STAFFING

1. **REASON FOR ISSUE:** To revise the Department of Veterans Affairs (VA) qualification standard for the appointment of Blind Rehabilitation Specialist (BRS), General Schedule (GS)-0601, occupation appointed under the authority of 38 U.S.C. § 7401(3) and 38 U.S.C. § 7405 (a)(1)(B) in VA.

2. **SUMMARY OF CONTENTS/MAJOR CHANGES:** This handbook contains mandatory procedures on staffing. The pages in this issuance replace the corresponding page numbers in VA Handbook 5005, Staffing, Appendix G41. The revised standards are effective on the date of this publication; however, no action may be taken by the Human Resources Officer to convert or promote employees until training and guidance is received on the implementation on the standard. These changes will be incorporated into the electronic version of VA Handbook 5005 that is maintained on the Office of Human Resources Management website. Significant changes include:

   a. Removes the GS-7 grade level as the entry level and changes the GS-9 grade level to the entry level.

   b. Adds additional certification of Assistive Technology-Certified Assistive Technology Instructional Specialists.

   c. Removes Non-Certified BRS Hired Temporary as an exception.

   d. Revises the assignment for the BRS, GS-11 grade level, and adds individual assignments for the BRS (VIST Coordinator-Development Level), GS-11 grade level.

   e. Revises the BRS (VIST Coordinator), GS-12 grade level, BRS (Sole Practice), GS-12 grade level, and BRS (Supervisor), GS-12 grade level.

   f. Revises the National Program Consultant, GS-13 grade level, Assistant Chief, GS-13 grade level, and Chief, GS-13 grade level.

   g. Adds the title of Chief, GS-14 grade level.

   h. Adds new assignments for GS-12 BRS (Admission Coordinator) and GS-13 BRS (Advanced Practice).

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

4. **RELATED DIRECTIVES:** VA Directive 5005, Staffing.

**CERTIFIED BY:**

/s/
Melissa S. Glynn, Ph.D.
Assistant Secretary for
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**DISTRIBUTION:** Electronic only

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

/s/
Daniel R. Sitterly
Assistant Secretary for
Human Resources and Administration/
Operations, Security, and Preparedness
APPENDIX G41. BLIND REHABILITATION SPECIALIST QUALIFICATION STANDARD

GS-0601
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 knowledge of the concepts, principles, and practices of blind and vision rehabilitation and the use of assessments, therapies, and technologies to improve the independent function, quality of life and adjustment for Veterans who are blind or visually impaired. BRSs evaluate Veterans 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 Veterans. Instructional activities are directed toward achieving therapeutic objectives for Veterans 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 [impairment].

NOTE: Blind Rehabilitation Outpatient Specialist (BROS) Qualification Standard is contained in VA Handbook 5005, Part II, Appendix G42.

2. [DEFINITIONS.

a. Journey Level. The BRS full performance level for this qualification standard is the GS-11 grade level. The full performance level for BRS VIST Coordinator is the GS-12 grade level.

b.] Creditable Experience. To be creditable, the experience must demonstrate possession of the knowledge, skills, and abilities associated with current blind and vision rehabilitation practice, as outlined in the current scope and standards of practice for blind and vision rehabilitation. Applicants may have one or more of the following:

(1) The equivalent of one 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 closely related rehabilitation therapeutic intervention program.

c. Quality of Experience. Work as a graduate BRS directly related to the position to be filled; and 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. 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.
d. **Part-Time Experience.** Part-time experience is creditable according to its relationship to the full-time work week. For example, one week of full-time credit is equivalent to two weeks of part-time work.

e. **Graduate Education.** Master’s[Doctoral] degrees may be substituted for experience through the GS-11 grade level [(Master’s degree up to the GS-9 grade level, Doctoral degree up to the GS-11 grade level).] 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 degree, it must have been completed after the individual met the basic requirements for appointment.

f. **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.

[3. **BASIC REQUIREMENTS.**]

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

b. **Education**

(1) The individual must have earned:

(a) A bachelor’s degree from an accredited college or university with a major field of study in blind or vision rehabilitation, closely related program in rehabilitation, special education for the visually impaired, family and consumer science education, or technology and industrial arts education.

OR,

(b) A bachelor’s degree from an accredited college or university (without a major field of study as outlined in (1)(a) above) that included, or was supplemented by, at least one of the following:

i. At least 30 semester hours of directly related, upper level undergraduate courses (e.g., at least 200-course level or higher, or as identified by the college or university).

ii. One full year of directly related graduate level coursework (typically at least 15-18 semester hours).

iii. A certificate from an accredited college or university in the core curriculum in orientation and mobility, vision rehabilitation therapy, assistive technology for blind and visually impaired
individuals, or low vision therapy and a directly related practicum/internship in the occupation, either included in the degree or post-degree.

iv. 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 the GS-11 grade level 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, closely related professional credential in special education or rehabilitation. [ ]

**NOTE:** *The ACVREP administers four certification programs: Low Vision Therapy, Orientation and Mobility, Assistive Technology Instruction and Vision Rehabilitation Therapy. They may then use the designation for the certification they hold (as listed in subparagraph (2)) below:*

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

(b) Orientation and mobility training - Certified Orientation and Mobility Specialists (COMS®).

(c) Communication and daily living therapy - Certified Vision Rehabilitation Therapists (CVRT®).

[(d) Assistive Technology - Certified Assistive Technology Instructional Specialists (CATIS®).

(2) BRS Advanced Practitioners at the GS-13 grade level must possess two certifications awarded by ACVREP.

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

(a) Any certification via the ACVREP,

OR,
(b) Individuals appointed based on experience 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-0601 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 (CRCC) - Certified Rehabilitation Counselor, (CRC),

OR,

(d) Individuals appointed based on experience in other health care occupations must be licensed or certified by a state to independently practice in their field. If appointed as a VIST Coordinator, such individuals are appointed to the GS-0601 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 [are not limited to Marriage and Family Therapist or Licensed Mental Health Counselor.]

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 based on experience as a social worker, rehabilitation counselor, or equivalent, relevant professional counseling credential in rehabilitation, the 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 in this standard, but who met the qualifications applicable to the position at the time they were appointed to it, the following provisions 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 credential(s) 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.] **English Language Proficiency.** Candidates will not be appointed under authority of 38 U.S.C. chapters 73 or 74, to serve in a direct patient-care capacity in VHA who are not proficient in written and spoken English. See Chapter 2, section D, paragraph 5a, this part.

[4. GRADING 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 two grade interval structure for professional/scientific professions found in VA Handbook 5005, Part II, Appendix G17.

[ ]

a. **BRS, GS-9** [(Entry Level)]

   (1) **Experience.** Bachelor’s degree and completion of one year of experience.

   OR,

   (2) **Education.** Completion of at least two full years of progressive graduate education or a master’s degree in a field directly related to the position.

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

   (4) **Demonstrated Knowledge, Skills, and Abilities (KSAs).** In addition to the education and experience above the candidate must demonstrate all the following KSAs:

   (a) Knowledge of policies and procedures of the blind/vision rehabilitation service.

   (b) Knowledge of administration and interpretation of assessments and evaluations in blind/vision rehabilitation.
(c) Ability to develop a basic written blind/vision rehabilitation plan from assessment results and develop more complex plans with consultation from supervisor.

(d) Skill in instructing [Veterans] and families in a meaningful rehabilitation program and applying blind/vision rehabilitation therapeutic techniques.

(e) Ability to recommend appropriate blind/vision prosthetic devices for Veterans within the scope of practice.

(f) Ability to serve as team coordinator for assigned Veterans during their rehabilitation programs.

(5) **Assignment.** Individuals at this grade level serve as [entry level] 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 [Veteran cases.]

[b. **BRS, GS-11 (NOTE:) Full performance level for BRS who are not VIST Coordinators.**]

(1) **Experience.** In addition to meeting the basic requirements, completion of one year of progressively complex experience equivalent to the GS-9 grade.

OR,

(2) **Education.** Three years of progressively higher level graduate education leading to a Doctoral Degree; or Doctoral Degree in Blind Rehabilitation or a directly related field.

(3) **Certification.** Certification is required at this grade level and above. Staff BRS candidates must meet the certification requirements in paragraph 3c(1) above. BRSs at the GS-11 grade level must have at least one certification from ACVREP or a related, equivalent, professional certification.

(4) **Demonstrated Knowledge, Skills, and Abilities.** In addition to meeting the KSAs described at the GS-9 grade level, the candidate must demonstrate all the following KSAs:

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

(b) Ability to properly assess Veterans having diverse and multiple disabilities to make recommendations for blind/vision rehabilitation therapeutic interventions.

(c) Skill in writing a blind/vision rehabilitation plan that includes evaluation information from multiple disciplines with observable, measurable goals and that identifies specific outcomes.
(d) Skill in instructional methods and learning principles.

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

(f) Ability to recommend appropriate blind/vision rehabilitation prosthetic devices for Veterans within scope of practice, making adaptations and modifications as required.

(5) Assignments. This is the full performance level for BRSs who are not VIST Coordinators. Assignments at this grade level include the following:

(a) Staff BRS. In addition to providing services to Veterans described at the GS-9 grade 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 Veterans in the specialty area; serving as a mentor to other therapists who are evaluating and treating Veterans in the content specialty or program area; serving as internship supervisor to students who are completing their supervised practice; and providing in-service and clinical training programs in the content specialty or program area.

(b) BRS (Sole Practice). 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, and provide in-service and clinical training programs in the content specialty or program area.

c. BRS GS-11 (VIST Coordinator-Developmental Level)]

(1) Experience. In addition to meeting the basic requirements, completion of one year of progressively complex experience equivalent to the GS-9 grade level.

OR,

(2) Education. Three years of progressively higher level graduate education leading to a Doctoral Degree; or Doctoral Degree in Blind Rehabilitation or a directly related field.

(3) Certification. VIST Coordinator candidates must meet the certification requirements in paragraph 3c(3) above. BRSs who are VIST Coordinators may be drawn from traditional blind/vision rehabilitation backgrounds and from counseling backgrounds such as social work, vocational rehabilitation counseling, etc. VIST Coordinators may be credentialed/certified through any of the following:

(a) Certification via the ACVREP;

(b) Licensure via the Social Worker Licensure Board;

(c) Certification via the CRCC;
OR,

(d) Equivalent and relevant professional credential in counseling or rehabilitation. [Examples of other health care occupations may include but are not limited to Marriage and Family Therapists or Licensed Mental Health Counselors.]

(4) **Demonstrated Knowledge, Skills, and Abilities.** In addition to meeting the KSAs described at the GS-9 grade level, the candidate must demonstrate all the following KSAs:

(a) [Ability to communicate both orally and in writing with staff at all organizational levels; with Veterans and their family members; with community groups; and individuals with varying degrees of understanding about visual impairment.]

(b) Ability to assess Veterans having diverse and multiple disabilities to make recommendations for blind/vision rehabilitation therapeutic interventions.

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

(d) [Knowledge of VA blind and low vision rehabilitation treatment programs.]

(e) Skill in interpersonal relationships in dealing with patients, employees, other team leaders, managers and other stakeholders.

(f) Knowledge of psychological, rehabilitation, and counseling theories and principles.

(g) Ability to coordinate with various resources to identify suitable training programs.

(5) **Assignment.** 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 compensation and benefits, as well as VA and non-VA rehabilitation programs. In addition, VIST Coordinators work with Veterans and their families in readjustment counseling.

[d. BRS.] **GS-12 (VIST Coordinator-Full Performance Level)**

(1) **Experience.** In addition to meeting the basic requirements, completion of a minimum of one year of progressively complex experience equivalent to GS-11 grade level.

(2) **Certification.** VIST Coordinators must meet the certification requirements in paragraph 3c(3) above.
(3) **Demonstrated Knowledge, Skills, and Abilities.** In addition to meeting the KSAs described at the GS-11 grade level, the candidate must demonstrate all the following KSAs:

[(a) Skill to effectively communicate both orally and in writing with staff at all organizational levels, with Veterans and their family members, with community groups, and individuals with varying degrees of understanding.

(b) Ability to assess Veterans having diverse and multiple disabilities to make recommendations for therapeutic interventions.

(c) Skill in writing a blind/vision rehabilitation plan that includes evaluation information from multiple disciplines and contains observable, measurable goals that identify specific outcomes.

(d) Knowledge of VA and non-VA blind and low vision rehabilitation treatment programs.

(e) Skill in interpersonal relationships dealing with patients, employees, other team leaders, managers, and other stakeholders.

(f) Knowledge of psychological, rehabilitation, and counseling theories and principles.

(g) Ability to coordinate with various resources to identify and refer Veterans to suitable training programs.

(h) 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.

(4) **Assignment.** The GS-12 grade level is the full performance level for a VIST Coordinator. Individuals in this assignment will demonstrate mastery in adjustment counseling, coordinating access to services, assuring adequate compensation and benefits, and must conduct 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.
e. [BRS, GS-12 (Sole Practice)]

(1) **Experience.** In addition to meeting the basic requirements, completion of one year of progressively complex experience equivalent to the GS-11 grade level.

(2) **Certification.** Staff BRS candidates must meet the certification requirements in paragraph 3c(1) above.

(3) **Demonstrated Knowledge, Skills, and Abilities.** In addition to meeting the KSAs described at the GS-11 grade level, the candidate must demonstrate all the following KSAs:

- [(a) Knowledge and understanding of highly specialized, complex evaluations and diagnostic tests and procedures of blind/vision rehabilitation.]

- (c) Ability to properly assess Veterans having diverse and multiple disabilities to make recommendations for therapeutic interventions.

- (d) Skill in writing a blind/vision rehabilitation plan that includes evaluation information from multiple disciplines and contains observable, measurable goals that identify specific outcomes.

- (e) Ability to act as a subject matter expert in the blind/vision rehabilitation field and as a consultant, supervisor and/or mentor in evaluating and treating Veterans in specialty or program areas.

- (f) Ability to employ interventions and unusual motivational techniques and coordinate treatment with other professionals to achieve outcomes of the rehabilitation plan.

- (g) Ability to recommend appropriate blind/vision rehabilitation prosthetic devices for Veterans within the scope of practice, while making adaptations and modifications, as required.

- (h) Ability to independently develop, plan, and administer complex treatment programs.

- (i) Ability to communicate both orally and in writing with staff at all organizational levels, Veterans and their family members, community groups, and individuals with varying degrees of understanding.]

(4) **Assignment.** 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. Incumbent serves as member or consultant to specialty care teams. [Incumbent may oversee volunteers and/or may have part-time administrative clerk support. Incumbent serves as a subject matter expert, assuring that a complete range of skills is available for a diverse Veteran population at affiliated blind rehabilitation inpatient centers or outpatient clinics. Additional activities include evaluating new products and equipment and making recommendations concerning upgrades/new purchases that improve operations.]
[f. Supervisory BRS,] GS-12

(1) Experience. In addition to meeting the basic requirements, completion of a minimum of one year of progressively complex experience equivalent to the GS-11 grade level.

(2) Certification. BRS must meet the certification requirements in paragraph 3c(1) above.

(3) Demonstrated Knowledge, Skills, and Abilities. In addition to meeting the KSAs described at the GS-11 grade level, the candidate must demonstrate all the following KSAs:

[(a) Ability to plan, direct, mentor, and distribute work assignments to volunteers, assistants, interns, and/or Blind Rehabilitation Specialists at lower grade levels.]

(b) 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 Veterans in specialty or program areas.

(c) Ability to coordinate, motivate, and effectively manage staff and/or committee members to include organizing work, setting priorities, and delegating tasks and responsibilities.

(d) Ability to disseminate appropriate information through various media as a consultant or mentor.

(e) Skill in interpersonal relationships in dealing with Veterans, employees, other team leaders, managers, and other stakeholders.

(f) Ability to identify team group dynamics, objectively observe, and modify behaviors.

(g) Ability to apply decision-making principles to adjust programs on a day-to-day basis, develop short term and long-range goals, and plan for future utilization of resources.

[(h) Skill in developing, planning, and administering complex treatment programs.]

(4) Assignment. [The employee assigned to this position is located within an inpatient Blind Rehabilitation Center (BRC) and functions in a supervisory position for BRS professional staff at the GS-9 and GS-11 grade levels and who are not VIST Coordinators or Blind Rehabilitation Outpatient Specialists.] This employee serves as a subject matter expert, assuring that a complete range of skills are available for a diverse Veteran population at affiliated blind rehabilitation inpatient centers or outpatient clinics. At this level, the blind or vision rehabilitation program typically includes a variety of specialties, an extensive educational program, and data collection and review as well as 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.

**g. BRS, GS-12 (Admission Coordinator)**

1. **Experience.** In addition to meeting the basic requirements, completion of one year of experience as a BRS equivalent at the GS-11 grade level.

2. **Certification.** Candidates must meet the credentialing/certification requirements in paragraph 3c(1) above.

3. **Demonstrated Knowledge, Skills, and Abilities.** In addition to the education and experience above, the candidate must demonstrate all the following KSAs:

   a. Ability to plan, coordinate, and manage applications, admissions and discharges, and ensure provision of the appropriate clinical care for Veterans in an inpatient BRC.

   b. Ability to ensure that cooperative partnerships exist among Veterans, Service members and their families, VHA rehabilitation providers, community providers, and other stakeholders, to support a comprehensive blind rehabilitation program structure.

   c. Ability to develop, maintain, analyze, and present statistical and programmatic data and information related to BRC operations.

   d. Knowledge of budgetary and financial management processes, including VERA reimbursement, catastrophic disability, and beneficiary travel policies.

   e. Ability to perform the full range of supervisory duties, when authorized, which would include responsibility for assignment of work to be performed, competency assessments, performance evaluations, hiring decisions, and recommendations for awards, advancements, and disciplinary actions.

4. **Assignment.** 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 will be performed by the incumbent at least 25% of the time. This assignment may or may not be supervisory. BRS Admission Coordinator duties include, but are not limited to coordination, review, and management of all BRC applications; admissions; discharges; and waiting lists. The Admission Coordinator organizes clinical delivery of services, schedules the Veterans’ treatment program processes, admissions and discharges, and facilitates travel arrangements for Veterans to inpatient BRCs. Develop and maintain admission and discharge, wait time/wait list statistics, and other programmatic information to assist in coordinating reports to VACO, VISN, and the BRC Director, as well as the facility Chief of Staff. Counsels and advises VIST regarding prospective applicants. Maintains good relations with all relevant stakeholders,
including local, state, and regional agencies, and Veterans Service Organizations. Maintains various internal BRC data and tracking systems. Provides technical assistance in day-to-day operations, program planning, and special projects, as assigned. May provide direct patient care to Veterans, as deemed appropriate and necessary by the BRC Chief and/or designated supervisor. Admission Coordinators who are supervisors review and approve or disapprove leave requests; interview candidates for vacancies; and assume administrative responsibilities in the absence of the BRC Chief or supervisor. Represents administration at planning and team meetings as required/needed. Reports to Blind Rehabilitation Center (BRC) Chief and/or designated supervisor.

h. BRS, GS-13 (Advanced Practitioner)

(1) **Experience.** In addition to meeting the basic requirements, completion of one year of experience as a BRS equivalent at the GS-12 grade level.

(2) **Certification.** Candidates must meet the credentialing/certification requirements in paragraph 3c(2) above. Advanced Practitioners at the GS-13 grade level must achieve two ACVREP certifications to demonstrate mastery in two areas of blind rehabilitation.

(3) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the education and experience above, the candidate must demonstrate all the following KSAs.

(a) Ability to develop educational materials/in-service education curriculum for VA staff and providers, as well as non-VA personnel.

(b) Ability to act as a subject matter expert to create, update, and deploy models for best practice, including researching literature, developing clinical practice guidelines and guiding BRS professionals in applying these tools, as well as following up to evaluate outcomes of new practices.

(c) Ability to manage the implementation and evaluation of BRS programs.

(d) Skill to provide technical assistance in day-to-day operations, budget formulation, program planning, and special projects.

(e) Knowledge of scientific concepts and methodological principles related to vision impairment and blindness rehabilitation.

(f) Ability to analyze and use data effectively to manage workload, quality, performance, and productivity.

(g) Knowledge of telehealth policies and procedures, to include best practice for deployment, assessment, and training, to support and evaluate telehealth
(h) Ability to identify and develop recommendations for acquisition, training, and deployment of cutting edge technology.

(i) Skill in professional writing, such as technology evaluations, newsletters, letters to editors, etc., that are relevant, germane, and elevate the practice and profession of blind and vision rehabilitation.

(4) Assignment. For all assignments above the full performance level, the higher-level duties must consist of significant scope, administrative independence, complexity (difficulty) and a range of variety, as described in this standard, at the specified grade level, and will be performed by the incumbent at least 25% of the time. The Advanced Practitioner assists in the creation and implementation of instructional models for BRS programs and field training opportunities. Develops educational materials and in-service education classes for VA/non-VA agencies and personnel. Assists leadership in managing the development, implementation, and evaluation of blind rehabilitation programs that demonstrate best practices and services. Provides technical assistance in day-to-day operations, program planning and special projects, as assigned. Participates in modifications and proposed innovative methods for performance and quality improvement. Analyzes clinically appropriate data to support optimization of quality, performance, and productivity. Assists in maintenance and monitoring of records required for accreditation/risk management (Joint Commission and Commission on Accreditation of Rehabilitation Facilities). May provide direct patient care to Veterans, as deemed appropriate and necessary by the BRC Chief and/or designated supervisor. Develops recommendations for acquisition, training, and deployment of emerging technology. Demonstrates knowledge of current assistive/access technology (e.g., electronic and non-electronic emerging and currently available technology). Promotes telehealth services through a partnership within all service areas in BRS. Participates in, and assists with, resource allocation, budget planning, financial management, and execution of contracts within BRS. Develops strong relationships with Veterans, families, professional organizations, and other stakeholders within the general public. Creates opportunities to educate professionals and the public about blindness and BRS programs. Works with the BRC leadership team and other medical center leadership to formulate a marketing plan to promote BRS within VHA and the local community. Contributes to literature published in professional journals that elevate blind rehabilitation practice.

i. BRS] GS-13 (National Program Consultant)

(1) Experience. In addition to meeting the basic requirements, completion of one year of experience as a BRS equivalent to the GS-12 grade level.

(2) Certification. Candidates must meet the credentialing/certification requirements in paragraph 3c(1) and (2) above. VIST Coordinators must meet the certification requirements in 3c(3) above.
(3) **Demonstrated Knowledge, Skills, and Abilities.** In addition to meeting the KSAs described at the GS-12 grade level, the candidate must demonstrate all the following KSAs:

(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.

(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 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.

(4) **Assignment.** [For all assignments above the full performance level, the higher-level duties must consist of significant scope, administrative independence, complexity (difficulty) and a range of variety, as described in this standard, at the specified grade level, and will be performed by the incumbent at least 25% of the time. The employees assigned as] the 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 instructional models for training, perform ongoing review and evaluation of programs and services, and report findings to VA Central Office. NPCs articulate findings from data and research for programmatic quality assurance.

[j. Supervisory BRS,] GS-13 (Assistant Chief)

(1) **Experience.** In addition to meeting the basic requirements, completion of one year of experience as a BRS equivalent to the GS-12 grade level.
(2) **Certification.** Candidates must meet the credentialing/certification requirements in paragraph 3c(1) and (2) above. VIST Coordinators must meet the certification requirements in 3c(3) above.

(3) **Demonstrated Knowledge, Skills, and Abilities.** In addition to meeting the KSAs described at the GS-12 grade level, the candidate must demonstrate all the following KSAs:

(a) Ability to balance responsibilities and 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.

(4) **Assignment.** [For all assignments above the full performance level, the higher-level duties must consist of significant scope, administrative independence, complexity (difficulty), and a range of variety, as described in this standard, at the specified grade level, and will be performed by the incumbent at least 25% of the time.] Assistant Chiefs serve as full assistants to Blind Rehabilitation Chief (BRC). Assistant Chiefs support the service chief and have full responsibility for all professional areas in a service-level department in the absence of the service chief. Assistant Chiefs exercise supervision, administrative management, and direction of 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 BRS.

[k. Supervisory BRS,] GS-13 (Service Chief)

(1) **Experience.** In addition to meeting the basic requirements, completion of one year of experience as a BRS equivalent to the GS-12 grade level.
(2) **Certification.** Candidates must meet the credentialing/certification requirements in paragraph 3c(1) and (2) above. VIST Coordinators must meet the certification requirements in 3c(3) above.

(3) **Demonstrated Knowledge, Skills, and Abilities.** In addition to meeting the KSAs described at the GS-12 grade level, the candidate must demonstrate all the following KSAs:

(a) Ability to supervise, motivate, and manage effectively a diverse clinical staff applicable to a small Blind Rehabilitation Center or equivalent program.

[(b) Skill in assessing qualifications and abilities of current and prospective employees.]

(c) Knowledge to apply administrative and human resources policies effectively.

[(d) Skill to organize work, set priorities, delegate tasks and responsibilities, and manage and direct the work of others to accomplish program goals and missions.]

(e) Ability to adapt to new and changing work conditions, contingencies, and staffing.

(f) 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.

(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.

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

[I. Supervisory BRS, GS-14 (Service Chief)]

(1) **Experience.** In addition to meeting the basic requirements, completion of one year of experience as a BRS equivalent to the GS-13 grade level.
(2) **Certification.** Candidates must meet the credentialing/certification requirements in paragraph 3c(1) and (2) above. VIST Coordinators must meet the certification requirements in 3c(3) above.

(3) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the education and experience above the candidate must demonstrate all the following KSAs:

[(a) Skill] to supervise, motivate, and manage effectively a diverse clinical staff applicable to a large blind rehabilitation center or equivalent program.

(b) Ability to assess qualifications and abilities of current and prospective employees.

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

(d) Skill to organize work, set priorities, delegate tasks and responsibilities and to manage and direct the work of others to accomplish program goals and missions.

(e) Ability to [adapt] to new and changing work conditions.

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

(g) 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.

(4) **Assignment.** [For all assignments above the full performance level, the higher-level duties must consist of significant scope, administrative independence, complexity (difficulty), and a range of variety, as described in this standard, at the specified grade level, and will be performed by the incumbent at least 25% of the time.] 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.
5. DEVIATIONS.

a. An approving 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 based on demonstrated competence to meet the requirements of the proposed grade.

b. Under no circumstances will the educational or certification requirements be waived.

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