

**POSITION RISK AND SENSITIVITY DESIGNATIONS FOR VHA POSITIONS AND  
MEDICAL CENTER POLICY**

**1. REASON FOR ISSUE.** This Veterans Health Administration (VHA) Handbook defines procedures for determining VHA position risk and sensitivity designations, and provides reporting requirements and a sample facility policy. ***NOTE:** The provisions in the Handbook apply only to positions that are exempt from the background investigation requirements in VA Directive 0710.*

**2. SUMMARY OF CONTENTS/MAJOR CHANGES.** This is a new Handbook that:

a. Deletes the “Compensated Work Therapy (CWT)” patients from coverage under former policy.

b. Provides that trainees are low-risk and do not require an individual VA Form 2280, Position Risk and Sensitivity Level Designation, be completed for each incumbent, unless the trainee or volunteer works under the supervision and guidance of VA employees who occupy positions designated as moderate or high-risk.

c. Incorporates the requirement to use VA Form 10-0453, Screening Checklist, to document that required screening activities have been completed (see Appendix B).

d. Incorporates the requirement for facilities to establish local policies and procedures to ensure that required personnel screenings are accomplished and documented (see Appendix C).

e. Incorporates the requirement to conduct quarterly file reviews and reports of screening compliance using VA Form 10-0452, Personnel Suitability and Security Quarterly File Reviews (see Appendix D).

**3. RELATED ISSUE.** VA Directive 0710, VA Handbook 0710, and VHA Handbook 0710.01.

**4. RESPONSIBLE OFFICE.** The Management Support Office (10A2) is responsible for the contents of this Directive. Questions may be directed to 202-273-8247.

**5. RESCISSIONS.** None.

**6. RECERTIFICATION.** This VHA Handbook is scheduled for recertification on or before the last working day of May 2012.

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## POSITION RISK AND SENSITIVITY DESIGNATIONS FOR VHA POSITIONS AND MEDICAL CENTER POLICY

### 1. PURPOSE

This Veterans Health Administration (VHA) Handbook defines procedures for determining VHA position risk and sensitivity designations, provides reporting requirements, and a sample facility policy. The procedures contained in this Handbook must be used in conjunction with the Department of Veterans Affairs (VA) Directive 0710 and VA Handbook 0710.

### 2. BACKGROUND

a. The Federal Information Processing Standards 201 (FIPS 201), as amended by FIPS 201-1, requires that a minimum background investigation (National Agency Check with Written Inquiries (NACI)) be completed prior to the issuance of a Personal Identity Verification (PIV) compliant identity card. However, an agency can issue an electronically distinguishable identity credential (non-PIV card) on the basis of a completed Federal Bureau of Investigation (FBI) National Criminal History Check (fingerprint check or Special Agreement Check [SAC]). Under the Office of Management and Budget (OMB) interpretive guidance, the applicability of FIPS 201 standards to agency specific categories of individuals requiring short term access to Federally-controlled facilities and/or Federally-controlled information systems is an agency risk-based decision. Categories of individuals covered by the directive may require more than a SAC if they are required to obtain a PIV card.

b. This Handbook was developed to assist facilities in determining position risk, sensitivity designations, and appropriate levels of background investigations required in accordance with VA Handbook 0710. The intent is to provide guidance and examples of common positions and designations. These examples do not provide the “absolute” designation for every position in VHA. Users are expected to examine the examples given and use the understanding gained from that review to arrive at proper risk and sensitivity position designations (see App. A). **NOTE:** *These designations are to be recorded on VA Form 2280, Position Risk and Sensitivity Level Designation.*

c. Facilities may have to make adjustments for uniqueness, uniformity, and information technology (IT) risk. Some positions, by the very nature of the duties and responsibilities, require a designation at a certain level.

(1) For VHA, Veterans Integrated Service Network (VISN) Director, the Medical Center Director, Human Resources Officer, Chief of Police, and information technology (IT) positions performing the duties of the Information Security Officer (ISO) and systems administration functions must be designated as High-Risk positions requiring a Background Investigation (BI).

(2) Police Officers and Detectives are considered to be Moderate-Risk positions requiring a Minimum Background Investigation (MBI).

d. Final adjustments in the designation process must take into account unique factors specific to positions and the organizational need for uniformity or operations. Adjustments may raise or lower the risk level designation of a position, or convert the designation from a risk level to a sensitivity level. As a consequence, the level of investigation may be raised. If an individual moves to a higher risk level position or the risk level of the position is changed, the individual may require a different investigation.

e. Policies on the subject of position sensitivity designation can be confusing. One reason is that manuals combine two different types of position designations into one labeled position sensitivity designation. Each is separately derived and then combined into a single designation that is recorded on VA Form 2280, Position Risk and Sensitivity Level Designation. The two different types of designations are risk levels and sensitivity levels. Risk levels are comprised of low, moderate, or high-risk. Moderate and high-risk positions are considered public trust positions.

### **3. SCOPE**

The provisions in this Handbook apply only to positions that are exempt from the background investigation requirements in VA Directive 0710. The provisions include all exempted individuals in the following categories: on-station fee-basis, consultants, and attendings; without compensation (WOC) employees; trainees including students, interns, and residents; contract personnel hired for less than 180 days to perform direct or ancillary health care services at VA facilities or who have access to VA computer systems, and patient or sensitive information; volunteers in certain categories; and individuals appointed or detailed to VHA under the Intergovernmental Personnel Act for less than 6 months and who have access to computer systems, patient or sensitive information.

### **4. ELECTRONIC QUESTIONNAIRE FOR INVESTIGATIONS PROCESSING (e-QIP)**

The Office of Personnel Management (OPM) has mandated that positions with responsibilities for using the Electronic Questionnaire for Investigations Processing (e-QIP) are to be designated as follows:

- a. Functional Administrator is designated as High-Risk requiring a BI.
- b. Program Specialist is designated as High-Risk requiring a BI.
- c. Initiator is designated as Moderate-Risk requiring a MBI.
- d. Reviewer is designated as Moderate-Risk and/or Non-critical Sensitive requiring a Limited Background Investigation (LBI);
- e. Approver is designated as Moderate-Risk and/or Non-critical Sensitive requiring a LBI.

## 5. COMPENSATED WORK THERAPY (CWT) PROGRAMS

a. The Veterans Health Administration (VHA) Psychosocial Rehabilitation Programs' mission is to assist veterans return to full, productive community participation. The development of a comprehensive individualized rehabilitation plan includes a review of past employment suitability and security issues to include criminal histories that would impact on the vocational choices and future competitive job placement. **NOTE:** *The CWT patients' coverage under former VHA policy has been deleted.*

b. Veterans cannot be denied treatment, if otherwise eligible, to include participation in the CWT Programs. At the same time, VHA is required to ensure the security of sensitive data and safety within VHA facilities for patients, guests, students, volunteers, and employees. Within these parameters the Office of Mental Health Services has developed policies and guidance for the CWT Program that preclude placing CWT patients in assignments where sensitive data and public safety and security could potentially be affected or result in compromising VHA's mission. **NOTE:** *This risk-assessment guidance will be formalized in the revised version of VHA Handbook 1103.01 (to be published). In implementing this revision, Mental Health Program officials responsible for CWT patient placements in VHA facilities must review those assignments to determine compliance with the program office guidance and certify to the facility Director that this action has taken place no later than October 1, 2007. Questions regarding access to sensitive data and safety are to be discussed with the appropriate ISO and Regional Counsel to ensure VHA's mission is not compromised.*

## 6. RESPONSIBILITIES OF THE FACILITY DIRECTOR

The facility Director is responsible for ensuring that:

a. Each position is evaluated for national security considerations as well as access to VA information systems.

b. Position risk and sensitivity determinations are based on the full-performance level of the position.

c. Designations are recorded on VA Form 2280.

d. If there is a change in designation and a higher level investigation is required, the investigation for that new risk level is initiated within 14 calendar days. The individual may encumber or remain in the position pending the completion of the background investigation (see Title 5 Code of Federal Regulations (CFR) 731.106(e), Risk Level Changes).

e. The Screening Checklist in Appendix B is used to document that required screening activities have been completed.

f. A facility personnel suitability and security policy is established that complies with the provisions of Appendix C.

g. A quarterly review of their personnel suitability and security program is performed as provided in Appendix D.

## 7. MAKING POSITION SENSITIVITY DESIGNATIONS

Some issues to consider when making position sensitivity designations are:

a. Positions previously designated as sensitive that do not have national security-related duties are now designated as “public trust” positions.

b. Public trust positions are designated at the moderate or high level. National Security positions are designated as non-critical sensitive, critical sensitive, or special sensitive. Low-Risk and Non-sensitive are not considered designations.

c. Confusion can occur when assigning the sensitivity designation in block 12 of the Position Description cover page (Official Form [OF]-8), because only the four national security sensitivity designations are provided on the form and no place exists to enter a code for public trust. Public trust designations, however, must be noted in the “Remarks” block on the position description cover sheet (OF-8). If the position is low-risk, “non-sensitive” in Block 12 may be used, since low-risk and non-sensitive are equivalent.

d. For the purpose of designating position risk (public trust) and sensitivity (national security), VA is the “agency.”

## 8. POSITION RISK LEVEL DESIGNATION PROCESS

a. The Position Risk Level Designation Process involves three steps:

(1) Designating the program risk level,

(2) Designating position risk points, and

(3) Designating the position’s type of background investigation.

b. Each position must be evaluated for national security considerations as well as access to VA information systems. VHA is responsible for designating risk levels for every position within the Administration based on the duties and responsibilities. Each position must be designated at the high, moderate, or low-risk levels depending on the position’s potential for adverse impact to the integrity and efficiency of the service (see 5 CFR 731.106). Positions at the high or moderate-risk level are referred to as “public trust” positions (see VA Handbook 0710).

c. Designations are to be recorded on VA Form 2280. The original needs to be attached to the position description, with a copy placed on the temporary side of the incumbent(s) Official Personnel or Merged Record folder, as appropriate. **NOTE:** VA Form 2280 can be obtained through the Department’s Intranet address at <http://vawww.va.gov/vaforms>; it is available in

*Adobe Acrobat format for print and fill, or in Jet Form filler for those who have Jet Form software.*

## **9. BACKGROUND INVESTIGATION REQUIREMENTS**

Risk and sensitivity level designations are directly tied to background investigation requirements.

- a. A position designated as Low-risk requires a NACI.
- b. A position designated as Moderate-Risk requires a MBI.
- c. A position designated as High-Risk requires a BI.
- d. A position with a National Security Level designation of Non-critical Sensitive (NCS) or higher requires either a LBI or a Single Scope Background Investigation (SSBI) regardless of the public trust risk level determination.

***NOTE:** Exemptions to investigation requirements are discussed in detail in VA Directive 0710; however, requirements set forth in this VHA Handbook regarding SAC screening apply.*

## **10. POSITION RISK AND SENSITIVITY DESIGNATIONS FOR TRAINEES**

VHA trainees, such as physician residents, associated health trainees, medical and nursing students, and other categories of individuals who are training in VHA facilities are considered to be in low-risk positions, provided they are training under the guidance and supervision of VA employees who occupy low-risk positions. VA Form 2280, Position Risk and Sensitivity Level Designation is not required to be completed for such a trainee. However, an individual VA Form 2280 must be completed for any trainee who is training under the guidance and supervision of VA employees who occupy positions designated as Moderate-Risk or High-Risk to determine if the trainee's duties and responsibilities are higher than low-risk. In these instances, the VA Form 2280 will be maintained on file by the program office responsible for the conduct of the training program.

## **11. SPECIAL AGREEMENT CHECK (SAC)**

- a. In 2001, OPM began to offer the SAC for Fingerprint Only option to agencies for screening fingerprints through the FBI. The cost of this check is deducted from the cost of a NACI, if one is to be conducted. VA and OPM entered into an agreement to perform these checks in August 2001.
- b. A SAC is mandated for individuals covered by requirements in VHA Directive 0710 (i.e., individuals who do not require a NACI or higher investigation).

**May 18, 2007**

**VHA HANDBOOK 0710.01  
APPENDIX A**

**VETERANS HEALTH ADMINISTRATION POSITION SENSITIVITY AND  
INVESTIGATIONAL GUIDE**



Security  
Appendix.pdf



**DEPARTMENT OF VETERANS AFFAIRS (VA) FORM 10-0453, SCREENING  
CHECKLIST**

Below is an embedded copy of Department of Veterans Affairs (VA) Form 10-0453, Screening Checklist. The fillable version of VA Form 10-0453 can be found on the VA Forms web site at: <http://vaww.va.gov/vaforms>.

You should use the latest version of Adobe Acrobat Reader to view this form.



VA Form  
10-0453-fill.pdf

## SAMPLE MEDICAL CENTER POLICY

(NAME) VA Medical Center  
CENTER (or Facility Name) Policy

### PERSONNEL SUITABILITY AND SECURITY PROGRAM

**1. PURPOSE:** The purpose of this program is to establish a facility-wide policy outlining the procedures for determining and designating appropriate position sensitivity levels and for conducting appropriate background screenings and investigations on appointees, including on-station fee-basis, consultants and attendings, without compensation (WOC) employees, trainees, and individuals appointed, or on detail, to the Veterans Health Administration (VHA) under the Intergovernmental Personnel Act. This policy also covers contract personnel and volunteers in certain categories.

**2. POLICY:** It is VHA policy that position risk and sensitivity designations be made following the criteria in Department of Veterans Affairs (VA) Handbook 0710, a corresponding level of background investigation be initiated and adjudicated in a timely manner as required by the Code of Federal Regulations (CFR) and the Office of Personnel Management (OPM).

**3. RESPONSIBILITIES** *NOTE: The items listed cannot be modified; however, additional optional items may be added.*

a. **Facility Director.** The facility Director is responsible for ensuring that:

(1) The Personnel Suitability and Security Program is operating in accordance with applicable VA and VHA Directives and Policies.

(2) Electronic fingerprinting equipment is properly used and maintained.

(3) A Special Agreement Check (SAC) is initiated prior to, or simultaneous with, entry on duty for all new appointees and contractors.

(4) A SAC is initiated prior to entry on duty for all new volunteers who have assignments:

(a) Associated with home health care,

(b) Involving the provision of patient care or who are working alone with patients,

(c) Involving contact with pharmaceuticals or other biological agents,

(d) That provide access to patient records and electronically Protected Health Information (ePHI).

(e) Involving clinical research,

(f) That provide access to any VA computer system, or

(g) With access to any sensitive information (e.g., Privacy Act or protected information).

**NOTE:** Sensitive data and/or information is described as information, obtained from various information systems, that contains identifiers such as names; social security numbers; demographics; medical information; fiscal information, such as patient billing; fiscal data which by regulation cannot be released to the public; and mission critical information.

(5) That higher level background investigations are requested and processed in a timely manner for employees, contractors, and volunteers who require a higher level of investigation than the SAC.

(6) Documentation is complete for all preceding actions, and that this documentation is available for review.

**NOTE:** Employees, contractors, and volunteers with assignments above the low-risk or non-sensitive levels must receive the appropriate level of investigation required by 5 CFR Parts 731 and 732, and VA Handbook 0710.

(7) Internal Controls are in place. Internal Controls are required to ensure that this policy, processes, and procedures described are in place and effectively implemented. Internal controls must be reviewed annually and revised, as indicated by the results, to reflect that critical areas of concern are reviewed, and that national internal control review requirements are met.

(8) Care Line Managers, Department Managers, Supervisors and Contracting Officers:

(a) Provide assistance to the Human Resources Manager in preparing the quarterly report in conjunction with the Human Resources Manager; and

(b) Ensure appropriate follow-up on reported deficiencies to ensure compliance for those issues for which they are responsible as outlined in VHA Directive 0710 and this Handbook.

b. **Human Resources Officer.** The Human Resources Officer is responsible for ensuring that:

(1) Appropriate position risk and sensitivity designations are made for appointees.

(2) Appropriate level of background screening is completed.

(3) Results of background screenings, including SACs, are adjudicated within required timeframes for all appointees, including: on station fee basis, consultants and attendings; WOC employees; students, interns, and residents; volunteers; and individuals appointed or on detail to

VHA under the Intergovernmental Personnel Act. The adjudication of background screenings of trainees is to be performed in consultation with facility education leadership.

(4) Hiring and continued employment are consistent with the position's national security and/or public trust responsibilities.

(5) Positions are given appropriate sensitivity designation based on National Security and Public Trust responsibilities.

(6) Applicants and/or incumbents in National Security or Public Trust positions with a sensitive designation are referred to the VA Central Office, Personnel Security Office (07C) for appropriate investigation.

(7) The risk and sensitivity designation process is overseen to ensure that position risk and sensitivity designations are consistently applied to all positions, in accordance with the Code of Federal Regulations and VA Directives.

(8) That applicants and incumbents receive the appropriate background investigation and that the investigation is conducted in a timely and consistent manner.

(9) That the Human Resource (HR) Specialist(s) with responsibility for and authority to make position risk and sensitivity designations has received appropriate training on Position Risk and Sensitivity Designations.

(10) The creation and maintenance of a personnel security database.

(11) That required VA forms are completed and filed in accordance with applicable regulations in the employee's personnel folder.

(12) That position risk and sensitivity designations are periodically reviewed for accuracy.

(13) The results of background investigations are reviewed and analyzed and that suitability adjudication for applicants and appointees in low-risk, non-sensitive positions is conducted.

(14) Initiating or taking appropriate action for actionable findings when cases result in negative adjudication.

(15) Documentation is complete for all preceding actions and that this documentation is available for review.

c. **Service Chiefs, Care Line Managers, Department Managers, and Supervisors in Comparable Positions.** Service Chiefs, Care Line Managers, Department Managers, and Supervisors in comparable positions are responsible for:

(1) Making appropriate risk and sensitivity designations for contractor and volunteer activities in their organizations; and

(2) Recording these designations on VA Form 2280, Position Risk and Sensitivity Level Designation.

(3) Ensuring that employees and others under their supervision, including station fee basis, consultants, and attendings; WOC employees; trainees including students, interns, and residents; volunteers in certain categories; work study personnel; and individuals appointed or detailed to VHA under the Intergovernmental Personnel Act, complete necessary fingerprint and paperwork processes timely so background screenings and investigations can be completed.

(4) Assigning appropriate risk and sensitivity designations for contractor activities in their organizations with the assistance of Human Resources.

(5) Documentation is complete for all preceding actions, and that this documentation is available for review.

d. **Contracting Officers.** Contracting Officers are responsible for:

(1) Ensuring contracts include provisions for appropriate background investigations.

(2) Adjudicating the results of background investigations for contractors.

(3) Ensuring the contract includes provisions for appropriate background screening and investigation of contract personnel having access to sensitive computer systems and/or records, including patient records and/or electronically Protected Health Information (ePHI), which are subject to the Privacy Act and the Health Insurance Portability and Accountability Act of 1966 (HIPAA).

(4) Providing instruction to the contractor regarding the procedures for obtaining the required background investigation(s).

(5) Ensuring documentation is complete for all preceding actions, and that this documentation is available for review.

***NOTE:*** *The Security and Investigations Center (SIC) is responsible for adjudication of background investigations for contractors at the NACI level and above (low, moderate and High-Risk level positions).*

e. **Employees (including Trainees).** Employees (including trainees) are responsible for:

(1) Completing necessary fingerprint and paperwork processes timely, so that background screenings and investigations can be completed; and

(2) Ensuring that their responses are true, complete, and correct to the best of their knowledge and belief.

f. **The Human Resources Manager and/or Compliance Officer.** The Human Resources Manager and/or Compliance Officer is responsible for ensuring that the facility Director receives, on a quarterly basis, the results of a random sample of 10 percent of new appointments within the previous quarter and specific categories of screening as identified to verify the following:

- (1) Documentation showing subjects were fingerprinted.
- (2) Documentation showing that a request for a SAC was completed.
- (3) Documentation showing that SAC results were adjudicated within 5 business days of receipt.
- (4) For those employees requiring a higher level of investigation than a SAC, documentation showing that a request was made to the OPM for that investigation and that follow-up with OPM occurred to ensure timely response to the request. The length of time it took OPM to respond needs to be included in the documentation.
- (5) Documentation showing that for employees requiring a NACI or higher level investigation, and who have been on the rolls for 9 to 12 months, the NACI or higher investigation results was adjudicated within OPM's 90-day standard.
- (6) Documentation showing that the Health Integrity Practitioner Data Bank (HIPDB) was queried for all employees, volunteers, and other workforce members as applicable.
- (7) Documentation showing that the List of Excluded Individuals and Entities (LEIE) was previewed for all appointees, to include contractors, volunteers, WOC employees.

## **5. REFERENCES**

- a. VA Directive and Handbook 0710.
- b. VHA Directive 0710.
- c. Title 5 CFR Part 731 and Part 732.
- d. Executive Order 10450.
- e. The Federal Information Security Management Act.
- f. Office of Management and Budget (OMB) Circular A-130.
- g. NIST Special Publication 800-53.
- h. Homeland Security Presidential Directive 12 (HSPD-12), "Policy for a Common Identification Standard for Federal Employees and Contractors" (August 27, 2004).

i. Federal Information Processing Standards 201 (FIPS 201), “Personal Identity Verification (PIV) of Federal Employees and Contractors, (February 25, 2005), as amended by FIPS 201 (March 2006).

j. OMB Memorandum M-05-24, “Implementation of Homeland Security Presidential Directive (HSPD) 12 – “Policy for a Common Identification Standard for Federal Employees and Contractors” (August 5, 2005).

k. VA Directive 0735, “Personal Identity Verification (PIV) of Federal Employees and Contractors.”

**6. FOLLOW-UP RESPONSIBILITY:** Human Resources (05). Questions may be addressed (Medical center or facility insert telephone number)

**7. RECISSIONS:** None. **NOTE:** *(Medical center or facility insert the automatic review date.)*

Signature Block for the Facility Director

DISTRIBUTION:

**DEPARTMENT OF VETERANS AFFAIRS (VA) FORM 10-0452, PERSONNEL  
SUITABILITY AND SECURITY QUARTERLY FILE REVIEW**

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