarded to the Network Management Support (10NA/051).

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**SECTION V. SAMPLE LETTERS TO IMMIGRATION AND NATURALIZATION SERVICE**

District Director  
United States Department of Justice  
Immigration and Naturalization Service

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(City, (State) (Zip)

Dear Sir:

The Department of Veterans Affairs Medical Center, (facility), supported waiver of the 2-year home residence requirement for (physician's name and visa number), a participant in the United States Exchange Visitor Program. It is our understanding that a waiver was granted (date); however, (name) failed to report for duty. Since (name) will not be meeting the medical needs upon which the waiver was based, we are recommending the waiver request be reconsidered.

Your assistance in this matter is appreciated. If you have questions or need additional information, contact (name) on (telephone number).

Sincerely yours,

Facility Director

**ALTERNATE SAMPLE LETTER**

District Director  
United States Department of Justice  
Immigration and Naturalization Service

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(City, (State) (Zip)

Dear Sir:

The Department of Veterans Affairs Medical Center, (facility), supported waiver of the 2-year home residence requirement in behalf of (physician's name and visa number), a participant in the United States Exchange Visitor Program. (Name) has voluntarily left the position upon which the waiver was based after having served less than 3 years. Since the medical needs upon which the waiver was based are no longer being met, we recommend the waiver granted to (name) be reconsidered.

Your assistance in this matter is appreciated. If you have questions or need additional information, contact (name) on (telephone number).

Sincerely yours,

Facility Director

**SECTION VI. DEPARTMENT OF LABOR REGIONAL CERTIFYING OFFICERS**

**REGION I**

**CERTIFYING OFFICER**

**REGIONAL ADMINISTRATOR**

Connecticut  
Maine  
Massachusetts  
New Hampshire  
Rhode Island  
Vermont

Raymondo Lopez  
One Congress St.  
10th floor  
Boston, MA 02114-2023  
(617) 565-2245  
(617) 565-2158 (FAX)

Robert Semler  
(617) 565-3630  
(617) 565-2229 (FAX)

**REGION II**

New York  
New Jersey  
Puerto Rico  
Virgin Islands

Delores DeHaan  
201 Varick Street  
Room 755  
New York, NY 10014  
(212) 337-2185  
(212) 337-1342 (FAX)

Marilyn K. Shea  
(212) 337-2139  
(212) 337-2144 (FAX)

**REGION III**

Delaware  
Maryland  
Pennsylvania  
Virginia  
West Virginia

Richard Panati  
3535 Market Street  
Room 13300  
P.O. Box 8796  
Philadelphia, PA 19104-8796  
(215) 596-6361  
(215) 596-0480 (FAX)

Edwin G. Strong, Jr.  
(215) 596-6336  
(215) 596-0329 (FAX)

**REGION IV**

Alabama  
Florida  
Georgia  
Kentucky  
Mississippi  
North Carolina  
South Carolina  
Tennessee

Floyd Goodman  
61 Forsyth Street, SW  
Room 6M12  
Atlanta, GA 30303  
(404) 562-2115  
(404) 562-2149 (FAX)

Toussaint L. Hayes  
(404) 562-2092  
(404) 562-2149 (FAX)

**REGION V**

Illinois	Sarah Carroll	Byron Zuidema
Indiana	230 S. Dearborn Street	(312) 353-0313
Michigan	Room 628	(312) 353-4474 (FAX)
Minnesota	Chicago, IL 60604	
Ohio	(312) 353-1550	
Wisconsin	(312) 353-1509 (FAX)	

**REGION VI**

Arkansas	Charlene Giles	Joseph Juarez
Louisiana	525 South Griffin Street	(214) 767-8263
New Mexico	Room 317	(214) 767-5113 (FAX)
Oklahoma	Dallas, TX 75202	
Texas	(214) 767-4989	
	(214) 767-4988 (FAX)	

**REGION VII**

Iowa	Charles Mooney	Ramond L. Moritz (Acting)
Kansas	1100 Main Street	(816) 426-3796 (x229)
Missouri	City Center Square	(816) 426-2729 (FAX)
Nebraska	Suite 1050	
	Kansas City, MO 64105	
	(816) 426-3796 (x251)	
	(816) 426-2729 (FAX)	

**REGION VIII**

Colorado	Hardy Anderson	John Sweeney (Acting)
Montana	1999 Broadway	(303) 844-1650
North Dakota	Suite 1780	(303) 844-1686 (FAX)
South Dakota	Denver, CO 80202-5716	
Utah	(303) 844-1574	
Wyoming	(303) 844-1685 (FAX)	

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**REGION IX**

Arizona	Paul Nelson	Armando Quiroz
California	71 Stevenson Street	(415) 975-4610
Guam	Room 830	(415) 975-4613 (FAX)
Hawaii	Box 3767	
Nevada	San Francisco, CA 94119-3767	
	(415) 744-7618	
	(415) 975-4660 (FAX)	

**REGION X**

Alaska	Thomas Jones	Mike Brauser
Idaho	1111 Third Avenue	(206) 553-7700
Oregon	Suite 900	(206) 553-0098 (FAX)
Washington	Seattle, WA 98101-3212	
	(206) 553-5297	
	(206) 553-2069 (FAX)	

**RCVL (RESIDENT/TRAINEE CREDENTIALS VERIFICATION LETTER)**

Department or Program

Medical School

Date \_\_\_\_\_

Director (OO)

VA Medical Center

(Address) \_\_\_\_\_

Dear

I certify that the residents/trainee listed on the enclosed sheet, to be appointed to the Department of Veterans Affairs \_\_\_\_\_ (Medical Center) \_\_\_\_\_, to work at varying times during the period of July 1, 19\_\_ through June 30, 19\_\_, are physically and mentally fit to perform the duties assigned to them. They meet, in full, the education, credential, and program requirements established by \_\_\_(medical school or VA medical center)\_\_\_ in this ACGME (Accreditation Council for Graduate Medical Education) or nationally accredited training program. Their credentials (diplomas, letters of reference, certificates of advanced training, all State professional licenses held prior to entry into the program or obtained during residency training, and, where applicable, DEA (Drug Enforcement Administration) certification and ECFMG (Educational Council for Foreign Medical Graduates) certification, have been verified, and you have been advised of any problems relating to the credentials of these residents/trainees, where appropriate.

I also certify that the process of privileging of residents for clinical procedures will be completed and appropriately updated by me as program director (or by the appropriate VA service chief), in accordance with ACGME-established criteria for the essentials and special requirements for residency training programs. If you have any questions or require additional information, let me know.

Signed \_\_\_\_\_

Program Director or VA Service Chief

Department of \_\_\_\_\_

VAMC Chief of Staff

Accept/Do Not Accept \_\_\_\_\_ Comments: \_\_\_\_\_

Date \_\_\_\_\_

VAMC Director

Accept/Do Not Accept \_\_\_\_\_ Comments: \_\_\_\_\_

Date \_\_\_\_\_

Attachment: List of Residents/Trainees

Department or Program

School

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**ATTACHMENT TO RCVL**

(Medical Residents)

Academic Year \_\_\_\_

Title of Residency Program

Name

Specialty

Department or Program  
School

**ATTACHMENT TO RCVL**

(Dental, Podiatry and Optometry Residents/Trainees)

Academic Year \_\_\_\_\_

(List all residents/trainees by program.)

Name

Program

**CREDENTIALING CHECKLIST**

Applicant: \_\_\_\_\_

	<u>Action Initiated</u>	<u>Action Completed</u>
1. Application Form (including follow-up as required)		
2. State Licensure/Registration (verify in all States where claimed by applicant)		
3. Certification(s) Verification (national board or other certifications)		
4. Drug Enforcement Certification (DEA) (obtain copy of DEA card)		
5. Reference Letter(s) (VA Form Letter 10-341a may be used; one reference must be from current or most recent employer; obtain OPF if applicant has prior Federal service; additional references may be required.)		
6. Citizenship Documents (visa status or evidence of naturalization)		
7. Physical Examination (or statement of mental and physical health status, as appropriate)		
8. Federation of State Medical Boards (FSMB) Screening (physicians only, copy of FSMB letter) (Optional)		
9. Copy of Clinical Privileges (current or most recent privileges)		
10. Education/Training Verification		
11. Deans Committee Nomination (as appropriate)		
12. Medical Staff Bylaws Acknowledgment (required for clinical privileging)		
13. Board Action		

Date Appointed: \_\_\_\_\_

**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 Manual MP-5, Pt. II, Ch. 3, sec. B, par. 6.) It does not apply to those in an “acting” capacity.

**2. PROCEDURES**

- a. The facility initiates recruitment and contacts the appropriate VA Headquarters 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 Headquarters program official who may provide comments or recommendations concerning the proposed selection within 5 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 Chief Patient Care Service Officer (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 (for new appointments the Director must consider the recommendation of the Professional Standards Board). The recommendation shall include any comments made by the VA Headquarters 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 Office of VISN Director that the selection has been approved.

**NOTE 1:** Special pay agreements must be approved by the Secretary if the candidate’s total pay (basic and special pay) would exceed Level I of the Executive Schedule. See MP-5, Part II, Chapter 3, sec. B.

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

**NOTE 3:** Facility officials are to maintain documentation regarding their recruitment process. See paragraph 3b of this directive.

**PROCEDURES FOR APPOINTING  
PODIATRISTS**

1. The facility initiates recruitment and contacts the Director of Podiatry Service who may recommend additional candidates for the position.
2. The appropriate official screens interviews and tentatively selects a candidate for the position.
3. If the proposed selection does not require a board action, the Chief of Staff or designee is to discuss the proposed selection with the Director of Podiatry who has 5 working days to make comments or recommendations concerning the proposed selection.
4. The recommendation is forwarded through channels to the facility Director for consideration. Recommendations are to include the comments of the Director of Podiatry Service, and, in the case of new appointments, the recommendation of the Podiatry Professional Standards Board.
5. The facility obtains the concurrence of the Dean's or Medical Advisory Committee, if appropriate.
6. The facility Director approves or disapproves the appointment or assignment.
7. The facility advises the Director of Podiatry Service of the selection.

**NOTE 1:** The Director of Podiatry Service and the Podiatry Professional Standards Board may be contacted through the VA Medical Center, Montrose, NY. Communications should be directed to:

Director, VA Podiatry Service(112 (W))  
VA Medical Center  
Wade Park Division  
10701 East Blvd  
Cleveland, OH 44106  
Telephone: 216-231-3286  
Fax: 216-231-3446

**NOTE 2:** Facility communications with VA Podiatry Service officials need not be in a formal written format.

**NOTE 3:** Facility officials are to maintain documentation regarding their recruitment process. This documentation will include:

- a. A summary of any comments from Headquarters program officials regarding the recommended candidate; and
- b. 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 selected for the position.

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**NOTE 4:** Submissions to the Podiatry Professional Standards Board shall include the application form, curriculum vitae, and proof of current licensure and registration, board certification, faculty appointment, and residency training.

**NOTE 5:** The Human Resources Management Officer, VA Medical Center, Montrose, NY, or designee, shall serve as the technical representative to the Podiatry Professional Standards Board.

**PROCEDURES FOR APPOINTING  
OPTOMETRISTS**

1. The facility initiates recruitment and contacts the Director of Optometry Service who may recommend additional candidates for the position.
2. The appropriate official screens, interviews and tentatively selects a candidate for the position.
3. If the proposed selection does not require a board action, the Chief of Staff or designee is to discuss the proposed selection with the Director of Optometry who has 5 working days to make comments or recommendations concerning the proposed selection.
4. 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, and, in the case of new appointments, the recommendation of the Optometry Professional Standards Board.
5. The facility Director approves or disapproves the appointment or assignment.
6. The facility advises the Director of Optometry Service of the selection.

**NOTE 1:** The Director of Optometry Service and the Optometry Professional Standards Board may be contacted through the VA Medical Center, Fort Howard, MD. Communications should be directed to:

Director, VA Optometry Service(112A)  
9600 North Point Road  
VA Medical Center  
Fort Howard, MD 21052-3001  
Telephone: 1-410-477-7192  
Fax: 1-410-687-8548

**NOTE 2:** Facility communications with VA Optometry Service officials need not be in a formal written format.

**NOTE 3:** Facility officials are to maintain documentation regarding their recruitment process. This documentation will include:

- a. A summary of any comments from Headquarters program officials regarding the recommended candidate; and
- b. 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 selected for the position.

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**NOTE 4:** Submissions to the Optometry Professional Standards Board shall include an application form, curriculum vitae, evidence of current licensure, faculty appointment, proposed clinical privileges and evidence of successful completion of National Boards.

**NOTE 5:** The Human Resources Management Officer, VA Medical Center, Fort Howard, MD, or designee, shall serve as the technical representative to the Optometry Professional Standards Board.

**PROCEDURES FOR APPOINTING  
NURSE ANESTHETISTS TO SECTION CHIEF POSITIONS**

**1. SCOPE.** This appendix covers the appointment of CRNAs as Chief of the Nurse Anesthesia 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 CRNAs, 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 Chief of Staff or designee is to discuss the proposed selection with the Deputy Director for CRNAs who has 5 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 CRNAs, and, in the case of new appointments, the recommendation of the Physician’s Professional Standards Board.

**NOTE 1:** The Deputy Director for CRNAs is currently located at the VA Medical Center, Seattle, WA, and may be contacted as follows:

Deputy Director for CRNAs, VA Anesthesiology Service (112-111L)  
VA Medical Center  
Seattle, WA 98108  
Phone: (206) 764-2574  
Fax: (206) 764-2914

**NOTE 2:** Communications with program officials need not be in a formal written format.

**NOTE 3:** Facility officials are to maintain documentation regarding their recruitment process. Documentation will include:

a. A summary of any comments from Headquarters program officials regarding the recommended candidate; and

b. 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 selected for the position.

**PROCEDURES FOR APPOINTING  
PHYSICIAN ASSISTANTS (PAs) at CHIEF GRADE**

1. If appropriate, local recruitment efforts are initiated.
2. Once a candidate is identified, the recommendation is sent through the local Physician's Professional Standards Board to the facility Director for approval or disapproval.

**Note:** Any movement to another assignment requires a determination that the new assignment warrants Chief grade. Such determinations shall consider the recommendation of the local Professional Standards Board.

**PROCEDURES FOR APPOINTING  
CHIEFS OF PHARMACY SERVICE (ALL GRADES),  
CLINICAL PHARMACY/PHARMACY SPECIALISTS, AND PROGRAM  
SPECIALISTS AT GRADES GS-13 AND ABOVE**

**1. SCOPE:** This appendix covers appointment of all Chiefs of Pharmacy Service, as well as clinical pharmacists/pharmacy specialists and program specialists in grades GS-13 and above. It does not apply to those in any of these positions in an “acting” capacity.

**2. PROCEDURES**

**a. Clinical Pharmacists/Pharmacy Specialists and Program Specialists (GS-13 and GS-14)**

- (1) Local recruitment efforts are initiated.
- (2) Candidates are interviewed and credentialed, as appropriate.
- (3) Service chief forwards the recommended candidate through channels to the facility Director for consideration (for new appointments the facility Director must consider the recommendation of the local or Regional Standards Board.)
- (4) The facility Director approves or disapproves the action.

**b. Chiefs of Pharmacy Service**

- (1) Recruitment efforts are initiated. As a minimum, this must include contacting the OHRM Headquarters and Executive Resources Team (052) to advertise the vacancy in the Weekly Summary Bulletin and contacting Headquarters program officials who may recommend additional candidates for the position.
- (2) Candidates submit applications (including responses to the knowledges, skills, abilities and other characteristics contained in the Weekly Summary Bulletin) to the local facility. Candidates are interviewed, screened and tentatively selected at the facility.
- (3) The Chief of Staff or designee is to discuss the proposed selection with Headquarters Pharmacy Service, which has 5 working days to comment or make recommendations concerning the proposed selection.
- (4) The appropriate facility official recommends the selection to the facility Director (new appointments at the GS-12 through GS-14 level must consider the recommendation of the Regional Pharmacy Standards Board and include any comments made by Headquarters Pharmacy Service; new appointments at the GS-15 level are to consider the recommendations of the Headquarters Pharmacy Standards Board).
- (5) The facility Director approves or disapproves the action.

(6) The facility notifies program official and Office of the VISN Director of the selection.

### 3. Selection Criteria for Chief, Pharmacy Service

**a. Organization and Planning.** Ability to systematically structure one's own activities as well as the activities of others in order to provide for effective task performance and coordination of efforts.

**b. Decision Making.** Ability to make sound and logical decisions and choose appropriate courses of action based on the evidence at hand; and the willingness to defend actions and decisions.

**c. Leadership.** Ability to provide effective leadership towards the accomplishment of the goals and objectives of an organization, particularly the pharmacy service and other related programs.

**d. Problem Solving.** Ability to deal effectively with problems, issues, and situations which occur in the daily activities of an organization.

**e. Oral and Written Communication.** Ability to establish and maintain effective communication with persons both within and outside an organization from many different backgrounds and levels of education and competence. Oral communication skill is of primary importance in this position.

**f. Program Management.** Knowledge of the general principles and practices of financial management, personnel administration and management.

**g. Health Care Management.** Knowledge of the principles and practices of health care management and the profession of pharmacy.

**PROCEDURES FOR APPOINTING  
OCCUPATIONAL AND PHYSICAL THERAPISTS AS  
SECTION CHIEF**

1. **SCOPE.** This attachment 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. Any local recruitment efforts are initiated.
- b. The service chief screens and interviews candidates.
- c. The service chief forwards the recommended candidate through channels to the facility Director for consideration. For new appointments, the facility Director shall consider the recommendation of the Regional Professional Standards Board.
- d. The facility Director approves or disapproves the action.

**NOTE:** Material submitted to the Regional Standards Board shall include (a) For appointments, an application form and/or curriculum vitae and evidence of current licensure or certification.

**Recruitment, Appointment, Advancement, Change in Assignment and Reassignment of Registered Nurses (RNs) in Grades IV and V**

1. **Scope.** This Appendix covers recruitment, appointments, advancements, changes in assignment, and reassignments of RNs in Nurse IV and Nurse V. This includes Chiefs of Nursing Service, Associate Directors for Nursing or Associate Directors for Patient Care Services, and other key nursing personnel (i.e., RNs in Nurse IV or above who are not Chiefs of Nursing Service or Associate Directors for Nursing or Associate Directors for Patient Care Services). This Appendix does not apply to nurse anesthetists, RNs “acting” in positions that would otherwise be covered by this Appendix, and personnel other than RNs in Associate Director for Patient Care Services positions.

**2. Recruitment, Appointment, Advancement, Change in Assignment and Reassignment of Key Nursing Personnel**

a. **Recruitment for Chief Nurse and Associate Director for Nursing Positions.** The following actions must be taken when Chief, Nursing Service and Associate Director for Nursing positions are being filled.

(1) Establish Search Committee. Search committee responsibilities might include assessing the facility’s needs, identifying job related skill(s) which need to be emphasized in the selection process (e.g., organizational leadership, management skills, education/staff development, resource utilization, quality management, expertise in a specific nursing discipline, research, exceptional labor-management relations skills), identifying recruitment sources, and screening applicants.

(2) Notify VHA Headquarters. Notify VHA Headquarters (051/118) by fax or teletype of the vacancy, of any skills to be emphasized in evaluating candidates, and of the proposed closing date of the announcement. VHA Headquarters will announce the position and its location, the skills to be emphasized, if any, the closing date, and required materials (curriculum vitae and last two proficiency reports or equivalent) in the Weekly Summary Bulletin. The announcement will also include a statement that applicants should apply directly to the employing facility.

*NOTE: Closing dates should be far enough in advance to conduct a comprehensive recruitment effort and give applicants sufficient time to submit required material to the facility.*

b. **Recruitment for Key Nursing Positions Other than Chief, Nursing Service and Associate Director for Nursing.** When positions other than Chief, Nursing Service and Associate Director for Nursing are filled, the actions in subparagraphs 2a(1) and (2) must be taken when local officials determine that a formal recruitment effort is necessary.

*NOTE: Local officials may decide that in order to fill certain key nursing positions (other than Chief, Nursing Service and Associate Director for Nursing) it is not necessary to establish a search committee.*

**c. Appointment To Nurse IV or V**

(1) After the recruitment process has been completed, the Chief, Human Resources Management (HRM), or designee, will evaluate all applicants against minimum qualification requirements and forward applications of all qualified applicants to the Search Committee or other group designated to review the applications.

(2) The Search Committee, or other group, will rate applicants “Qualified” or “Highly Qualified” and forward all applications to the approving official for a tentative selection.

(3) The approving official forwards the tentative selection to the appropriate Nurse Professional Standards Board (NPSB). The NPSB will review the scope of the position and the candidate’s qualifications to determine if assignment of Nurse IV or V is warranted and make a recommendation to the approving official.

*NOTE: Except as specified in subparagraph 3a of this Appendix, VHA Headquarters NPSB is appropriate for VHA Headquarters and Veterans Integrated Service Network (VISN) staff only. Other appointments are to be reviewed by the field facility NPSB (where one can be constituted) or the NPSB for the VISN (see par. 4). This includes nurses employed within the Employee Education System (formerly the system of Regional Medical Education and Continuing Education Centers).*

(4) The approving official (facility Director or designee) finalizes the selection and advises all candidates of their selection or non-selection for the position.

**d. Promotions to Nurse IV or Nurse V and Advancements from Level I to Level II Within Nurse IV and Nurse V.**

(1) The recommending official forwards the proposed functional description, employee’s curriculum vitae and the latest two proficiency reports (or their equivalent) to the appropriate NPSB for review.

*NOTE: VHA Headquarters NPSB is appropriate for VHA Headquarters and VISN staff. All other promotions and advancements are to be reviewed by the field facility NPSB (where one can be constituted) or the NPSB for the VISN (see par. 4).*

(2) The NPSB reviews the employee’s qualifications and the scope of the position to determine whether the proposed grade and level are warranted and makes a recommendation regarding the employee’s promotion or advancement to the approving official (facility Director or designee).

(3) The approving official approves or disapproves the promotion or advancement.

*NOTE: To recommend an action covered by paragraph d, the NPSB must find that the individual meets the qualifications for the position and that the scope and complexity of the assignment are comparable to the corresponding Chief Nurse assignment. The corresponding Chief Nurse assignment means that:*

- *a Nurse IV, Level I, assignment must be comparable to a Chief Nurse assignment at a Level IV (complexity index) facility,*
- *a Nurse IV, Level II, assignment must be comparable to a Chief Nurse at a Level III (complexity index) facility,*
- *a Nurse V, Level I, assignment must be comparable to a Chief Nurse at a Level II (complexity index) facility, and*
- *a Nurse V, Level II, assignment must be comparable to a Chief Nurse assignment at a Level I (complexity index) facility.*

e. **Reassignments and Changes in Assignment.** **NOTE:** 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 or level, an NPSB review and recommendation are not required. If a change in grade or level is involved, the procedures in paragraph 2d will be used.

(2) Change in Assignment. If the duties and responsibilities of a position are significantly changed, the procedures in paragraph 2d will be used to determine whether the employee should be promoted or advanced to a higher level within the 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 Chiefs of Nursing Service and Associate Directors for Nursing or Associate Directors for Patient Care Services**

Procedures for the recruitment, appointment, advancement, change in assignment and reassignment of Chiefs of Nursing Service and Associate Directors for Nursing or Associate Directors for Patient Care Services are the same as in paragraph 2, except as follows:

- a. **Waivers of Complexity Level.** VHA Headquarters NPSB is the appropriate NPSB for all appointments and advancements involving a waiver of facility complexity level.
- b. **Notification of VISN and VHA Headquarters.** When a selection is made for one of these positions, facility officials will notify the appropriate VISN Director and the Office of Nursing Programs (118) in VHA Headquarters.

### **4. NPSBs FOR VISNs**

- a. **Location.** Each VISN is assigned to an NPSB as follows:

- (1) New York NPSB: VISNs 1, 2, 3
- (2) Baltimore NPSB: VISNs 4, 5, 6
- (3) Gainesville NPSB: VISNs 7, 8, 9
- (4) Hines NPSB: VISNs 10, 11, 12
- (5) Minneapolis NPSB: VISNs 13, 14
- (6) Denver NPSB: VISNs 15, 19
- (7) Houston NPSB: VISNs 16, 17, 18
- (8) Portland NPSB: VISNs 20, 21, 22

b. **Board Membership.** For actions covered by this Change, the Chief Nurse or nurse assigned as Associate Director for Nursing or Associate Directors for Patient Care Services at the indicated facility will serve as the NPSB Chairperson and will designate other NPSB members from Nurse IVs and Vs at facilities serviced by the NPSB.

c. **Technical Advisor.** The technical advisor to the NPSB will be the Chief, HRM, or designee, at the facility where the Chairperson is assigned.

## 5. Required Documentation

a. With each request for action, the requesting facility will forward to the servicing NPSB the following items:

- (1) A memorandum from the recommending official supporting the action and indicating a proposed effective date;
- (2) VA Form 10-2543, Board Action, with items 1, 2, 3, and 5 on the front side completed. Item 5 should document the candidate's educational preparation, the dates of and adjectival ratings for the latest three proficiency reports, a summary of professional experience, and expiration date of the candidate's license; and
- (3) Copies of the last two proficiency reports, plus any other significant documentation concerning the nurse's performance.

b. Additional documentation which individual NPSBs might require should be kept to a minimum.

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6. **VHA Headquarters Maintenance of Board Action Folders.** With these actions, the Office of Nursing Programs (118) will no longer maintain board action folders. The practice of sending copies of board actions and related material to VHA Headquarters is hereby discontinued.

**BOARD CERTIFICATION FOR PHYSICIANS  
(ALLOPATHIC AND OSTEOPATHIC)**

1. **SCOPE:** This appendix contains requirements and procedures for the appointment of physicians under the authority of 38 U.S.C. 7401 and 7405, as well as physicians utilized under on-station contracts or sharing agreements

2. **GENERAL:** The American Board of Medical Specialties (ABMS) and the Bureau of Osteopathic Specialists (BOS), formerly known as the Advisory Board of Osteopathic Specialists, are umbrella organizations for approving medical specialty boards in the United States. Specialty boards determine whether candidates have received appropriate preparation in approved residency training programs in accordance with established educational standards, evaluate candidates with comprehensive examinations, and certify those candidates who have satisfied the board's requirements. Certification assures that medical specialists have successfully completed an approved educational program and an evaluation designed to assess their possession of knowledge, experience and skills needed to provide high quality patient care within the specialty. Successful completion of the board certification process is a widely accepted measure of physician qualifications. While board certification alone does not guarantee quality patient care will be provided, it does provide a credible foundation.

**3. DEFINITIONS:**

(a) Board Certified – a diplomate of a specialty board approved by the ABMS or BOS

(b) Board Eligibility - eligibility for osteopathic physicians refers to the completion of an approved intern/residency or preceptorship program in which the training, education, and experience would be expected to result in formal acceptance by the appropriate specialty board. For allopathic physicians, the ABMS no longer uses the terminology of board eligible. For a number of specialty boards, completion of an approved residency training program is the primary qualifying factor required to initiate the board certification process. However, seven specialty boards have additional requirements beyond completion of an approved residency training program. Those specialty boards are Radiology, Obstetrics and Gynecology, Pathology, Physical Medicine and Rehabilitation, Plastic Surgery, Preventive Medicine, and Urology.

**4.. REQUIREMENT**

(a) Physicians appointed or hired to practice in a clinical setting must be board certified in the specialty area in which they will practice.

(b) The certifying bodies for purposes of this requirement are the ABMS for allopathic physicians and the BOS for osteopathic physicians.

(c) Physicians covered by the board certification requirement include those appointed or utilized as full-time, part-time, intermittent, consultant, attending, without compensation, on-station fee basis, on-station contract, or on-station sharing agreement basis.

(d) Physicians who are board certified are expected to maintain their certifications.

5. **EXCLUSIONS:** The board certification requirement does not apply in the following situations:

(a) Physicians on VHA rolls prior to July 1, 1997, provided they remain employed by VHA;

(b) Unless covered by M-2 or other internal VHA requirements, physicians who are in nonclinical care assignments in research, nonclinical education, or administrative positions, are not required to be board certified. However, if appointed after July 1, 1997, to a position that does not require board certification, but later reassigned to a clinical setting, the board certification requirement applies.

(c) Post graduate residents and fellows who are functioning within the scope of their training or fellowship program are excluded.

(d) Physicians who are not board certified, but have less than 4 years of clinical practice immediately following completion of postgraduate training may be appointed. However, appointments made under this exception may only be made on a temporary basis, not to exceed 3 years under 38 United States Code (U.S.C.) 7405. Consistent with the preceding, extensions of the temporary appointment beyond the 3-year period could be made for 1 additional year, provided the 4-year clinical practice limitation is not exceeded. Conversion to probationary appointments under 38 U.S.C. 7401 are appropriate upon board certification in the specialty area to which the physician is assigned.

(e) Physicians who are practicing in a clinical setting for which there is no primary specialty board. Such physicians are to be board certified in a relevant specialty area (e.g., physicians practicing in spinal cord injury could be board certified in physical medicine and rehabilitation, urology, internal medicine, psychiatry, surgery, neurology, etc.) and have other appropriate training and experience.

(f) Physician applicants who received written employment commitments prior to July 1, 1997, or physicians referred under a contract issued prior to July 1, 1997. As existing contracts expire, appropriate contract language is to be included that will ensure that only board certified physicians will be referred by contractors.

6. **WAIVERS:**

(a) Non board certified physician applicants who are not covered by an exclusion in paragraph e may only be employed upon written approval by the Chief Patient Care Services Officer.

(b) Facility waiver requests will be forwarded to the Chief Patient Care Services Officer (10NA/11) through the appropriate management channels and include the concurrence of the VISN Director.

(c) The Chief Patient Care Services Officer will review these requests when the following information is included: a justification for the waiver; a discussion of efforts to recruit a board certified physician; reasons the board certification requirement cannot be met; the credentialing and privileging folder of the prospective employee; and other relevant information the facility deems appropriate that would support the waiver. The request will include a specific plan and schedule by which the prospective employee will achieve board certification.

(d) The Chief Patient Care Services Officer may require facilities requesting exceptions to appoint physicians under 38 U.S.C. 7405 and to place time specific limitations on those appointments.