

**OVERSIGHT AND IMPROVEMENT OF THE  
PART-TIME PHYSICIAN PROGRAM**

- 1. REASON FOR ISSUE.** This Veterans Health Administration (VHA) Directive replaces VHA Directive 2003-001, which expired on January 31, 2008. The VHA policies and procedures in this Directive supplement VA policies found in VA Handbooks 5011, 5005, and 5007, as related to the monitoring of time and attendance for part-time Title 38 physicians.
- 2. SUMMARY OF CONTENT/MAJOR CHANGES.** This Directive updates and clarifies the VHA policy on time and attendance for part-time physicians with regular work hours and adjustable work hours; it also establishes procedures in Attachment A for oversight and improvement of the part-time physician time and attendance program.
- 3. RELATED ISSUES.** VA Handbook 5011/12, Part II, VA Handbook 5005/57, and VA Handbook 5007/28.
- 4. RESPONSIBLE OFFICE.** The Workforce Management & Consulting Office (10A2A) is responsible for the contents of this Directive. Questions may be directed to 202-461-7263.
- 5. RESCISSIONS.** None.
- 6. RECERTIFICATION.** This VHA Directive is scheduled for recertification on or before the last working day of November, 2018.

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**DISTRIBUTION:** E-mailed to the VHA Publications Distribution List on 12/02/13.

## OVERSIGHT AND IMPROVEMENT OF THE PART-TIME PHYSICIAN PROGRAM

**1. PURPOSE:** This Veterans Health Administration (VHA) Directive supplements Department of Veterans Affairs (VA) policies found in VA Handbooks 5011, 5005, and 5007, as related to the use and oversight of the part-time physician program. **AUTHORITY:** 38 United States Code (U.S.C.) 7304 and 7421.

### 2. BACKGROUND:

a. Originally, VHA Directive 2003-001 was issued to provide official policy and procedures for addressing part-time physician time and attendance issues in response to an Office of the Inspector General (OIG) audit. This new Directive provides the policy for accountability systems to ensure the effectiveness of the part-time physician program.

b. Part-time physicians may work either fixed or adjustable work hour tours. Part-time physicians whose VA or non-VA patient care, research, education or administrative duties routinely make it difficult or inappropriate for them to adhere to a regular tour of duty every pay period, can be authorized to work adjustable work hours provided the total work requirement established for each bi-weekly pay period is met, and adjustments do not interfere with VA's ability to meet its patient care and other VA work requirements. An adjustable work hour arrangement may include both fixed and variable components; a part-time physician may be placed on an entirely variable work tour of duty if this is deemed to be appropriate. **NOTE:** *Policies and procedures on adjustable work hours may be found in VA Handbook 5011/12, Part II, Appendix I.*

**3. POLICY:** It is VHA policy to use the services of qualified physicians on a part-time basis when necessary to alleviate recruitment difficulties and in all cases in which VHA work requirements do not support employment on a full-time basis. VHA has an obligation to ensure the appropriate use and oversight of the part-time physician program. To meet this obligation, VHA utilizes appropriate oversight procedures that balance institutional accountability and effort. The monitoring of the part-time physician program should be implemented in a risk-based, accountable structure, with clear and transparent decision rules.

### 4. RESPONSIBILITIES:

a. **Deputy Under Secretary for Health for Operations and Management (10N):** The Deputy Under Secretary for Health for Operations and Management, or designee, is responsible for ensuring the oversight of the VHA part-time physician program.

b. **Veterans Integrated Service Network (VISN) Directors:** Each VISN Director, or designee, is responsible for ensuring facility compliance with this Directive, and for incorporating such compliance into performance contracts of appropriate subordinate employees.

c. **Facility Directors:** Each facility Director, or designee, is responsible for:

(1) Ensuring that this Directive is applied in conjunction with VHA policies and procedures (see VA Handbook 5011, Part II, Chapter 3, Entitled “Establishment of Workweeks, Tours of Duty, and Work Schedules for Employees Appointed to Title 38 Positions” and VA Handbook 5011/12, Part II, Appendix I, “Prescheduled Part-Time Tours and the Utilization of Adjustable Work Hours (Title 38)”) and in conjunction with VA time and attendance procedures.

(2) Ensuring that all supervisors and employees meet their responsibilities and commitments to VA with respect to time and attendance procedures; and for taking corrective action if and when necessary.

(3) Establishing policies and procedures to implement this Directive, monitoring compliance in accordance with the provisions of Attachment A, and meeting any local labor management responsibilities.

(4) Ensuring decisions concerning utilization of staff on a less than full-time basis are related to VA needs and work requirements. Part-time physicians with fixed work hours and those who do not routinely need to adjust their tours should not be on adjustable work hours.

d. **Facility Chiefs of Staff:** Each facility Chief of Staff is responsible for:

(1) Providing the facility Director with assistance in carrying out the provisions of this Directive and applicable time and leave policies for part-time physicians.

(2) Reviewing the utilization of all part-time physicians on a regular and not less than yearly basis to ensure that VA needs or staffing requirements are met. This review should take place in conjunction with the appropriate service chief on a yearly basis as provided in Appendix A of this Directive. *NOTE: In addition to part-time appointments, other employment authorities, such as intermittent work schedules, Non-VA appointments, or dual appointments, can be used when the demand for part-time physicians varies over time, as defined in VA Handbook 5011/12, Part II, Appendix I.*

(3) Ensuring that documentation of this review is filed consistent with records control procedures.

(4) Ensuring compliance with the policies and procedures used to implement and monitor time and attendance in accordance with the provisions of Appendix A.

e. **Facility Service Chiefs or Equivalent Individual(s):** Facility Service Chiefs or equivalent are responsible for:

(1) Monitoring compliance with the provisions of this Directive and for taking or initiating disciplinary action where appropriate.

(2) Negotiating and maintaining current written agreements with part-time physicians concerning VA’s expectations and employee’s responsibilities, including, where appropriate,

agreements on the amount of time allotted for clinical, administrative, research, and educational activities (mix of duties). *NOTE: Written agreements are only required when physicians have duties other than clinical activities.*

(3) Reviewing written agreements for part-time physicians at the time of the biennial review process for credentialing and privileging; every 2 years or at the time of a substantial change ( $\geq$  2/8 effort increase or decrease over a 12-month period) in clinical duties, and updating these agreements as necessary to reflect the current mix of duties.

(4) Ensuring that employees on adjustable work hours request the appropriate type of leave, travel orders, or authorized absence whenever they are absent from scheduled duty or when they do not meet their established work hour requirements.

(5) Evaluating the need for continuation of an adjustable tour arrangement, or modification of the service level agreement on a quarterly basis to determine if there are consistent patterns of hours worked by a physician that are either significantly above or significantly below the service level expectation; and keeping the physician informed of issues that may result in failure to authorize payment to the physician, or the initiation of collection processes (respectively).

(6) Ensuring that a part-time physician will not be authorized to work or be compensated for hours exceeding 1820 (equivalent to a 7/8 appointment) in a calendar year.

(7) Ensuring that any and all changes to service level expectation contracts are completed on a timely basis and signed by the approving official prior to implementation.

(8) Assisting the facility Chief of Staff in oversight and verification procedures.

(9) Informing the Human Resources Officer and Chief Fiscal Officer when severe discrepancies (over or under) in the service level expectation are occurring.

(10) Providing accurate and timely information to timekeepers for all approved tour of duty changes and leave charges on the part-time physician's timecard.

(11) Certifying accurate part-time physician timecards.

(12) Establishing employee work schedules and adjusting those schedules to meet VA patient care needs.

(13) Orienting part-time physicians (through a written memorandum and a copy of this policy) when hired of their responsibilities to VA, including their responsibilities with respect to time and attendance.

f. **Part-time Physicians:** All part-time physicians are responsible for knowing and complying with VA policies and procedures on time and attendance and for fully meeting their professional commitments to VA. In addition:

(1) Part-time physicians on Fixed Hours are responsible for:

(a) Complying with all VA time and attendance policies; and

(b) Being present during their regular tour of duty performing assigned VA work unless absent on approved leave, travel authority or authorized absence. Approved leave should be requested in advance, if possible.

(2) Part-time physicians on Adjustable Work Hours are responsible for:

(a) Complying with all policies and procedures associated with adjustable work hours (see VA Handbook 5011/12, Part II, Appendix I);

(b) Requesting changes to service level expectations on a timely basis and understanding changes are not effective until approved by the appropriate approving official;

(c) Requesting and receiving approval for the appropriate type of leave whenever absent from scheduled duty or when not able to meet established fixed work hour or adjustable work hour requirements;

(d) Understanding the financial obligation which results when there is a failure to meet service level expectations; and

(e) Understanding that VA might not pay for adjustable work hours in excess of the service level agreement. No more than 1820 hours can be paid in a calendar year.

g. **Chief, Human Resources Management.** The Chief, Human Resources Management is responsible for:

(1) Providing advice and assistance to management officials and employees regarding VA work schedule requirements for part-time physicians, including adjustable work hours; and

(2) Working with Fiscal/Payroll to ensure that supervisors have received required training related to time and attendance procedures on a one-time basis. *NOTE: Additional training may be indicated if time and leave discrepancies are found.*

h. **Chief, Fiscal, Payroll Officer, or equivalent individual.** The Chief, Fiscal, Payroll Officer, or equivalent individual is responsible for:

(1) Ensuring desk audits of all timekeepers are conducted on a semi-annual basis or more frequently, where indicated; and

(2) Working with the Human Resources Office to ensure that supervisors have received one-time required training relating to time and attendance procedures.

i. **Timekeepers.** Timekeepers are responsible for posting appropriate tour of duty changes and leave charges on the part-time physician's timecard, at the direction of the supervisor, for those part-time physicians on a fixed tour, and for entering leave charges for part-time physicians on an adjustable tour if the physician cannot enter their leave into the Electronic Subsidiary Record by the end of the pay period.

## 5. REFERENCES:

a. Title 38 U.S.C. Sections 7304 and 7421. <http://uscode.house.gov/download/pls/38C73.txt> and <http://uscode.house.gov/download/pls/38C74.txt>

b. VA Handbook 5011, Part II, Chapter 3. <http://vaww1.va.gov/ohrm/Directives-Handbooks/Documents/5011.doc#PtIICh3> *NOTE: This is an internal Web site and is not available to the public.*

c. VA Handbook 5011/12, Part II, Appendix I. <http://vaww1.va.gov/ohrm/Directives-Handbooks/Documents/5011.doc#PtIIAppI> *NOTE: This is an internal Web site and is not available to the public.*

d. VA Handbook 5011/12, Part II, Appendix J. <http://vaww1.va.gov/ohrm/Directives-Handbooks/Documents/5011.doc#PtIIAppJ> *NOTE: This is an internal Web site and is not available to the public.*

e. VA Handbook 5011/12, Part II, Appendix K. <http://vaww1.va.gov/ohrm/Directives-Handbooks/Documents/5011.doc#PtIIAppIK> *NOTE: This is an internal Web site and is not available to the public.*

f. VA Handbook 5005/57, Part II, Chapter 3, Section A, Paragraph 3. <http://vaww1.va.gov/ohrm/Directives-Handbooks/Documents/5005.doc#PtIIch3secA> *NOTE: This is an internal Web site and is not available to the public.*

g. VA Handbook 5007/28, Part II, Chapter 2 <http://vaww1.va.gov/ohrm/Directives-Handbooks/Documents/5007.doc#partIIch2> *NOTE: This is an internal Web site and is not available to the public.*

h. Title 38 U.S.C. 8153 <http://uscode.house.gov/download/pls/38C81.txt>

## 6. DEFINITIONS:

a. **Part-Time Physician.** A part-time physician is a physician who works a scheduled tour of duty on less than a full-time basis. The physician may be required to perform duty on an unscheduled basis in addition to the regularly scheduled tour of duty. Part-time physicians appointed under 38 U.S.C. 7405(a)(1)(A) may also be placed on Adjustable Work Hours.

b. **Adjustable Work Hours.** Adjustable work hours refers to a program established to accommodate varying VA needs and part-time VA physicians who have VA or non-VA patient

care, research, educational or administrative responsibilities that make adherence to the same regularly scheduled tour of duty every pay period difficult or inappropriate.

c. **Fixed Work Hours.** Fixed work hours are an agreed upon regular tour of duty that remains the same, on a bi-weekly basis. The physician must be on duty at the medical facility (or alternate work site) to meet his or her obligations during the fixed work hours, unless the physician is on leave, authorized travel or authorized absence.

d. **Administrative Workweek.** An administrative workweek is a period of seven consecutive calendar days, Sunday through Saturday.

e. **Present.** Part-time physicians are required to be “present” unless they are absent on approved leave, travel authority or authorized absence. Approved leave should be requested in advance, if possible. To be considered present, part-time physicians on adjustable work hours must be engaged in assigned VA duties as outlined in VA Handbook 5011/12, Part II, Appendix I.

f. **Tours of Duty.** Tours of duty are the specific days and times during the bi-weekly pay period that employees are scheduled to work or otherwise be accounted for through the use of approved leave, travel authorization or authorized absence. Tours of duty are established to meet VA patient care and other work requirements and must be scheduled in advance of the administrative workweek.

g. **Authorized Absence.** Authorized absence without charge to leave may be given when the activity is considered to be of substantial benefit to VA in accomplishing its general mission or one of its specific functions, or when the activity will clearly enhance an employee's ability to perform the duties of the position.

**OVERSIGHT AND IMPROVEMENT OF THE  
PART-TIME PHYSICIAN PROGRAM**

The Veterans Health Administration (VHA) has an obligation to ensure the appropriate use and oversight of part-time physicians (PTP). To meet this obligation, VHA utilizes a system of oversight procedures that balance institutional accountability and effort. Monitoring is implemented in a risk-based accountable structure, with clear and transparent decision rules.

## 1. MONITORING

### a. **At Hire:**

(1) The Service Chief or designee (through a written memorandum and a copy of this policy) orients PTP when hired of their responsibilities to the Department of Veterans Affairs (VA), including their responsibilities with respect to time and attendance.

(2) A written agreement is negotiated, signed, and filed, that sets out the mix of VA duties to include research, education, clinical or administrative. *NOTE: Written agreements are only required when physicians have duties other than clinical activities.*

### b. **Quarterly Reviews:**

(1) Each quarter, the Service Chief, or designee, will verify time and attendance of all PTPs on adjustable work hours, using the electronic Summary Form for Part-Time Physicians Tracking Report, to meet monitoring requirements. The form is located at <http://vssc.med.va.gov/ptphysicians/main.asp>.

(2) The monitoring will be conducted to ensure the time and attendance records reflect actual attendance for PTPs on adjustable work hours via the methods found in VA Handbook 5011/12, Part II, Appendix J. This monitoring review will also determine appropriate baseline levels to validate time and attendance.

(3) The Service Chief must evaluate the need for continuation of an adjustable tour arrangement or modification of the service level agreement on a quarterly basis to determine if there are consistent patterns of hours worked by a physician that are either significantly above or significantly below the service level expectation; keep the physician informed of these issues that may result in failure to authorize payment to the physician, or the initiation of collection processes (respectively). The Service Chief ensures that any and all changes to service level expectation contracts are completed on a timely basis and signed by approving official prior to implementation.

### c. **Yearly:**

(1) The facility Chief of Staff reviews the utilization of all PTPs on a regular (minimum yearly) basis to ensure that VA needs or staffing requirements are met. This review takes place

in conjunction with the appropriate Service Chief and should specifically include answers to the following questions:

- (a) Is there still a VA need for this PTP?
  - (b) Is the assigned tour of duty for this PTP (fixed, adjustable, etc.) still appropriate?
  - (c) Has this PTP been conscientious about meeting their VA obligations and assignments?
  - (d) Has this PTP fulfilled VA assignments in a productive manner (i.e., for a clinical assignment, has the PTP cared for the expected number of VA patients or performed the appropriate numbers of procedures)?
  - (e) For educational assignments or trainee supervision duties, has the PTP carried out these responsibilities conscientiously per VHA Handbook 1400.1 Resident Supervision?
  - (f) For a research assignment, has the PTP generated expected research products such as journal articles, grants or scholarly invitations for presentations?
  - (g) For an administrative assignment, has the PTP overseen the administrative entity effectively, complied with appropriate policies and procedures, and used VA resources efficiently?
- (2) Documentation of this review should be filed in the facility Chief of Staff's office.

**2. BIENNIAL REVIEWS:** The Service Chief reviews written agreements for PTPs at the time of the biennial review process for credentialing and privileging, and updates these agreements as necessary to reflect a current mix of duties every 2 years, or at the time of a substantial change ( $\geq$  2/8 effort increase or decrease in clinical duties over a 12-month period).

**3. CONTINUING SUPERVISORY AND MANAGEMENT RESPONSIBILITIES:**

- a. Continuing oversight and evaluation of VA patient care needs and the utilization of physician and other provider staff to meet those needs. Utilizing PTPs appropriately to meet bona fide VA needs.
- b. Supervisory oversight of time and leave procedures, such as leave requests, travel orders, and authorized absence, including approval of leave requests, certification of time cards, oversight of timekeeping procedures.
- c. Assist the facility Chief of Staff in oversight and verification procedures. Consultation with the Chief, Fiscal and Chief, Human Resources on service level agreement discrepancies is the responsibility of the Service Chief.

**4. MONITORING REQUIREMENTS FOR FIXED TOUR PTP:** PTPs on fixed-tours only (with no adjustable work hour component) will be monitored as circumstances warrant. This “for cause” monitoring may be precipitated by any or all of the following:

a. More than one failure of the PTP to appear for scheduled work assignments such as clinic duty or operating room cases.

b. More than one failure of the PTP to post appropriate leave in advance or notify VA personnel of his/her absence.

c. More than one failure of the PTP to fulfill other responsibilities of the VA assignment.

(1) A single case where the PTP was documented to be performing work elsewhere during his/her VA tour of duty without charge to leave.

(2) The “root cause” of each attendance discrepancy should be noted in the file (for example, failure to file a leave request).

(a) “For cause” monitoring will be conducted by the PTP’s Service Chief and/or the facility Chief of Staff, as appropriate, and consist of a series of three random, unannounced monthly verifications of attendance/VA work. If the results of the three random and unannounced verifications reveal no additional discrepancies, “for cause” monitoring is terminated. A finding of continuing attendance discrepancies should precipitate re-evaluation of the physician’s tour of duty and continuing VA assignment.

(b) Records of “for cause” monitoring and any actions taken will be maintained in the Service Chief’s and/or Chief of Staff’s office(s).

**5. MONITORING REQUIREMENTS FOR ADJUSTABLE TOUR PART-TIME PHYSICIANS:**

a. PTPs on adjustable work hours will be reviewed quarterly for compliance with time and attendance requirements. This will consist of electronic review for these PTPs for an entire pay period.

b. Facility monitoring reports are submitted to the respective VISN, which will enter the findings into the VHA web-based Summary Form of Part-Time Tracking report within 5 work days after the end of the reporting quarter. This report will include:

(1) Total number of PTP on Adjustable Work Hours at each facility;

(2) Notation of pay periods included in the report;

(3) Total number of PTPs that were verified electronically;

(4) Total number of PTPs that were not verified but excused (i.e. approved leave);

(5) Total number of PTPs that was not verified and not excused; and

(6) Comments or actions taken for those verified, not verified, or excused during the reporting periods.

c. Facilities will determine what other reviews are needed to maintain the integrity of monitoring the time and attendance of PTPs on adjustable work hours.

d. The verification of VA work may take place via either physical or electronic means. Verification may include physical viewing of the physician at the worksite, telephonic or verbal confirmation that physicians are physically present at the worksite (through direct contact with a VA staff member), or a review of patient chart entries such as progress note entry or electronic signature/co-signature on resident notes.

(1) Records regarding these verifications should be kept in the Chief of Staff's office or Service Chief's office.

(2) Records should be kept regarding any discrepancies that are found. For example, if the PTP is found to be absent from assigned duty without charge to leave, an annotation should be made in that physician's file. The reason for each attendance discrepancy should be noted (for example, failure to file a leave request).

(3) Physicians whose presence is found to be discrepant from assigned duty are subject to an increased frequency of monitoring (see "for cause monitoring", paragraph 4 of this Appendix).

(4) A finding of continuing attendance discrepancies should precipitate re-evaluation of the physician's tour of duty and continuing VA assignment.

(5) PTPs on adjustable tours of duty will also be subject to "for cause" monitoring as noted in 4, above.

## **6. REPORTING OF PTP ATTENDANCE ISSUES TO 10NC:**

a. As with any quality improvement initiative, it is vital to learn from collected data and experiences and report them thoroughly and widely. Through these oversight and accountability mechanisms, facilities will collect individual reasons for failure to comply with PTP policies and procedures. This collection of information will allow facilities to intervene with non-compliant physicians, but also allow the aggregation of data and the analysis of lessons learned system-wide.

b. On a quarterly basis, within 10 days of the reporting period, 10NC will review and analyze the VISN reports and take any necessary actions to assure compliance of time and attendance for PTPs.

c. On a yearly basis, in November following the end of a fiscal year, facilities will report their analysis of information regarding non-compliant part time physicians. This information will be aggregated system-wide, and lessons learned will be discussed on a Chief of Staff monthly call. Presenters with particular expertise will be invited to discuss problems, solution and actions.