

STAFFING

1. REASON FOR ISSUE: To revise the Department of Veterans Affairs (VA) qualification standard for the appointment of Licensed Pharmacists, GS-660, in VA.

2. SUMMARY OF CONTENTS/MAJOR CHANGES: This handbook contains mandatory procedures on staffing. The pages in this handbook replace the existing Licensed Pharmacist Qualification Standard in VA Handbook 5005, Appendix II-G15 in its entirety. The new standards are effective on the date of issuance of this handbook. These changes will be incorporated into the electronic version of VA Handbook 5005, Staffing, that is maintained on the [Office of Human Resources Management Web site](#). Significant changes include:

- a. Adds graduation from a United States-based non-American Council on Pharmaceutical Education (ACPE) accredited degree program as meeting the educational requirement if the degree is found to be equivalent to degree programs recognized by the ACPE.
- b. Adds grandfather provision that allows all licensed pharmacists employed in VHA on the effective date of this qualification standard to be considered to have met all qualification requirements for the title, series and grade held, including positive education and licensure/certification/registration that are part of the basic requirements of the occupation.
- c. Adds two levels of residency.
- d. Defines Board Certification and Certificate Programs in Pharmacy.
- e. Clarifies that Graduate Pharmacists may be appointed pending licensure for a period not-to-exceed two years.
- f. Clarifies substitution of education for experience at the GS-11 level.
- g. Adds Knowledge, Skills, and Abilities (KSAs) at the GS-11, GS-12 and GS-13 grade levels.
- h. Clarifies that completion of a post-Pharm.D. American Society of Health-System Pharmacists (ASHP) accredited Residency is qualifying at the GS-12 level.
- i. Provides separate assignment descriptions for GS-12 Clinical Pharmacist and Pharmacy Specialist.
- j. Adds an assignment description for Clinical Pharmacy Specialist, GS-13 and clarifies the description of the Clinical Practice (Direct Patient Care) assignment at the GS-13 level.
- k. Clarifies creditable experience at the GS-14 level and adds separate descriptions for GS-14 Program Manager and Pharmacy Supervisor, Assistant Service Chief/Assistant CMOP Director and Service Chief.
- l. Clarifies that 1 year of specialized experience at the next lower grade is required for qualification at the GS-14 level. The prior language "...an additional year" erroneously led many to believe that two years at the next lower grade were required for GS-14.

m. Clarifies creditable experience at the GS-15 level and adds separate descriptions for Service Chief, VISN Pharmacist Executive (Program Manager)/Pharmacy Benefits Manager; and CMOP Director.

n. Clarifies grade level criteria for Chiefs of Pharmacy Service and equivalent program management positions.

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

4. RELATED DIRECTIVES: VA Directive 5005

5. RESCISSIONS: VA Handbook 5005, Part II, Appendix G15, dated April 15, 2002.

CERTIFIED BY:

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

/s/
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[APPENDIX G15. LICENSED PHARMACIST QUALIFICATION STANDARD
GS-660
Veterans Health Administration

1. **COVERAGE.** Requirements for appointment as a Licensed Pharmacist in VHA are as follows:

2. **BASIC REQUIREMENTS**

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

b. **Education**

(1) Graduate of a degree program in pharmacy from an approved college or university. The degree program must have been approved by the American Council on Pharmaceutical Education (ACPE), or prior to the establishment of ACPE, have been a member of the American Association of Colleges of Pharmacy (AACP). Verification of approved degree programs may be obtained from the American Council on Pharmaceutical Education, 311 West Superior Street, Suite 512, Chicago, Illinois 60610-3537 Phone: (312) 664-3575), or through their Web site at: <http://www.acpe-accredit.org/>.

(2) Graduates of foreign pharmacy degree programs or those who graduated from a U.S.-based non-ACPE accredited degree program meet the educational requirement if their degree is found to be equivalent to degree programs recognized by the ACPE. This finding may be based on any of the following:

(a) A letter of acceptance into a United States graduate pharmacy program recognized by the ACPE.

(b) Written certification from the Foreign Pharmacy Graduate Examination Commission, 700 Busse Highway, Park Ridge, IL 60068, Phone (847) 698-6227, that the individual has successfully passed the Foreign Pharmacy Graduate Examination.

(c) A letter from a United States college or university with a pharmacy degree program recognized by ACPE stating that the individual's pharmacy degree has been evaluated and found to be equivalent to its Bachelor of Pharmacy degree or higher.

c. **Grandfathering Provision.** All licensed pharmacists 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 licensure/certification/registration 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) Employees grandfathered into the GS-660 occupational series may be reassigned, promoted up to and including the full performance (journey) level, or changed to lower grade within the occupation, but may not be promoted beyond the journey level or placed in supervisory or managerial positions.

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

(3) If a licensed pharmacist 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.

d. **Licensure.** Full, current and unrestricted license to practice pharmacy in a State, Territory, Commonwealth of the United States (i.e., Puerto Rico), or the District of Columbia. The pharmacist must maintain current registration if this is a requirement for maintaining full, current, and unrestricted licensure. A pharmacist who has, or has ever had, any license(s) revoked, suspended, denied, restricted, limited, or issued/placed in a probationary status may be appointed only in accordance with the provisions in chapter 3, section B, paragraph 16 of this part.

NOTE: *Individuals who have or have had multiple licenses and had any such license revoked for professional misconduct, professional incompetence or substandard care, or who surrendered such license after receiving written notice of potential termination of such license by the State for professional misconduct, professional incompetence, or substandard care, is not eligible for appointment to the position unless such revoked or surrendered license is fully restored. 38 U.S.C. § 7402(f). Effective November 30, 1999, this is a requirement for employment. This requirement does not apply to licensed pharmacists on VA rolls as of that date, provided they maintain continuous appointment and are not disqualified for employment by any subsequent revocations or voluntary surrenders of State license, registration or certification.*

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

f. **English Language Proficiency.** Pharmacists must be proficient in spoken and written English as required by 38 U.S.C. 7402(d), and 7407(d).

3. GRADE REQUIREMENTS

a. Definitions

(1) Creditable Experience

(a) **Knowledge of Current Professional Pharmacy Practices.** To be creditable, the experience must have required the use of knowledge, skills, abilities and other characteristics associated with current professional pharmacy practice. The experience or education must demonstrate current professional practice. This may be evidenced by one or more of the following during the 3-year period prior to appointment:

1. The equivalent of 1 year of active professional practice. Active professional practice means paid/non-paid employment as a professional pharmacist as defined by the appropriate licensing board; or
2. In addition to a full, current and unrestricted license, annual completion of a minimum of 15 continuing education units (CEUs) recognized by ACPE, or as required by the licensing authority by which the pharmacist is licensed; or
3. A Master's or Ph.D. degree in pharmacy or a related health care field.

(b) Crediting Residency and Fellowship Training as Experience

1. Pharmacy degree programs have changed over time from the traditional bachelor's 4-year degree to the 6-year Pharm.D. or formal post-baccalaureate (Pharm.D.) hospital oriented degree program as recognized by the American Council on Pharmaceutical Education (ACPE). This change impacts the entry level for placement when compared to traditional two-grade level qualification standards for other occupations.
2. After completing the degree requirements, many pharmacists seeking hospital positions complete a 1-year PGY-1 (and occasionally a 1-year PGY-2) clinical pharmacy residency program or a 2-year pharmacy fellowship program (particularly those pharmacists interested in research positions). This post-degree training is creditable as experience on a year-for-year basis (e.g., completion of a Pharm.D. degree and 1-year clinical residency is qualifying for GS-12; completion of a Pharm.D. degree and a 2-year fellowship is qualifying for GS-13).
3. A residency accredited by the American Society of Health-System Pharmacists (ASHP) does not include internships which are shorter training programs designated to meet the requirements of boards of pharmacy for licensure. Residencies may be substituted for experience on a year-for-year basis. There are two levels of residency. The Post Graduate Year 1 (PGY1) is a general practice residency. The Post Graduate Year 2 (PGY2) residencies are in specialized areas of pharmacy practice.
4. Fellowship programs are typically 2-year VA training programs in a specialized area of clinical practice. Applicants for these programs usually possess a Pharm.D. or an equivalent degree and have completed an accredited clinical or specialized residency (or both). Training as a fellow may substitute for creditable experience on a year-for-year basis.

(c) Quality of Experience. Experience is only creditable if it is post-licensure experience as a professional pharmacist directly related to the position to be filled. Qualifying experience must also be at a level comparable to pharmacy experience at the next lower level.

NOTE: *Experience as a Graduate Pharmacist is creditable provided the candidate was used as a professional pharmacist (under supervision) and subsequently passed the appropriate licensure examination.*

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(d) **Part-time Experience.** Part-time experience as a professional pharmacist is credited according to its relationship to the full-time workweek. For example, a pharmacist employed 20 hours a week, or on a 1/2-time basis, would receive 1 full-time workweek of credit for each 2 weeks of service.

(2) **Board Certification.** Board certification recognized by the American Pharmaceutical Association's Board of Pharmaceutical Specialties or the American Society of Consultant Pharmacists is awarded based on successful completion of a validated exam. Individuals usually have multiple years of experience prior to successful completion of the Exam. Certified Diabetic Educators (CDE) awarded by the National Certification Board for Diabetic Education is considered an equivalent board certification.

(3) **Certificate Programs in Pharmacy.** Only accept certifications accredited by the Accreditation Council for Pharmacy Education (ACPE). The ACPE recognizes accredited specialized treatment programs in disease state management that meet the criteria established. They teach specialized skills in disease management and may be considered when setting the entry step of the individual.

(4) **Supervisor.** Supervisory work, at a minimum, includes responsibility for planning and scheduling work; assigning work to employees; accepting, amending, or rejecting completed work; assuring that production and accuracy requirements are met; appraising performance and recommending performance standards and ratings; approving leave; and effecting disciplinary measures. Additionally, the duties of a supervisor typically include prioritizing and scheduling work and finding ways to improve the quality and/or quantity of the work directed.

b. **Grade Determinations.** In addition to the basic requirements for employment in paragraph 2, the following criteria must be met when determining the grade of candidates.

(1) **GS-9 Staff Pharmacist**

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

(b) **Assignment.** This is the entry level for new graduates with no experience, Residency or Fellowship. Staff Pharmacists at the GS-9 grade level serve in a developmental capacity under close supervision.

NOTE: *Graduate pharmacists may be appointed pending licensure for a period not to exceed 2 years. A graduate pharmacist who fails to qualify for licensure may be retained on VA rolls pending reexamination, provided a license is obtained prior to the expiration of the 2-year appointment.*

(2) **GS-11 Staff Pharmacist.** In addition to meeting all requirements for appointment at the GS-9 level, including licensure, GS-11 Staff Pharmacists must demonstrate the requirements below.

(a) **Experience or Education.** Completion of one of the following:

1. The equivalent of 1 year of experience at the next lower grade level; or
2. Completion of an ACPE-accredited Pharm.D. program; or

3. B.S. graduate in Pharmacy with a graduate degree in Pharmacy or in a health care or related management field, including MHA, MSHCA, MBA and others. The graduate program must be accredited by the appropriate governing body.

(b) **Demonstrated Knowledge, Skills and Abilities (KSAs).** In addition to meeting the basic requirements, pharmacists at this grade level must demonstrate the following KSAs:

1. Ability to read, interpret, and apply written instructions;
2. Basic knowledge of professional pharmacy practice;
3. Ability to communicate orally;
4. Ability to communicate in writing;
5. Basic computer skills;
6. Basic knowledge of pharmaceuticals, pharmacokinetics, pharmacodynamics, pharmacoeconomics and pharmacotherapeutics;
7. Ability to function in a team environment; and
8. Knowledge of standards related to the distribution and control of scheduled and non-scheduled drugs to both inpatients and outpatients (including research and investigational drugs). This includes but is not limited to basic knowledge of the standards of Drug Enforcement Administration (DEA), Food and Drug Administration (FDA), Department of Veterans Affairs (VA), the State (Territory of District of Columbia, if appropriate), and The Joint Commission (TJC).

(c) **Assignment.** This is the full performance level for Staff Pharmacists.

(3) **GS-12 Pharmacist**

(a) **Experience.** Completion of the equivalent of 1 year of creditable experience at the next lower grade level which is directly related to the position to be filled or completion of a 1 year post-Pharm.D. ASHP accredited Residency.

(b) **Assignments.** Candidates at this grade level are to be in one of the following assignments:

1. **Clinical Pharmacist.** A Clinical Pharmacist spends significant time in Clinical Practice (> 25percent). Examples of practice sites include but are not limited to: medicine, surgery, psychiatry, neurology, spinal cord injury, primary care, ambulatory care including open pharmacy, rehabilitation medicine, geriatrics, medical research and others recognized by the professional standards board.

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2. Pharmacy Specialist. Pharmacists in these assignments have responsibility for managing a specialized area of practice within a facility or area of a facility. They include but are not limited to IV admixtures, Information Technology (ADPACs, Informatics Specialists), Drug Information, etc. which require specialized skills but may be supervised by other pharmacists and have close relationships with other departments or services.

3. Pharmacy Supervisor, Inpatient/Outpatient. The supervisor (Inpatient/Outpatient) is responsible for the professional and administrative management of an inpatient/outpatient area in a small minimally complex pharmacy service that offers basic pharmacy services at a Complexity Level 3 (low complexity) VHA facilities with one division, or an inpatient/outpatient area at a site geographically removed from the supervisor. Pharmacy programs at these facilities are primarily involved in distributive functions and general clinical pharmacy activities. Such individuals typically have responsibility for supervising three or more professional GS-11 pharmacists. In addition to the experience requirements in paragraph (a), pharmacists assigned to these positions must demonstrate an ability to manage people and/or programs and the knowledge, skills, abilities and other characteristics necessary to satisfactorily complete the following duties.

a. Assigning duties; development of performance standards and performance evaluations; recommendations for appointment, awards, advancement, and, when appropriate, disciplinary actions; identification of continuing education and training needs; etc.;

b. Serving as a consultant within Pharmacy Service and with other facility health care staff in evaluating health care delivery to patients; and

c. Assessing, planning and evaluating the pharmacy program to ensure proper coordination between the delivery of pharmacy services and the overall delivery of health care.

(c) Demonstrated KSAs. In addition to the experience requirements and KSAs at the GS-11 level, pharmacists at this grade level must demonstrate the following KSAs:

1. Comprehensive knowledge of a specialized area of clinical pharmacy practice or specialty area of pharmacy such as quality assurance/utilization review, informatics systems, drug information, etc. This level of knowledge is usually characterized by at least 1 year of experience in a specialized clinical area or advanced training/certification;

2. Comprehensive knowledge of pharmaceutics, pharmacokinetics, pharmacodynamics, pharmacoeconomics and pharmacotherapeutics. This level of knowledge is usually characterized by at least 1 year of experience in a specialized clinical area or advanced training/certification;

3. Skill in monitoring and assessing the outcome of drug therapies including physical assessment and interpretation of laboratory and other diagnostic parameters;

4. Knowledge of the design, conduct, and interpretation of controlled clinical drug trials or other research related to health care;

5. Ability to communicate orally to persuade and influence clinical decisions;
6. Ability to communicate in writing to persuade and influence clinical decisions;
7. Comprehensive knowledge of DEA, FDA, VA, the State (Territory of District of Columbia, if appropriate), TJC and other standards related to the distribution and control of scheduled and non-scheduled drugs to both inpatients and outpatients (including research and investigational drugs); and
8. Ability to manage people and/or programs. (An additional KSA for Pharmacy Supervisor positions.)

(4) **GS-13 Pharmacist**

(a) **Experience.** Completion of the equivalent of 1 year of creditable experience at the next lower grade level which is directly related to the position to be filled, or board certification recognized by the American Pharmaceutical Association's Board of Pharmaceutical Specialties, or the American Society of Consultant Pharmacists (or equivalent), or completion of a two year post Pharm.D. fellowship in a clinical or specialized program.

(b) **Assignments.** Candidates at this grade level are to be in one of the following assignments:

1. **Clinical Pharmacy Specialist.** Clinical Pharmacy Specialists spend the large majority of their time in clinical practice at a higher level (GS-13) than the GS-12 level. Clinical Pharmacists at this level may be board certified and recognized by the American Pharmaceutical Association's Board of Pharmaceutical Specialties or the American Society of Consultant Pharmacists. Examples of practice sites include but are not limited to: medicine, surgery, psychiatry, neurology, spinal cord injury, primary care, ambulatory care including open pharmacy, rehabilitation medicine, geriatrics, medical research and others recognized by the professional standards board. Clinical Pharmacists at this level have a broader Scope of Practice than at the GS-12. In addition, they have added responsibilities for at least one of the following:

a. **Research.** Designing, conducting, and publishing research in referred journals, independently or as a contributing member of a research team. Assignment at this level typically involves full participation in intramural and/or extramural research committees. The research projects:

- (1) Are generally reviewed and approved by appropriate research committees;
- (2) Have a significant impact on the care and treatment of patients and/or the direction of health care practice; and

(3) Require considerable coordination within a facility or among multiple medical facilities.

b. **Education.** Developing and managing all pharmacy educational programs including: residency training programs, fellowships, clerkships, internships, management training programs, staff development programs, university affiliated programs, and interdisciplinary training programs. Assignment at this level typically includes an appointment at the affiliated university (other than a courtesy appointment) and requires considerable coordination within a facility or among multiple medical facilities.

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c. **Clinical Practice (Direct Patient Care).** Individuals in these assignments are responsible for patient care activities involving highly innovative methods of health care delivery. These individuals have a high level of independence designated in their Scope of Practice and are recognized by their peers as performing assignments that require an exceptional level of competence.

2. **Program Manager.** Individuals in these assignments coordinate a single program area of a complex pharmacy operation, or multiple programs areas within a facility, to develop, organize, manage, and control complex pharmacy programs. Examples include but are not limited to nuclear pharmacy, complex information technology ADPACs, Pharmacy Informatics, Clinical Application Coordinators (CACs) Specialist, Pharmacy Information Systems, nutritional support services, specialized IV services, oncology, pharmacokinetic consulting, ambulatory care, psychopharmacy, drug information, quality assurance/utilization review, spinal cord injury, pharmacoeconomics etc.)

3. **Pharmacy Supervisor, Inpatient/Outpatient.** The supervisor (Inpatient/Outpatient) is responsible for the professional and administrative management of an inpatient/outpatient area in a relatively large pharmacy service, or an inpatient/outpatient area at a site geographically removed from the supervisor. Individuals are typically assigned as Supervisors at Complexity Level 2 (medium complexity) VHA facilities. Pharmacy programs at these facilities are full service pharmacy operations. Programs at this level also have well-developed clinical pharmacy programs that are integrated with the multiple health care programs supported by Pharmacy Service. Or, individuals are typically assigned as Supervisors at Complexity Level 1a or b (high complexity) VHA facilities. Pharmacy programs at these facilities support a wide variety of specialty medical programs such as intensive care units, spinal cord injury, mental health, various surgical specialties and pain management clinics. These operations typically also include supporting regional or network centers of excellence, such as transplant centers, cancer centers, Geriatric Research Education Centers (GRECs), and Mental Illness Research, Education and Clinical Centers (MIRECCs) and fully affiliated educational programs that include a pharmacy residency. Assignments are at higher complexity level facilities and support a wide variety of inpatient and outpatient specialty medical programs such as intensive care, spinal cord injury, mental health and various surgical specialties and pain management clinics. Such individuals typically have responsibility for supervising three or more professional GS-12 level pharmacists. In addition to the experience requirements in paragraph (a), pharmacists assigned to these positions must demonstrate an ability to manage people and/or programs and the knowledge, skills, abilities and other characteristics necessary to satisfactorily complete the following duties:

a. Assigning duties; development of performance standards and performance evaluation; recommendations for appointment, awards, advancement, and, when appropriate, disciplinary action; identification of continuing education and training needs; etc.;

b. Serving as a consultant within Pharmacy Service and with other facility health care staff in evaluating health care delivery to patients. This includes facilitating the delivery of patient care in collaboration with health professionals, health managers and other health care personnel; and

c. Assessing, planning and evaluating the pharmacy program to ensure proper coordination between the delivery of pharmacy services and the overall delivery of health care. This includes making decisions which serve to enhance the distinctive and contributory role of pharmacists within the local institution and the total health care system. Accepting substantial and continuing responsibility and accountability for planning, organizing, coordinating and controlling a complex inpatient/outpatient pharmacy program. Participating in long range program planning and model development for effective delivery of inpatient/outpatient pharmacy services. Assuring implementation, maintenance and compliance with standards of professional practice.

4. **Assistant Service Chief and Service Chief.** See paragraph 4 of this appendix.

(c) **Demonstrated KSAs.** In addition to the experience requirement in paragraph 3b(4)(a), pharmacists at this grade level must demonstrate the following KSAs:

1. Expert knowledge of a specialized area of clinical pharmacy practice or specialty area of pharmacy such as quality assurance/utilization review, informatics systems, drug information, etc. This level of knowledge is usually characterized by at least 2 years of experience related to clinical pharmacist duties in a specialized clinical area or advanced training/certification;

2. Expert knowledge of pharmaceuticals, pharmacokinetics, pharmacodynamics, pharmacoeconomics and pharmacotherapeutics. This level of knowledge is usually characterized by at least 2 years of experience related to clinical pharmacist duties in a specialized clinical area or advanced training/certification;

3. Advanced skill in monitoring and assessing the outcome of drug therapies including physical assessment and interpretation of laboratory and other diagnostic parameters. This level of skill is usually characterized by at least 2 years of experience related to clinical pharmacist duties in a specialized clinical area or advanced training/certification;

4. Ability to communicate orally to persuade and influence clinical and management decisions;

5. Ability to communicate in writing to persuade and influence clinical and management decisions;

6. Demonstrate an expert understanding of regulatory and quality standards for all medications including investigational drugs. This level of knowledge is usually characterized by at least 2 years of experience related to clinical pharmacist duties in a specialized clinical area or advanced training/certification; and

7. Skill to manage people and/or programs. (This is an additional KSA for Pharmacy Supervisor/Program Manager/Service Chief and Assistant Service Chief positions).

(5) **GS-14 Pharmacist**

(a) **Experience.** Assignments at this grade level require 1 year of creditable experience at the next lower grade level which is directly related to the position to be filled or an advanced degree in a health care related field (e.g., MSHA, MBA, MPH, etc.).

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(b) **Assignments.** Candidates at this grade level are to be in one of the following assignments:

1. **Program Manager.** Program managers at this level are responsible for the management of national programs or VISN programs having a high degree of visibility and a significant impact on Department health care. Examples include initiatives in research, education, quality assurance/utilization review, drug information, etc. These programs typically include collaboration with other federal agencies (e.g., National Institutes of Health, Public Health Service, Department of Defense, FDA, Centers for Disease Control, etc.) or organizations outside the Federal health care system. Programs of this magnitude are typically directed by VA Central Office or a VISN.

2. **Pharmacy Supervisor, Assistant Service Chief/Assistant Consolidated Mail Outpatient Pharmacy (CMOP) Director and Service Chief.** At this grade level pharmacy supervisors are typically in either Assistant Chief or Service Chief positions. See paragraph 4b(4) of this appendix.

(c) **Demonstrated KSAs.** In addition to the experience requirement in paragraph 3b(5)(a), pharmacists at this grade level must demonstrate all the following KSAs:

1. Utilization of negotiation skills to influence clinical and management decisions;
2. Ability to effectively communicate orally regarding complex clinical and technical issues;
3. Ability to effectively communicate in writing regarding complex clinical and technical issues;
4. Skill in utilizing regulatory and quality standards to develop and implement operational programs;
5. Skill in managing multiple and diverse people/programs;
6. Skill in utilizing available resources to support the missions and goals of the organization; and
7. Skill in planning, organizing, and directing the functions and staff of an organization.

(6) **GS-15 Pharmacist**

(a) **Experience.** Assignments at this grade level require 1 year of creditable experience at the next lower grade level which is directly related to the position to be filled or an advanced degree in a health care related field (e.g., MSHA, MBA, MPH, etc.).

(b) **Assignments.** Candidates at this grade level are to be in one of the following assignments:

1. **Service Chief.** See paragraph 4 of this appendix.

2. **Veterans Integrated Service Network (VISN) Pharmacist Executive (Program Manager).** VISN Pharmacy Executives are program managers responsible for the administration and management of Pharmacy Benefits Management Services for an entire network. They serve on the National Formulary

committee and make decisions on the structure and content of the National Formulary. Additionally they serve as advisors to VACO for development of PBM policy. They may be assigned collateral duties or be a separate position within the VISN.

3. Pharmacy Benefits Manager (PBM). National Formulary Leaders or Pharmacy Benefits Managers are pharmacists serving as national program managers for Pharmacy Benefits Management. They are responsible for multiple programs at the national level and interact with other government agencies and standards organizations.

3. CMOP Director. CMOP Directors are responsible for all programs and services provided by the CMOP. A CMOP provides prescription mail-out services to multiple VA facilities across geographic regions. Services include filing, labeling, shipping, and tracking shipment of prescription medications and medical supplies. CMOPs are large-scale, highly technical operations that require a substantial and highly skilled work force. The CMOP Manager ensures all prescriptions transmitted from the Medical Centers, are processed in a timely and cost-effective manner. The CMOP Manager is responsible for all resources that affect the outcome of the CMOP's daily workload.

(c) **Demonstrated KSAs.** In addition to the experience requirement in paragraph 3b(6)(a), pharmacists at this grade level must demonstrate all the following KSAs:

1. Skill in persuading others and gaining cooperation to accomplish goals. Understands and keeps up to date on local, national, and international policies and trends that affect the organization and influences stakeholders' views.
2. Ability to effectively communicate orally regarding complex clinical and technical issues.
3. Ability to effectively communicate in writing regarding complex clinical and technical issues.
4. Skill in leading and managing multiple and diverse people or programs. Fosters an inclusive workplace where diversity and individual differences are valued and leveraged to achieve the vision and mission of the organization;
5. Ability to manage human, financial and information resources strategically;
6. Ability to plan, organize, and direct the functions and staff of a large size organization or a complex pharmacy operation, or a complex medical facility; and
7. Ability to deal effectively with pressure; remain optimistic and persist even under adversity.

4. SERVICE CHIEF, VISN AND NATIONAL PHARMACY PROGRAM MANAGEMENT POSITIONS (GS-13 THROUGH 15)

a. **Grade Level Criteria.** The grade of Chiefs of Pharmacy Service and equivalent program management positions will be determined by two factors:

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(1) **Facility Complexity Group.** VHA has adopted a scientific methodology of grouping its facilities according to relative complexity. The supervisor may recommend the Professional Standards Board consider the facility complexity group where the position is located when considering the grade of the position. Following are the five complexity groups with the first being the most complex:

- (a) Complexity Level 1a
- (b) Complexity Level 1b
- (c) Complexity Level 1c
- (d) Complexity Level 2
- (e) Complexity Level 3

(2) **Technical Complexity of the Pharmacy Service.** This factor considers the range and relative complexity of the pharmacy program for which the Chief or other program management position is responsible. The complexity of the pharmacy program is generally tied to the diversity and complexity of the medical, educational and research programs supported by the pharmacy service, as well as the complexity and diversity of the pharmacy program itself. A key consideration is the extent to which the work involves the use of established guidelines or requires the exercise of advanced knowledge, extensive experience, or original judgment and ingenuity to resolve professional problems of a difficult or unusual nature. The supervisor may recommend the Professional Standards Board consider the technical complexity of the position when considering the grade of the position.

b. **Grade Determinations.** Grade levels for positions covered under this paragraph will be established as follows:

(1) **Assistant Service Chief/Assistant CMOP Director.** Individuals assigned to these positions share with the Chief of Pharmacy Service full responsibility for managing and supervising all phases of Pharmacy Service operations. Assistant Service Chief positions should be graded one grade below the grade of the Chief of Pharmacy Service or CMOP Director.

(2) **GS-13 Chief, Pharmacy Service and Comparable Positions.** At the GS-13 grade level, individuals are typically assigned as Chief of a small minimally complex Service that offers basic pharmacy services at Complexity Level 3 (low complexity) VHA facilities with one division. Pharmacy programs at these facilities are primarily involved in distributive functions and general clinical pharmacy activities.

(3) **GS-14 Chief, Pharmacy Service and Comparable Positions.** At the GS-14 grade level, individuals are typically assigned as Chief at Complexity Level 2 (medium complexity) VHA facilities. Pharmacy programs at these facilities are full service pharmacy operations. Programs at this level also have well-developed clinical pharmacy programs that are integrated with the multiple health care programs supported by Pharmacy Service.

(4) **GS-15 Chief, Pharmacy Service and Comparable Positions.** At the GS-15 grade level, individuals are typically assigned as Chief at Complexity Level 1a, 1b (high complexity) or 1c VHA facilities. Pharmacy programs at these facilities support a wide variety of specialty medical programs such as intensive care units, spinal cord injury, mental health, various surgical specialties and pain management clinics. These operations typically also include supporting regional or network centers of excellence, such as transplant centers, cancer centers, Geriatric Research Education Centers (GRECs), and Mental Illness Research, Education and Clinical Centers (MIRECCs) and fully affiliated educational programs that include a pharmacy residency.

5. DEVIATIONS

- a. The appointing official may, under unusual circumstances, approve reasonable deviations to the grade determination requirements for an employee whose composite record of accomplishments, performance, and qualifications, as well as current assignment warrants such action.
- b. Under no circumstances will the educational requirement be waived. Under no circumstances will the licensure requirement be waived above the GS-9 level.
- c. The placement of individuals in grade levels not described in the qualification standard must be approved by the Under Secretary for Health or designee in VHA Central Office.

Authority: 38 U.S.C. 7304; 7402]