

STAFFING

1. REASON FOR ISSUE: To issue a Department of Veterans Affairs (VA) qualification standard for the appointment of Blind Rehabilitation Specialist (BRS), GS-601, in VA.

2. SUMMARY OF CONTENTS/MAJOR CHANGES

a. These changes are necessary for full conversion of the BRS occupation from the Title 5 competitive service employment system into VA's Title 38 Hybrid excepted service employment system in accordance with the "Veterans Health Care, Capital Asset and Business Improvement Act of 2003" (Public Law 108-170). Authority is given to the Secretary of the VA under 38 U.S.C. § 7402 to prescribe qualifications for occupations identified in 38 U.S.C. § 7401(3). The pages in this revision are to be inserted at the corresponding page numbers in part II of VA Handbook 5005. The Office of Personnel Management Group Coverage Standards for Professional Scientific Positions are no longer to be used to qualify blind rehabilitation specialists. These changes will be incorporated into the electronic version of VA Handbook 5005 that is maintained on the [Office of Human Resources Management Web site](#).

b. In order to apply this new qualification standard, all employees currently in a BRS position must receive an initial special boarding by the applicable Blind Rehabilitation Specialist Professional Standards Board. Initial special boarding should be completed no later than September 1, 2010. Additional guidance regarding the initial special boarding process may be found in [Human Resources Management Letter 05-06-06](#), Attachment B, dated August 8, 2006.

(1) For employees on VA rolls as of April 2, 2006, a promotion resulting from the initial special boarding will be effected retroactive to the beginning of the first pay period after all qualification requirements at the higher grade (including level of assignment) were met, but no earlier than April 2, 2006.

(2) For employees appointed after April 2, 2006, a promotion resulting from the initial special boarding will be effected retroactive to the beginning of the first pay period after all qualification requirements at the higher grade (including level of assignment) were met, but no earlier than the effective date of their appointment.

c. Significant provisions of this qualification standard include:

(1) Coverage section provides a brief description of the occupation requirements.

(2) Standard language and sections provided are basic requirements, grandfathering clauses, licensure, deviations, etc.

(3) Description of creditable experience included in the grade requirements.

(4) Description of typical assignments and knowledge, skills, abilities, and other competencies included at each grade level.

(5) Clarifies that Foreign Graduates must have proof of a minimum of a Bachelor's degree from an accredited college or university (or foreign equivalent, as verified through an independent credential evaluation company), with a specialization in Blind Rehabilitation.

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

4. RELATED DIRECTIVE: VA Directive 5005, Staffing.

5. RESCISSIONS: None.

CERTIFIED BY:

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

/s/
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Assistant Secretary for
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*Use in conjunction with the OPM Standard.

**[APPENDIX G41. BLIND REHABILITATION SPECIALIST
QUALIFICATION STANDARD
GS-601
Veterans Health Administration**

1. COVERAGE. The following are requirements for appointment as a blind rehabilitation specialist (BRS) in the Veterans Health Administration (VHA). This standard applies to all VHA BRSs, including Visual Impairment Services Team (VIST) Coordinator positions. The work requires the application of knowledge of the concepts, principles, and practices of blind and vision rehabilitation and the use of assessments and therapies to improve the independent function, quality of life and adjustment for patients who are blind or visually impaired. BRSs evaluate patients by interviews, tests, and measurements and use such findings solely and/or as a part of an interdisciplinary team to develop and implement blind and vision rehabilitation programs for individual patients. Instructional activities are directed toward achieving therapeutic objectives for patients who are blind and visually impaired in effective literacy and communication skills, orientation to and management of the environment, safe ambulation and travel, manual skills, proficiency and understanding in activities of daily living, pursuit of avocational and vocational skills, and adjustment to visual changes. **NOTE:** *Blind Rehabilitation Outpatient Specialist (BROS) Qualification Standard is contained in VA Handbook 5005, Part II, Appendix G42.*

2. BASIC REQUIREMENTS

a. **Citizenship.** Citizen of the United States. (Non-citizens may be appointed when it is not possible to recruit qualified citizens in accordance with VA Handbook 5005, Part II, Chapter 3, Section A, Paragraph 3g, this part.)

b. **Education**

(1) The individual must have earned a bachelor's degree in blind or vision rehabilitation, or related program in rehabilitation, special education or health care, from an accredited college or university; or, have a bachelor's degree in a healthcare field related to the position and obtained a certificate in the core curriculum in orientation and mobility, vision rehabilitation therapy or low vision therapy from an accredited college or university. This education must have included supervised practice.

(2) Foreign Graduates must have proof of a minimum of a Bachelor's degree from an accredited college or university (or foreign equivalent, as verified through an independent credential evaluation company), with a specialization in Blind Rehabilitation.

c. **Certification.** Required at GS-11 and above.

(1) Applicants must possess at least one active, current, full and unrestricted certification to be eligible for appointment. Certification must be granted by the Academy for Certification of Vision Rehabilitation & Education Professionals (ACVREP), or another equivalent, related professional credential in special education, rehabilitation or health care. If all certifications are impaired, the individual is ineligible for appointment in VA. **NOTE:** *The ACVREP administers three certification*

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programs: Low Vision Therapy, Orientation and Mobility, and Vision Rehabilitation Therapy. Once certification candidates are approved, they receive an official letter of acceptance, a certificate, and a logo pin. They may then use the designation for the certification they hold (as listed in subparagraph (2) below

(2) BRSs who provide the following service must obtain certification granted by ACVREP as follows:

(a) Orientation and mobility training - Certified Orientation and Mobility Specialists (COMS[®]).

(b) Communication and daily living therapy (formerly Rehabilitation Teaching) - Certified Vision Rehabilitation Therapists (CVRT[®]).

(c) Low vision therapy - Certified Low Vision Therapists (CLVT[®]).

(3) BRSs who are VIST Coordinators may be drawn from traditional blind/vision rehabilitation backgrounds, and also from counseling backgrounds such as social work, vocational rehabilitation counseling, etc. VIST Coordinators must be credentialed/certified through:

(a) Any certification via the Academy for Certification of Vision Rehabilitation and Education (ACVREP), **or**

(b) Individuals appointed on the basis of being licensed as a Social Worker must be licensed or certified by a state to independently practice social work at the master's degree level. A doctoral degree in social work may not be substituted for the master's degree in social work. If appointed as a VIST Coordinator, Social Workers are appointed to the GS-601 series, but must still maintain a full, valid and unrestricted independent license or certification to remain qualified for employment, **or**

(c) Certification via the Commission on Rehabilitation Counselor Certification (Certified Rehabilitation Counselor, CRC), **or**

(d) Individuals appointed on the basis of being licensed in another health care occupation must be licensed or certified by a state to independently practice in their field. If appointed as a VIST Coordinator, such individual will be appointed to the GS-601 series, but must still maintain their full, valid and unrestricted independent license or certification in their occupation to remain qualified for employment. Examples of occupations may include but not limited to Occupational Therapists and Psychologists.

d. Loss of Credential

(1) Once certified, a BRS must maintain a full, valid and unrestricted independent certification to remain qualified for employment. Loss of certification **will** result in removal from the BRS occupation and **may** result in termination of employment.

(2) A BRS who has, or has ever had his/her certification revoked, suspended, denied, restricted, limited, or issued/placed in a probationary status may be appointed only in accordance with the provisions in VA Handbook 5005, Part II, Chapter 3, Section B, Paragraph 16 of this part.

(3) If hired on the basis of a social worker or rehabilitation counseling background, a VIST Coordinator must still maintain a full, valid and unrestricted independent license or certification to remain qualified for employment.

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

(1) Such employees may be reassigned, promoted up to and including the full performance (journey) level, or changed to lower grade within the occupation.

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

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

(4) If a BRS who was retained under this provision leaves the occupation, the employee loses protected status and must meet the full VA qualification standard requirements in effect at the time of reentry to the occupation.

f. **Non-Certified BRS Hired Temporary.** Non-certified BRSs may be given a temporary appointment to positions at or above the GS-11 level not to exceed two years under the authority of 38 U.S.C. 7405(c)(2). Non-certified employees appointed temporarily as BRSs may not be converted to an appointment at or above the GS-11 level under 38 U.S.C. 7401(3) without obtaining a recognized certification.

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

h. **English Language Proficiency.** BRSs must be proficient in spoken and written English as required by VA Handbook 5005, Part II, Chapter 3, Section A, Paragraph 3j.

3. GRADE REQUIREMENTS

a. Definitions

(1) **Affiliated.** Means affiliated for the purposes of health care training.

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(a) **Knowledge of Professional Blind Rehabilitation Practice.** To be creditable, the experience must demonstrate possession of the knowledge, skills, abilities, and other characteristics associated with current blind and vision rehabilitation practice as outlined in the current scope and standards of practice for blind and vision rehabilitation. One or more of the following may have evidenced this:

1. The equivalent of 1 year of active practice. Active practice means paid/non-paid employment (VA or Non-VA) as a BRS or BROS.

2. Academic course work leading to an advanced degree in blind or vision rehabilitation or related therapeutic intervention program.

(b) Quality of Experience

1. Work as a graduate BRS directly related to the position to be filled; and

2. The work to be credited is at a level comparable to BRS experience at the same or next lower grade level than the grade level being considered for placement.

3. For all assignments above the full performance level, the higher level duties must consist of significant scope, administrative independence, complexity (difficulty) and range of variety as described in this standard at the specified grade level and be performed by the incumbent at least 25% of the time.

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

(4) **Graduate Education.** Graduate degrees may be substituted for experience through the GS-11 level. Graduate degrees must be from a college or university that was regionally or nationally accredited at the time the candidate completed the program. To substitute the graduate degree, it must have been completed after the individual met the basic requirements for appointment.

(5) **Content Specialty.** Specialized content areas of blind and vision rehabilitation include, but are not limited to, orientation and mobility, low vision therapy, vision rehabilitation therapy, manual skills, technology and computer access for the people who are visually impaired, and case-management for disability due to blindness.

b. **Grade Determinations.** In addition to the basic requirements, the following criteria must be used when determining the appropriate grade assignment of candidates. This criteria is consistent with the 2 grade interval structure for professional/scientific professions found in VA Handbook 5005, Part II, Appendix G17.

(1) **GS-5 (Entry Level).** None beyond the basic requirements. No certification required at this level.

(2) **GS-7**

(a) **Certification.** No certification is required at this level.

(b) **Education and Experience.** In addition to meeting the basic requirements, completion of one year of experience equivalent to the next lower grade level or one year of progressively higher level graduate education in a field directly related to the position. In addition, the candidate must fully demonstrate the following knowledge, skills and abilities (KSAs):

(c) **Demonstrated KSAs**

1. Knowledge of blind/vision rehabilitation functional assessment procedures, practices and treatment goals.

2. Knowledge of vision-related physiology, anatomy, optics, neurology, pathological conditions and vision function.

3. Ability to analyze assessment results and make recommendations for a basic treatment plan.

4. Knowledge of blind/vision rehabilitation therapeutic techniques and prosthetic devices.

5. Ability to provide therapeutic interventions under general supervision.

6. Ability to communicate orally and in writing.

(d) **Assignment.** Individuals at this grade level serve as developmental staff BRSs in the content specialties and operate under general supervision. They are responsible for intake, assessment, planning for rehabilitation, intervention and follow-up. They receive guidance from more experienced staff members for both routine and the complex patients.

(3) **GS-9**

(a) **Certification.** No certification is required at this level.

(b) **Education and Experience.** In addition to meeting the basic requirements, completion of one year of experience equivalent to the next lower grade level or completion of at least two full years of progressive graduate education or a master's degree in a field directly related to the position. In addition to the KSAs in subparagraph 2(c) above, the candidate must demonstrate the following KSAs:

(c) **Demonstrated KSAs**

1. Knowledge of policies and procedures of the blind/vision rehabilitation service.

2. Knowledge of administration and interpretation of assessments and evaluations in blind/vision rehabilitation.

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3. Ability to develop a basic written blind/vision rehabilitation plan from assessment results and develop more complex plans with consultation from supervisor.

4. Skill in instructing patients and families in a meaningful rehabilitation program and applying blind/vision rehabilitation therapeutic techniques.

5. Ability to recommend appropriate blind/vision prosthetic devices for patients within the scope of practice.

6. Ability to serve as team coordinator for assigned patients during their rehabilitation programs.

(d) **Assignment.** Individuals at this grade level serve as staff BRSs. They are responsible for intake, assessment, planning for rehabilitation, intervention and follow-up in the content specialties. They receive guidance from experienced staff members for the most complex patients.

(4) **GS-11 (Full performance level for BRSs who are not VIST Coordinators)**

(a) **Certification.** Required at this level and above.

1. **Staff BRS.** Candidates must meet the certification requirements in paragraph 2c(1) above. BRS (GS-11) must have one certification from ACVREP or a related, equivalent, professional certification.

2. **VIST Coordinators.** Candidates must meet the certification requirements in paragraph 2c(3) above. BRS who are VIST Coordinators may be drawn from traditional blind/vision rehabilitation backgrounds, and also from counseling backgrounds such as social work, vocational rehabilitation counseling, etc. VIST Coordinators may be credentialed/certified through:

a. Certification via the ACVREP, or

b. Licensure via the Social Worker Licensure Board, or

c. Certification via the Commission on Rehabilitation Counselor Certification (CRC), or

d. Equivalent, related, relevant professional credential in counseling or rehabilitation.

(b) **Education and Experience.** In addition to meeting the basic requirements, completion of 1 year of progressively complex experience equivalent to the next lower grade; or 3 years of progressively higher level graduate education leading to a Doctoral Degree; or Doctoral Degree in Blind Rehabilitation or a directly related field. In addition to meeting the KSAs described at the GS-9 level, the candidate must fully demonstrate the following professional KSAs:

(c) **Demonstrated KSAs**

1. Knowledge and understanding of highly specialized complex evaluations and diagnostic tests and procedures of blind/vision rehabilitation.

2. Ability to properly assess a wide variety of patients having diverse and multiple disabilities to make recommendations for blind/vision rehabilitation therapeutic interventions.

3. Ability to write a blind/vision rehabilitation plan that includes evaluation information from multiple disciplines with observable, measurable goals and that identifies specific outcomes.

4. Knowledge of teaching methods and learning principles.

5. Ability to employ interventions, unusual motivational techniques and coordinate treatment with other professionals to achieve outcomes of the rehabilitation plan.

6. Ability to recommend appropriate blind/vision rehabilitation prosthetic devices for patients within scope of practice, making adaptations and modifications as required.

7. Ability to plan, direct, and distribute work assignments to volunteers, assistants and, interns and/or BRSs at lower grade levels and perform assigned mentoring duties for staff, students, and interns.

(d) **Assignments.** This is the full performance level for BRSs who are not VIST Coordinators. Typical assignments at this grade level include but are not limited to the following:

1. **Staff BRS.** In addition to providing services to Veterans described at the GS-9 level, individuals at this level have duties that typically include the following: serving as a consultant to blind/low vision rehabilitation and other medical center staff in evaluating and treating patients in the specialty area; serving as a mentor to other therapists who are evaluating and treating patients in the content specialty or program area; serving as internship supervisor to students who are completing their supervised practice, providing in-service and clinical training programs in the content specialty or program area.

2. **Sole Practice BRS.** Individuals in this assignment may serve as the only BRS at a medical center or an outpatient clinic and are responsible for independent decision-making and independent care. Individuals in this assignment serve as a member of or as consultant to a specialty care team.

3. **VIST Coordinators.** Individuals in this assignment serve in a developmental capacity as case management professionals whose knowledge must be broad ranging and include not only the medical conditions and rehabilitation of Veterans who are blind and visually impaired, but also knowledge of their compensations and benefits, as well as VA and non-VA rehabilitation programs. In addition, VIST Coordinators work with Veterans and their families in readjustment counseling.

(5) **GS-12 (Full performance level for VIST Coordinators)**

(a) **Certification.** BRS must meet the certification requirements in paragraph 2c(1) and (2) above. VIST Coordinators must meet the certification requirements in paragraph 2c(3) above.

(b) **Experience.** In addition to meeting the basic requirements, completion of a minimum of 1 year of progressively complex experience equivalent to the next lower grade level. In addition to meeting the

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KSAs described at the GS-11 level, the candidate must fully demonstrate the KSAs required for the specific assignment.

(c) Demonstrated KSAs

1. Ability to independently develop, plan, and administer complex treatment programs.
2. Ability to act as a subject matter expert in the blind/vision rehabilitation field and as consultant, supervisor and/or mentor in evaluating and treating patients in specialty or program areas.
3. Ability to coordinate, motivate, and effectively manage staff and/or committee members to include organizing work, setting priorities, and delegating tasks and responsibilities.
4. Ability to disseminate appropriate information through various media as a consultant or mentor.
5. Skill in interpersonal relationships in dealing with patients, employees, other team leaders, managers and other stakeholders.
6. Ability to identify team group dynamics, objectively observe, and modify behaviors.
7. Ability to apply decision-making principles to adjust programs on a day-to-day basis, to develop short term and long range goals, and to plan for future utilization of resources.

(d) Assignments. Candidates may be appointed to one of the following assignments:

1. Sole Practice BRS. Individuals in this assignment serve as the only BRS at a medical center or an outpatient clinic and are responsible for a high level of decision-making and are responsible for independent care. Individuals in this assignment serve as members of or consultants to specialty care teams.

2. VIST Coordinators. GS-12 is the full performance level for a VIST Coordinator. Individuals in this assignment will demonstrate mastery abilities in readjustment counseling, coordinating access to services, assuring adequate compensation and benefits, and must make complex negotiations with the medical and benefit systems as well as non-VA service delivery systems. VIST Coordinators convene and manage a local medical center Visual Impairment Services Team that meets regularly to influence and make recommendations regarding the best programs for Veterans who are visually impaired. VIST Coordinators at the full performance level manage a support group for blinded Veterans, publish a VIST newsletter and provide community presentations to professional and lay groups to publicize the program. They plan and execute programs to locate blinded Veterans previously unknown to Blind Rehabilitation Service through outreach in their medical centers, in the community and in other service delivery systems such as vocational rehabilitation, community services for the visually impaired, community eye care, etc. They work closely with the BRS national consultants and VA central office staff to continuously upgrade and improve their practice and programs.

3. Supervisory BRS. Functions in a supervisory position for a multidisciplinary professional staff and as a subject matter expert, assuring that a complete range of skills are available for a diverse patient

population at active, affiliated blind rehabilitation inpatient centers or outpatient clinics. Has full supervisory responsibility for staff that includes lower level BRS positions. At this level, the blind or vision rehabilitation program typically includes a variety of specialties, an extensive educational program, and involvement in research activities. Additional activities include the evaluation of new products and equipment, and making recommendations concerning upgrades/new purchases that would improve operations. Other supervisory responsibilities include informing higher level management of anticipated staffing variances and recommending promotions, reassignments, or other personnel actions such as retention or release of probationary employees as well as recommending recognition of superior performance when applicable.

(6) **GS-13**

(a) **Certification.** Candidates must meet the credentialing/certification requirements in paragraph 2c(1) and 2c(2) above.

(b) **Experience.** In addition to meeting the basic requirements, completion of 1 year of experience as a BRS equivalent to the next lower grade level. In addition to meeting the KSAs described at the GS-12 level, the candidate must fully demonstrate the KSAs required for the specific assignment and demonstrate the potential to acquire the assignment-specific KSAs as indicated by an asterisk (*).

(c) **Assignments.** BRSs at this grade level may be appointed to one of the following assignments:

1. National Program Consultant. BRS National Program Consultants (NPCs) are responsible for support, oversight and communication among the various local, regional, and national levels of VHA Blind Rehabilitation Service. They create and implement the didactic models for training, perform ongoing review and evaluation of services, and report findings. NPCs articulate findings from data and research for programmatic quality assurance. The following KSAs are required:

a. Ability to balance responsibilities and to work with great autonomy.

*b. Ability to set priorities, delegate tasks, meet multiple deadlines, analyze organizational problems, and develop and implement effective solutions.

*c. Ability to monitor and report on the status and progress of work, evaluate program quality to ensure that methods, deadlines, and quality have been met; and make adjustments to accomplish the workload in accordance with established priorities.

d. Ability to analyze and use data effectively to manage workload, quality, performance, and productivity within the section.

e. Ability to utilize evidence-based practices and clinical practice guidelines in a professional area, and to guide BRS professionals in applying these tools.

f. Ability to apply and to instruct professionals in current practice, literature and research to enhance the continuum of care in blind/vision rehabilitation services.

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g. Ability to provide consultation and promote best practice procedures in blind/vision rehabilitation nationally; and serve as a national leader in the field of blind/vision rehabilitation.

h. Ability to articulate and communicate to individuals and groups from different backgrounds the assignment, project, problem to be solved, actionable events, and objectives, as well as advise on work methods, practices, and procedures.

i. Ability to serve as coach, facilitator, and/or negotiator in coordinating Blind Rehabilitation Service initiatives and consensus building activities among individuals with widely divergent backgrounds, interests, and points of view.

2. Assistant Chief. Assistant chiefs serve as full assistants to Blind Rehabilitation Center (or equivalent program) chiefs and share a full scope of delegated managerial responsibilities. Assistant chiefs share full responsibility for all professional areas in a service-level department with the service chief. Assistant chiefs exercise supervision, administrative management, and direction of both professional areas in a blind rehabilitation center or clinical program. Assistant chiefs have responsibility for general and/or technical supervision of key clinical and training programs within the service, and overall technical and administrative oversight of BRSs. The following KSAs are required:

a. Ability to balance responsibilities and to work with great autonomy.

b. Ability to organize work, set priorities, delegate tasks, meet multiple deadlines, analyze organizational problems, and develop and implement effective solutions.

c. Ability to analyze and use data effectively to manage workload, quality, performance, and productivity within the section, and to develop and administer systematic internal reviews to ensure conformance with local and national policies as well as accreditation standards.

d. Ability to provide technical expertise, supervise, motivate, and effectively manage a diverse clinical staff.

*e. Skill in assessing qualifications and abilities of current and prospective employees.

f. Ability to develop productivity standards applicable to a blind rehabilitation center or equivalent clinical program.

*g. Ability to adapt to new and changing work conditions, staffing, and contingencies.

3. Service Chief. Service chiefs at this grade level have overall responsibility for a blind rehabilitation center or its equivalent clinical program. These individuals have responsibility for general supervision of clinical and/or training programs, and overall technical and administrative oversight for operations within the service. Service chiefs develop, organize, direct, manage, supervise, control, and implement policies and procedures for complex service-level departments. They have overall responsibility for planning, assessing, and evaluating programs to ensure proper coordination between care delivered by the service and the overall delivery of health care within the facility. Service chiefs make decisions that affect section supervisors and/or assistant chiefs (if applicable), clinical and clerical

staff, and other resources associated with the department, with great autonomy. Service chiefs exercise supervision, administrative management, and direction of all professional areas in a unified blind/vision rehabilitation service. The following KSAs are required:

a. Ability to supervise, motivate, and manage effectively a diverse clinical staff applicable to a small blind/vision rehabilitation center; skill in assessing qualifications and abilities of current and prospective employees.

*b. Comprehensive knowledge of, and ability to, apply administrative and human resources policies effectively.

c. Demonstrated ability to organize work, set priorities, delegate tasks and responsibilities, and manage and direct the work of others to accomplish program goals and missions.

d. Ability to adapt to new and changing work conditions, contingencies, and staffing.

e. Ability to translate management goals and objectives into well-coordinated and controlled service operations through technical direction, review, analyses and evaluation of program components including productivity, and ability to manage budgets for a blind/vision rehabilitation center.

f. Ability to provide consultation and promote best practice procedures in blind/vision rehabilitation nationally; and serve as a national leader in the field of blind/vision rehabilitation.

(7) **GS-14**

(a) **Certification.** Candidates must meet the credentialing/certification requirements in paragraph 2c(1) and 2c(2) above.

(b) **Experience.** In addition to meeting the basic requirements, completion of 1 year of experience as a BRS equivalent to the next lower grade level. In addition, the candidate must demonstrate the KSAs required for the assignment and demonstrate the potential to acquire the assignment-specific KSAs as indicated by an asterisk (*).

1. Ability to supervise, motivate, and manage effectively a diverse clinical staff applicable to a large blind rehabilitation center or equivalent program.

2. Ability to assess qualifications and abilities of current and prospective employees and manage large budgets.

3. Ability to establish and monitor productivity standards and production and performance priorities and to apply administration and human resource policies effectively.

4. Ability to organize work, set priorities, delegate tasks and responsibilities and to manage and direct the work of others to accomplish program goals and missions.

5. Ability to accommodate to new and changing work conditions and contingencies and staffing.

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*6. Ability to advance scientific methods in the oversight and management of highly creative, innovative, and complex blind rehabilitation research; ability to convey scientific concepts and methodological principles to individuals with diverse levels of technical expertise.

7. Ability to provide consultation and promote best practice procedures in blind/low vision rehabilitation nationally, and serve as a national leader in the field of blind/low vision rehabilitation.

(c) **Assignment.** BRS at this grade level demonstrate exceptional achievement, professional competence, and leadership and are appointed to service chief positions that have broad and overall responsibility for larger blind rehabilitation centers or their equivalent clinical programs. They manage substantive blind rehabilitation centers that deliver specialized, complex, professional services. They have responsibility for general supervision of clinical and/or training programs, and overall technical and administrative oversight for operations within the service. They have responsibility for overseeing research programs that evaluate effectiveness and efficiency in service delivery, provide evidence to inform best practice, and evaluate and recommend technology for the entire blindness program. Service chiefs make decisions with great autonomy that affect section supervisors, assistant chiefs, clinical and clerical staff, and other resources associated with the department. Service chiefs exercise supervision, administrative management, and direction of professional areas in a blind rehabilitation center or equivalent clinical program.

4. DEVIATIONS

a. The appointing official may, under unusual circumstances, approve reasonable deviations to the grade determination requirements for BRSs in VHA whose composite record of accomplishments, performance, and qualifications, as well as current assignments, warrant such action based on demonstrated competence to meet the requirements of the proposed grade.

b. Under no circumstances will the educational requirements be waived. Under no circumstances will the certification requirements be waived, except as provided in paragraph 2f above.

c. The placement of individuals in grade levels not described in this standard must be approved by the Under Secretary for Health, or designee, in VHA Central Office.

Authority: 38 U.S.C. §§ 7402, 7403.]