

STAFFING

- 1. REASON FOR ISSUE:** To establish a Department of Veterans Affairs (VA) qualification standard for the Recreation and Creative Arts Therapist, GS-0638, occupation appointed under 38 U.S.C. § 7401(3) and 38 U.S.C. § 7405(a)(1)(B).
- 2. SUMMARY OF CONTENTS/MAJOR CHANGES:** This handbook contains mandatory procedures on staffing. This policy establishes the Recreation and Creative Arts Therapist occupation under VA's title 38 hybrid excepted service personnel system, in accordance with the authority established under the "Caregivers and Veterans Omnibus Health Services Act of 2010," (Public Law 111-163). Authority is given to the Secretary of the VA under 38 U.S.C. § 7402 to prescribe qualifications for occupations identified in, or established under 38 U.S.C. § 7401(3), and 38 U.S.C. § 7405(a)(1)(B). This qualification standard is effective on the date of this publication. This new qualification standard will be incorporated into the electronic version of VA Handbook 5005 that is maintained on the [Office of Human Resources Management Website](#).
- 3. RESPONSIBLE OFFICE:** Recruitment and Placement Policy Service (059), Office of Human Resources Management.
- 4. RELATED DIRECTIVE:** VA Directive 5005, Staffing.
- 5. RESCISSIONS:** None.

CERTIFIED BY:

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

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**[APPENDIX G60. RECREATION AND CREATIVE ARTS THERAPIST
QUALIFICATION STANDARD
GS-0638
Veterans Health Administration**

1. **COVERAGE.** The following are requirements for appointment as a recreation therapist or creative arts therapist (art, dance/movement, drama, music), in the Veterans Health Administration (VHA). Recreation and creative arts therapists perform a wide variety of interventions, which contribute to the overall health of Veterans. The work requires a professional knowledge of recreation therapy or creative arts therapy, and skill in applying a wide range of theories, principles, and methodologies in the practice of recreation therapy or creative arts therapy. These requirements apply to all VHA recreation and creative arts therapists in the General Schedule (GS)-0638 series.
2. **DEFINITIONS.**
 - a. **Journey Level.** The full performance level (FPL) for this qualification standard is at the GS-11 grade level.
 - b. **Creditable Experience.** To be creditable, the experience must have required the use of knowledge, skills, and abilities associated with current recreation or creative arts therapy practice. Experience satisfying this requirement may be paid or non-paid employment as a recreation or creative arts therapist in the health care field.
 - c. **Quality of Experience.** Qualifying experience must be at a level comparable to a recreation or creative arts therapist at the next lower grade level of the position being filled. 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 as a recreation or creative arts therapist is creditable according to its relationship to a full-time work week. For example, a recreation or creative arts therapist employed 20 hours per week, or on a half time basis, would receive one work week credit for each two weeks of service.
 - e. **Large Affiliate Network.** Large affiliate networks consist of complexity level 1, complexity level 2, or complexity level 3 VHA facilities, where recreation and/or creative arts therapy services provide full, wide-reaching, and well-developed clinical service operations. Recreation and/or creative arts programs with large affiliate networks are integrated within multiple healthcare programs focusing on services for chronic physical and mental health illnesses and disabling conditions.

3. BASIC REQUIREMENTS.

- a. **Citizenship.** Citizen of the United States (U.S.). (Non-citizens may be appointed when it is not possible to recruit qualified candidates in accordance with 38 U.S.C. § 7407(a)).
- b. **Education.** The following education requirements apply to the recreation therapist, creative arts therapist (art), creative arts therapist (dance/movement), creative arts therapist (drama), and creative arts therapist (music):

(1) Recreation Therapist

(a) A bachelor's degree or higher, from an accredited college or university, with a major in therapeutic recreation or recreation/leisure, with an option and/or emphasis in therapeutic recreation. The degree must be approved by the National Council for Therapeutic Recreation Certification (NCTRC);

OR,

(b) A bachelor's degree or higher in any field from an accredited college or university and must be a certified therapeutic recreation specialist (CTRS). The degree must be approved by the NCTRC. If hired under this education, the certification cannot be waived.

(2) Creative Arts Therapist (Art)

(a) A master's degree or higher, from an accredited college or university, with a major in art therapy approved by the American Art Therapy Association on or before June 30, 2016. If the degree is received after June 30, 2016, a master's degree or higher from an accredited college or university, with a major in art therapy, must be accredited by the Council on Accreditation of Art Therapy Education: a committee of the Commission on Accreditation on Allied Health Education Program.

OR,

(b) A master's degree in a related field, plus graduate coursework and supervised field experience in art therapy. Acceptable related fields include: Counseling, Marriage and Family Therapy, Social Work, Psychology, Addictions Counseling, Psychiatric Nursing, and Psychiatry, AND must possess a full, current, and unrestricted registration as a Registered Art Therapist (ATR) approved by the Art Therapy Credentials Board. If hired under this education, the registration cannot be waived.

(3) Creative Arts Therapist (Dance/Movement)

- (a) A master's degree or higher, from an accredited college or university, with a major or an emphasis in dance therapy or dance/movement therapy. The degree must be approved by the American Dance Therapy Association (ADTA).

OR,

- (b) A master's degree or higher, from an accredited college or university, and must be a board-certified dance/movement therapist (BC-DMT) approved by the Dance Movement Therapy Certification Board (DMTCB). If hired under this education, the certification cannot be waived.

NOTE. Dance/movement therapy coursework that began on or after March 15, 2013, must have been approved by the ADTA subcommittee for the approval of alternate route courses.

(4) Creative Arts Therapist (Drama)

- (a) A master's degree or higher, from an accredited college or university, with a drama degree program approved by the North American Drama Therapy Association (NADTA).

OR,

- (b) A master's degree or higher, from an accredited college or university, and must be a registered drama therapist (RDT). The RDT is granted by the NADTA and indicates that one has met the educational requirements and achieved competency in the practice of drama therapy. If hired under this education, the registration cannot be waived.

(5) Creative Arts Therapist (Music)

- (a) A bachelor's degree or higher, from an accredited college or university, in music therapy, or in music with an emphasis in music therapy. The degree must be approved by the National Association for Schools of Music and/or the American Music Therapy Association.

OR,

- (b) A bachelor's degree or higher, from an accredited college or university, and must be a board-certified music therapist (MT-BC) approved by the Certification Board for Music Therapists (CBMT). If hired under this education, the certification cannot be waived.

- (c) **Foreign Education.** To be creditable, education completed outside the U.S. must have been submitted to a private organization that specializes in the

interpretation of foreign educational credentials. The private organization must deem such education at least equivalent to that gained in conventional U.S. programs.

c. Registration

- (1) Creative Arts Therapy (Art).** Must possess a full, current, and unrestricted registration with the ATR. If hired under paragraph 3b(2)(b), registration cannot be waived.
- (2) Creative Arts Therapy (Drama).** Must possess a full, current, and unrestricted registration as an RDT. If hired under paragraph 3b(4)(b), registration cannot be waived.

d. Certification

(1) Required Certification

- (a) Recreation Therapist.** Applicants must be certified in recreation therapy as a CTRS by the NCTRC. If hired under paragraph 3b(1)(b), certification cannot be waived.
- (b) Creative Arts Therapy (Dance/Movement).** Applicants must be board-certified in dance/movement therapy by the DMTCB. If hired under paragraph 3b(3)(b), certification cannot be waived.
- (c) Creative Arts Therapy (Music).** Applicants must be a MT-BC approved by the CBMT. If hired under paragraph 3b(5)(b), certification cannot be waived.

(2) Exception. Non-registered and/or non-certified applicants, who otherwise meet the eligibility requirements for registration and/or certification, may be given a temporary appointment as a graduate recreation or creative arts therapist, under the authority of 38 U.S.C. § 7405(c)(2)(B), for a period not to exceed two years. Applicants who fail to obtain registration and/or certification during this temporary full-time appointment may be terminated. The exception only applies to positions at the GS-7 and GS-9 level. For grade levels at or above the full performance level, the candidate must be registered and/or certified.

(3) Failure to Obtain Registration/Certification. In all cases, recreation and creative arts therapists must actively pursue meeting registration and/or certification requirements, starting from the date of appointment. At the time of appointment, the supervisor will provide the unregistered and/or uncertified recreation or creative arts therapist with the written requirement to obtain registration/certification, the date by which the registration and/or certification must be acquired, and the consequences for not becoming registered and/or certified by the deadline. Failure to become registered and/or certified within two years from the date of appointment will result in removal from the GS-0638 recreation and creative arts therapist occupation, and

may result in termination of employment.

(4) Loss of Credential. A recreation or creative arts therapist who fails to maintain the required registration and/or certification must be removed from the occupation, which may also result in termination of employment.

e. Grandfathering Provision. All persons employed in VHA as a recreation or creative arts therapist, 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 registration and/or certification 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, the following provisions apply:

- (1) Such employees may be reassigned, promoted up to, and including, the full performance (journeyman) level, or changed to lower grade within the occupation, but may not be promoted beyond the journeyman level, or placed in supervisory or managerial positions.
- (2) Employees who were 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 licensure/registration/certification, that meet all the basic requirements of this qualification standard must maintain the required credentials as a condition of employment in the occupation.
- (4) Recreation and creative arts therapists who are converted to title 38 hybrid status under this provision and subsequently leave the occupation lose protected status and must meet the full VA qualification standard requirements, in effect at the time of reentry, as a recreation or creative arts therapist.

f. Physical Requirements. See VA Directive and Handbook 5019.

g. English Language Proficiency. Must be proficient in spoken and written English, as required by 38 U.S.C. § 7403(f).

4. GRADE REQUIREMENTS.

a. Creditable Experience

(5) Knowledge of Current Professional Recreation Therapy or Creative Arts Therapy Practices. To be creditable, the experience must have required the use of knowledge, skills, and abilities (also referred to as “clinical competencies”) associated with current professional recreation or creative arts therapy practices.

PART II

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Evidence of such experience includes private practice, U.S. military services, local/state/federal government organizations, for profit/non-profit organizations, health care, or educational facilities.

(6) **Quality of Experience.** Qualifying experience must be at a level comparable to the next lower grade level. Experience satisfying this requirement must be active professional practice, which may be paid or non-paid employment as a recreation or creative arts therapist.

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

c. Recreation Therapist

(1) Recreation Therapist, GS-7

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

(b) **Assignment.** Employees at this level serve in an entry level position as a recreation therapist. They work under the direct supervision of a recreation or creative arts therapist, at or above the full-performance level, or a designated supervisor in a clinical environment. Employees have knowledge of their respective discipline, and work with guidance from higher-level or supervisory staff. Established treatment procedures are substantially adapted and applied for acutely ill patients. Employees at this level would not be assigned work at a community-based outpatient clinic (CBOC), unless supervision is on site.

(2) Recreation Therapist, GS-9

(a) **Experience/Education.** At least one year of creditable experience at the next lower grade level, or a master's degree in recreation therapy may be substituted for the required one year of professional recreation therapist experience.

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

i. Knowledge of assessment tools and treatment for the diagnosis or disability of the patient.

ii. Knowledge to interpret and apply all health and safety regulations, to minimize and mitigate risks in the provisions of patient care, and environmental maintenance.

iii. Ability to effectively communicate and educate patients, families, caregivers, and other health care professionals to facilitate the treatment process.

iv. Knowledge to apply evidence-based and best practice therapeutic techniques

and interventions.

- (c) **Assignment.** Employees at this level serve in a developmental position as a recreation therapist. They work under general supervision to perform work in a clinical environment. Employees have knowledge of their respective discipline and work with guidance from higher level or supervisory staff to establish treatment procedures that are substantially adapted and applied for patients who are acutely ill. The recreation therapist may: conduct patient evaluations; analyze and interpret leisure, cognitive, and motor skill assessment data to develop individualized goals, objectives, and treatment plan of care; develop and select interventions to achieve patient goals; review patient progress; adapt or adjust the treatment plan and intervention strategies; implement therapeutic interventions that support measurable functional outcomes (interventions include, but are not limited to leisure education, reality orientation, memory, and gross motor activities); evaluate patient needs for additional, alternative, or termination of services; document patient's behavioral observations, progress, functioning, and intervention outcomes; and develop and provide collaborative services with other team members. Therapists at this level may be given general assignments in a program area.

(3) Recreation Therapist, GS-11

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Ability to adapt assessment tools and treatment interventions to address the complexity of the diagnosis or disabilities and demonstrate the clinical reasoning necessary to identify the need for further in-depth specific assessment of function and utilization of unconventional methods and techniques.
 - ii. Knowledge to independently interpret provider referrals and consults; and apply all health and safety regulations to minimize and mitigate risks in the provision of patient care and the environment of care.
 - iii. Skill in effectively communicating and educating, in a clear and concise manner, with patients, families, caregivers, and other health care professionals to facilitate the interdisciplinary treatment process.
 - iv. Skill in independently utilizing appropriate screening and evaluation techniques required to appropriately provide direct patient care in areas such as, but not limited to recommendations for recreation therapy assistive devices, including fit and function.

- v. Skill in independently applying evidence-based and best practice therapeutic techniques and interventions.
 - vi. Knowledge of the principles and techniques in recreation therapy assessment and the treatment of recreation, leisure, and biopsychosocial functional deficits.
- (c) **Assignment.** Employees serving at the full performance level function with independent judgment to administer and interpret recreation therapy assessments and utilize clinical competencies to develop unconventional assessment and interview approaches to effectively elicit information. They conduct, analyze, interpret, and report assessment data based upon functional domains (cognitive, sensory, social, affective, physical, and leisure). Incorporating the four-step process of assessment, planning, implementation, and evaluation of services delivered, the therapist constructs evidence-based recreation therapy interventions for treating patients with complex medical or mental health issues, such as polytrauma, traumatic brain injury (TBI), posttraumatic stress disorder (PTSD), spinal cord injury (SCI), substance use disorder/addictions, serious mental illness (SMI), and hospice/palliative care requirements. They provide direct patient care and receive guidance from higher-level supervisory staff members for only the most complex patients and require only general supervision. They review recreation therapy consults and conduct comprehensive evaluations. Based upon the assessment data, and in collaboration with other stakeholders, the therapist develops individualized treatment plans with measurable therapeutic goals and objectives including scope, duration, and treatment. They recommend adaptation, modification, and/or assistive technology to meet a patient's assessed needs and preferences in recreation therapy. Through the use of activity/task analysis, behavioral interventions, and therapeutic procedures, the therapist designs individualized treatment interventions to reduce stress, anxiety, and maladaptive behaviors; recover basic motor functioning and reasoning abilities; build confidence; and develop compensatory strategies to master critical life skills necessary to re-enter the community in a productive manner. Sophisticated techniques/strategies used to improve or support clinical outcomes may include, but are not limited to: developing positive patterns of behavior; relaxation and stress reduction; lifestyle alteration; social skills training; developing or improving (enhancing) self-esteem; developing and maintaining positive relationships; motor learning and training strategies; anger and pain management; identify risks; recovery support; lifestyle adjustment; conflict/problem resolution; adjustment to disability; and including coping with grief and loss. Resourcefulness is exercised in providing individualized, unique, effective methods and procedures when implementing therapeutic interventions including, but not limited to: assistive technology; cognitive behavioral skills; aquatic therapy; fitness and wellness; community accessibility/reintegration/transition; and adapted sports and leisure development. Patient needs are evaluated for additional, alternative, or termination of services. Intervention plans are monitored for effectiveness,

making modifications, as needed. Recreation therapists determine the effectiveness of protocols, modalities, and programs for targeted groups through quantitative analysis and identify potential risks and needs for adaptive interventions to facilitate improved biopsychosocial well-being. They participate in co-treatment opportunities, including but not limited to: neurological rehabilitation, mental health recovery programs, and palliative care related to the symptoms of a terminal illness. Discharge analysis and planning is conducted for community needs.

(4) Recreation Therapist, GS-12

- (a) **Experience.** In addition to meeting the basic requirements, completion of two years of progressively complex experience, which includes one year equivalent to the next lower grade directly related to the position being filled.
- AND,
- (b) **Certification.** Additional certification in a specialty treatment area in recreation therapy, such as, but not limited to: Physical Medicine/Rehabilitation, Geriatrics, Developmental Disabilities, Behavioral Health, Community Inclusion Services, Aquatic Exercise Therapy/Aquatic Therapy, Adapted Sports, Assisted Technology, Social Skills, etc., or in a directly related field such as, but not limited to: acceptance and commitment therapy, cognitive behavior therapy, dementia, dialectical behavioral therapy, gambling disorder, motivational interviewing, and/or wellness recovery action plan facilitator.
- (c) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Knowledge of best practice and evidence-based recreation therapy across multiple areas of practice.
 - ii. Ability to perform clinical services and balance organizational responsibilities while developing and implementing effective strategies with great autonomy, at a level compatible with the critical necessity for accuracy and completion.
 - iii. Ability to adapt assessment tools and treatment to the complexity of the diagnosis or disability and demonstrate the clinical reasoning necessary to identify the need for further in- depth specific assessment.
 - iv. Skill in developing, implementing, and modifying recreation therapy treatment plans in response to changing medical, physical, mental, psychological and/or psychosocial conditions, as well as comorbidities.
 - v. Ability to provide clinical guidance using the advanced knowledge of best practice and evidence-based recreation therapy implementation across multiple areas of practice.

- iv. Ability to provide educational opportunities and consultation to other health care practitioners and stakeholders about clinical practice and areas of expertise.
 - v. Ability to synthesize clinical processes and practice to guide and train the students' clinical/educational experience and skills.
 - vi. Knowledge of local and national licensing and certification boards and committees, to include guidelines and requirements.
 - vii. Ability to apply appropriate basic scientific methods, basic research design, and statistics.
- (c) **Assignment.** For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. This assignment occurs at active, affiliated VA facilities where specialized clinical treatment programs are provided. Clinical education coordinator positions generally would be found in complexity level 1 facilities or in facilities of lesser complexity levels where there is a large affiliate network where recreation and/or creative arts therapy programs are provided. The clinical education coordinator develops, coordinates, and administers clinical training programs and practicums which may include, but are not limited to: students, interns, therapy assistant trainees, associated health trainees, new facility employees, and/or other disciplines. Duties include, but are not limited to: establishing, negotiating, mediating, and maintaining affiliation agreements and MOU; serves as a liaison with the university to determine number of students, dates of training, and areas of training and assignment; designing, coordinating, conducting, and evaluating educational experiences for students, associated health trainees, and other personnel assigned to the clinical program for training; arranging and serving as an instructor for staff in-service training programs; creating innovative education/training/research opportunities for students and staff; assisting principal investigators or co-investigators and/or serving as principal investigator or co-investigator in projects of limited complexity or scope. The employee coordinates and directs staff participating in the clinical and administrative aspects of the program.

(6) Recreation Therapist (Program Coordinator), GS-12

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
 - i. Knowledge of management/administration principles, procedures, and practice, which includes supervision, consultation, negotiation, mediation, and

monitoring.

- ii. Ability to analyze clinically appropriate data and make recommendations to optimize quality, efficiency, performance, and productivity within services.
 - iii. 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; selection of staff; recommendation of awards, advancements, and disciplinary actions when appropriate.
 - iv. Ability to monitor and report on the status and progress of work, evaluate program quality to ensure that methods, deadlines, and standards have been met, and prioritize the workload.
 - v. Ability to effectively communicate goals, objectives, and focused initiatives to an interdisciplinary team, specialized clinical program, or subsection, as well as guide the team members on work methods, practices, standards, and procedures.
 - vi. Knowledge of regulatory requirements, interdisciplinary structure, and organizational structure to serve as a liaison between specialty care and other programs that would affect coordination of care, healthcare access, program evaluation, assessment, and planning future needs.
 - vii. Skill in employing recognized leadership and managerial methods and strategies, including interpersonal relations and conflict resolution in the management of employees, team leaders, and managers.
- (c) **Assignment.** For all assignments above the full-performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. The program coordinator is generally found in complexity level 1 facilities, or in facilities of lesser complexity levels where large affiliate network services are found. This assignment requires administrative direction and decision-making skills, interagency coordination of care, program evaluation and analysis, budgetary controls, and planning. The program coordinator has overall responsibility for planning, assessing, and evaluating programs to ensure proper coordination between care delivered by the program and overall delivery of healthcare within the facility. They are responsible for daily program operations, developing policies and procedures, and preparing reports and statistics for facility, Veterans Integrated Service Networks (VISNs), and national use. They assist with special administrative projects which include, but are not limited to: strategic planning, performance improvement plans, and coordination and training of interdisciplinary team members. They are responsible for the overall technical and administrative oversight for operations within their program area, including coordination of clinical assignments for multiple professionals

comprising of an interdisciplinary team. They may provide treatment to patients in a specialty program, as well as services in more complex and unconventional cases. The program coordinator may or may not have supervisory responsibilities but is responsible for broad program management. They ensure orientation and competency assessment of assigned staff and maintain interdepartmental relations with other services to accomplish medical center goals. They plan and develop policies, procedures, and goals. They interpret, implement, and educate staff on applicable VHA directives, handbooks, or other policies. When performing as a supervisor at this grade level, duties include: planning and scheduling work; assigning and evaluating work of subordinate staff; resolving problems which may interfere with patient assessment or treatment; accepting, amending, or rejecting completed work; appraising performance and recommending performance standards, assessing competency levels, ratings and awards, and disciplinary actions when appropriate; approving leave; identifying continuing education and training needs; and assigning delineated clinical privileges.

(7) Lead Recreation Therapist, GS-12

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
 - i. Knowledge of recreation therapy across multiple types of clinical practice.
 - ii. Ability to provide professional oversight and consultation for staff therapists and guidance to auxiliary staff, volunteers, and trainees.
 - iii. Ability to monitor and report on the status and progress of work and make adjustments to accomplish the workload, in accordance with established procedures.
 - iv. Ability to facilitate program development, outcome management, and strategic planning.
 - v. Ability to act as a liaison between staff, volunteers, or trainees, and serve as an immediate supervisor to resolve informal complaints and concerns.
 - vi. Knowledge of procedures and policies to provide oversight and training for auxiliary staff, volunteers, and trainees.
 - vii. Skill in coordinating clinical activities within the workgroup.

viii. Skill in leading and directing staff to implement evidence-based recreation and/or creative arts therapy approaches to patients with varied treatment needs and skill level.

(c) **Assignment.** For all assignments above the full-performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. Lead therapists are found in complexity level 1 facilities, or in facilities of lesser complexity levels where there are large affiliate network recreation and/or creative art therapy departments. Therapists at this level have experience that demonstrates advanced practice skills and sound clinical judgment across many areas of recreation and creative arts therapies. Leads are responsible for completing complex evaluations and treatments. They are required to apply advanced evaluation methodologies and treatment theories in the provision of care to a vast array of patients with differing functional impairments. They provide clinical practice guidance for other recreation and/or creative arts therapy staff. Lead therapists monitor work flow, make work assignments, provide input on performance, resolve daily workplace issues, and maintain efficient flow of patient care. The lead may provide primary reports to the chief for the daily delivery of department programs, reporting, staffing, and scheduling. Lead therapists provide training for the department's auxiliary staff, volunteers, and trainees. They provide instruction in maintenance of all service equipment and coordinate patient care plans to reduce redundancies and delays in patient treatment.

(8) Supervisory Recreation Therapist, GS-12

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Ability to provide treatment in complex cases and work with great independence.
 - ii. Ability to balance multiple responsibilities, set priorities, delegate tasks, meet multiple deadlines, analyze organizational problems, and develop and implement effective solutions.
 - iii. Ability to analyze organizational and operational problems to develop and implement solutions that result in efficient operations and use data effectively to manage workload, quality, performance, and productivity within the service.
 - iv. Skill in interpersonal relationships in dealing with employees, team leaders, and managers.

- v. Ability to use evidence-based practices, clinical practice guidelines in a professional area, and to guide the staff in applying these tools.
 - vi. Knowledge of organizational theories and strategies to positively impact the overall goals and objectives within the service.
 - vii. Knowledge related to administrative functions such as fiscal, material supply, equipment management, and clinical and program management.
- (c) **Assignments.** For all assignments above the full-performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. Supervisors at this level are typically found in complexity level 2 or level 3 medical centers, if needed. They are responsible for the supervision, administrative management, and direction of program services. They evaluate programs to ensure proper coordination with the overall delivery of health care. The incumbent has full administrative oversight for planning and directing the staff assignments in a variety of clinical settings. They have responsibility for general or technical supervision of key clinical and training programs. Typical duties include: assigning work, monitoring clinical performances of staff, resolving staff conflicts which may interfere with the delivery of services, identifying continuing education and training needs, preparing performance standards and ratings. They interview candidates for positions and recommend appointments, advancements, or administer disciplinary actions, when appropriate. The supervisor accepts, amends, or rejects completed work, and ensures that performance requirements are met. They ensure compliance with the accrediting agency and regulatory requirements, establish and monitor the quality of the pre-analytical processes as part of the overall service's quality management program and take corrective action, as needed. The supervisor ensures orientation and competency assessment of assigned staff. The supervisor develops policies and procedures, manages document control, develops performance standards, position descriptions, and functional statements and is responsible for professional and administrative management of an assigned area, to include time and attendance and leave management. The supervisor conducts department meetings at regular intervals to convey information to staff. The supervisor maintains interdepartmental relations with other services/departments, individuals, and community partners to accomplish medical center goals and may provide clinical treatment in the most complex of cases.

(9) Supervisory Recreation Therapist, GS-13

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience

above, the candidate must demonstrate all of the following KSAs:

- i. Ability to provide treatment in complex cases and work with great independence.
 - ii. Ability to balance multiple responsibilities, set priorities, delegate tasks, meet multiple deadlines, analyze organizational problems, and develop and implement effective solutions.
 - iii. Ability to analyze organizational and operational problems and use data to manage workload, quality, performance, and productivity within the service.
 - iv. Skill in interpersonal relationships in dealing with employees, team leaders, and managers, to include conflict management.
 - v. Ability to utilize evidence-based practices and clinical practice guidelines in a professional area and to guide the staff in applying these tools.
 - vi. Knowledge of organizational theories and strategies to positively impact the overall goals and objectives within the service.
 - vii. Knowledge related to administrative functions, such as fiscal, material supply, equipment management, and clinical and program management.
- (c) **Assignment.** For all assignments above the full-performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. Supervisors at this level are in complexity level 1 facilities, or in facilities of lesser complexity levels where there are large affiliate network recreation therapy and/or creative arts therapy programs. Supervisors are responsible for the supervision, administrative management, and direction of program services. They develop and initiate new treatment programs based upon current research findings. They evaluate programs to ensure proper coordination with the overall delivery of health care. The incumbent may be delegated full administrative and clinical responsibility for planning and directing staff assignments in a variety of clinical settings. They have responsibility for general or technical supervision of key clinical and training programs. Typical duties include: assigning work, monitoring clinical performances of staff, resolving staff conflicts which may interfere with the delivery of services, identifying continuing education and training needs, and other clinical and administrative responsibilities to ensure that the mission of the service and the medical center is satisfied. They interview candidates for positions, recommend appointments, advancements, or when appropriate, disciplinary actions. They make decisions that affect staff and other resources with wide latitude of control and independent judgment. The supervisor accepts, amends, or rejects completed work and ensures that performance requirements are met. The supervisor ensures compliance with accrediting agency and regulatory requirements, establishes and monitors the

quality of the pre-analytical processes as part of the overall service's quality management program and assures corrective action is initiated, as needed. The supervisor encourages professional development and creates an environment of learning, serving as a mentor to staff. They develop policies and procedures, manage document control, develop and rate performance standards, position descriptions and functional statements and are responsible for professional and administrative management of an assigned area, to include budget execution, and time and attendance management. The supervisor conducts department meetings at regular intervals to convey information to staff. The supervisor maintains interdepartmental relations with other services to accomplish medical center goals and may provide clinical treatment in complex cases. The supervisor fosters and maintains community contacts that augment and enhance service goals.

(10) Supervisory Recreation Therapist (Assistant Chief), GS-13

- (a) **Experience.** At least one year of creditable experience equivalent at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Skill in the analysis and application of scientific and clinical literature in a professional area.
 - ii. Knowledge of contemporary recreation therapy, creative arts therapy, rehabilitation, recovery, and wellness theories, techniques, practices, and related disciplines.
 - iii. Ability to supervise, motivate, and manage a diverse clinical staff.
 - iv. Skill in assessing qualifications and abilities of current and prospective employees.
 - v. Ability to organize work, set priorities, delegate tasks and responsibilities, and meet multiple deadlines for the service.
 - vi. Ability to adapt to new and changing work conditions, staffing, and contingencies.
 - vii. Knowledge of management/administration theories and concepts such as supervision, consultation, negotiation, and budget execution.
- (c) **Assignment.** For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. Assistant chief positions are generally in complexity level 1 facilities or in facilities of lesser

complexity levels where there is a large affiliate network and recreation therapy and/or creative arts therapy programs are provided. Assistant chiefs serve as an assistant to a service chief in a stand-alone recreation therapy service and share the scope of delegated managerial responsibilities. They manage and supervise all aspects of professional areas in the service-level department. Assistant chiefs exercise supervision, administrative management, and direction of professional areas. The assistant chief should be one grade less than the grade of the chief. The assistant chief serves as the acting service chief in the absence of the service chief. The assistant chief develops and maintains a system of internal review that ensures service programs operate at a satisfactory level of performance, and are in compliance with regulations. The assistant chief has responsibility for utilization of resources and budget. They make selections, assign personnel, and serve as a mentor to help employees develop to their full potential.

(11) Supervisory Recreation Therapist (Service Chief), GS-14

- (a) **Experience.** At least one year of creditable experience equivalent at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
 - i. Skill in supervising, motivating, and managing a diverse clinical staff applicable to a service level department in a large, complex, or multi-division facility, including inherent strategic planning and fiscal management.
 - ii. Skill in providing authoritative advice and coordination of recreation therapy and/or creative arts therapy services across the continuum of care that may encompass multiple medical centers, including consolidated facilities or departments.
 - iii. Skill in collaborating with strategic planning committees at local, VISN, or national levels for new ventures addressing patient care delivery systems, facilities management, system reorganization, etc.
 - iv. Ability to translate extensive recreation/creative art therapy, rehabilitation, mental health, long term-care, and other specialty care knowledge areas into cogent and useful policy in complex facilities.
 - v. Knowledge in reconciling contradictory requirements based upon regulations and standards of various regulatory and medical or other professional credentialing groups, such as The Joint Commission.
 - vi. Knowledge of pertinent analytical and evaluative methods sufficient to analyze complex issues to provide workable solutions and alternative

solutions to executive leadership that support timely and sound decision making.

- (c) **Assignment.** For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. A recreation therapist at this level serves as the service chief of a stand-alone service. Chief positions are generally in complexity level 1 facilities or in facilities of lesser complexity levels where there is a large affiliate network and recreation therapy and/or creative arts therapy programs are provided. The work is technically authoritative. Service chiefs have broad and overall responsibility for a service-level department to include clinical practice, program management, education, human resources management, and supervision for the service. They autonomously manage substantive parts of specialized, complex, and professional services which significantly impacts the care provided to patients. Service chiefs provide leadership with objective, independent assessments and recommendations for policy, operational and administrative issues, and initiatives requiring decision and action. Service chiefs monitor work performance to ensure production and accuracy requirements are satisfied, interpret a wide variety of data, including process data related to program planning and specialized needs of the service, as well as the medical center. They ensure policies or issues have been fully coordinated, vetted and staffed; advise leadership on implications, key issues, relationships to interest groups, both internal and external, and recommend courses of action. Service chiefs coordinate and negotiate resolutions to complex problems. They may prepare special reports and responses, congressional responses, briefing papers, issue briefs, and decision papers for the medical center leadership, which may be highly sensitive, confidential, and of a complex nature. They may negotiate affiliation agreements with academic partners; set training objectives; and delegate responsibilities to subordinate section or assistant chiefs (if applicable). Service chiefs at this grade generally have assignments determined by the need of the local facility, VISN/VA Central Office (VACO), National Director, or the assistant director of recreation therapy services.

(12) Recreation Therapist (Clinical Research), GS-14

- (a) **Experience:** At least one year of creditable experience equivalent at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Skill in applying techniques for specific, highly complex patient populations that often involve, but are not limited to: multiple physical, mental, developmental, behavioral, sensory, motor, and cognitive conditions or diagnoses, and other comorbid concerns that may compromise

biopsychosocial functioning.

- ii. Skill in applying and interpreting specialized assessments, other evaluative procedures and subject specific tests, as well as qualitative and quantitative research protocols to conduct research that meets the standards of validity, reliability, and statistical significance.
 - iii. Skill in research administration that would include, but is not limited to grant writing, budgeting, data collection and analysis, organizing findings, and disseminating results.
 - iv. Skill in communicating scientific concepts and methodological principles to individuals with diverse levels of technical expertise and understanding.
 - v. Skill in using evidence-based practices, clinical practice guidelines, and resources to develop appropriate research protocols and methodologies.
 - vi. Ability to guide an interdisciplinary team through properly conducting a research protocol that minimizes extraneous variables that could jeopardize the validity of the research.
 - vii. Ability to collaborate with strategic planning committees at local, VISN, or national levels for new research ventures addressing patient care delivery systems, facilities management, system redesign, system reorganization, etc.
 - viii. Knowledge of national and local research policies, procedures, and practices.
- (c) **Assignment.** For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. A recreation therapist at this level serves as clinical research specialist at the VISN level. Clinical research specialists at this grade generally have assignments determined by the need of the local facility, VISN/VACO, National Director, or the assistant director of recreation therapy services. The clinical research specialist serves as the subject matter expert in a content specialty area of recreation and/or creative arts therapy. They function as a consultant to the departments, service lines, and other clinical staff in evaluating, treating, and researching specialty areas that may significantly have an impact on VHA. Clinical expertise should include focused areas for a specific patient population with varying degrees of highly complex biopsychosocial treatment needs, such as the medical, rehabilitative, psychosocial, comorbid conditions related to TBI, SCI, amputation, blind and low vision, PTSD, military sexual trauma, etc. The clinical research specialist is responsible for funded research projects that make discipline-specific clinical contributions to research, add merit to the field, as well as possess the potential for significant impact on the practice of recreation and/or creative arts therapy. They participate in peer-reviewed publications, professional literature, and present findings to national audiences of the same

and varied treatment disciplines. The clinical research specialist provides professional, clinical oversight and consultation for staff therapists, as well as monitors and evaluates clinically appropriate treatment programs with broad latitude of variation. They may be involved in peer review activities for VHA and non-VHA research, such as grant review for VHA, National Institutes of Health (NIH) proposals, or local research service committees, which include, but are not limited to Research and Development (R&D), Internal Review Board (IRB), Geriatric Research Education and Clinical Centers (GRECC), or serving as consulting editors for peer-reviewed journals. They are responsible for ensuring the coordination of research programs and activities in collaboration or cooperation with other departments, services, and other internal or external entities. Under the guidelines of national and local research objectives, goals, and strategies, they establish research priorities, develop and coordinate projects, obtain funding to include the submission of grant proposals, and ensure the overall coordination of research efforts, as well as oversee work of others involved in a research project.

d. Creative Arts Therapist (Art)

(1) Creative Arts Therapist (Art), GS-9

- (a) **Experience/Education.** None beyond the basic requirements.
- (b) **Assignment.** Employees at this level serve in an entry level position as creative arts therapist (art). Employees have knowledge of their respective discipline and work with direct supervision and guidance from higher-level or supervisory staff. Established treatment procedures are substantially adapted and applied for patients who are acutely ill. Therapists at this level may be given general assignments in a program area.

(2) Creative Arts Therapist (Art), GS-11

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
 - i. Ability to identify current art resources in the community at the time of assessment, for discharge planning purposes.
 - ii. Ability to develop and implement quality improvement systems as related to internal and external regulatory requirements, including patient safety.
 - iii. Knowledge of diagnostic coding and symptoms of diagnoses in the provision of art therapy.

- iv. Knowledge of the creative process and art media and their effect on the patients' cognitive, sensory, emotional, and physical states.
 - v. Ability to demonstrate and educate stakeholders on the value of the creative process as a therapeutic tool.
 - vi. Ability to establish and maintain a therapeutic relationship with professional boundaries that reflect a trusting, empathetic, and respectful interaction.
 - vii. Skill in collaborating and maintaining liaison with an interdisciplinary team and educating the treatment team on theoretical framework of art therapy interventions.
- (c) **Assignment.** Employees at this level serve as a creative arts therapist (art) at the full performance level. They provide direct patient care and receive guidance from higher-level or supervisory staff members for complex patients only. They gather informal art-based assessment of patients' needs, aptitudes, interests, and abilities. The therapist also develops and implements individualized art therapy treatment plans, to include the scope, duration, and frequency of treatment. Treatment goals may include, but are not limited to: emotional regulation, resolving traumatic memories, active meditation, building empathy and a sense of self-worth, and identifying potential risks and the need for adaptive interventions to facilitate improved well-being. Duties may include, but are not limited to developing art therapy programs, interventions, and instructional programs, including typical and atypical materials and resources that are appropriate to the needs, skills, and aptitudes of the patient. The therapist supports engagement in, and reflection of, the art process and product, through an art therapy framework where the engagement develops specific skills attained through art making that may include increased independence, focus to task, sense of self-worth, improved coping skills, self-care, and social skills. They provide a safe environment for patients to understand the symbolic expression of their art product, process, and their experience with the materials as it relates to their recovery and wellness.

(3) Creative Arts Therapist (Art), GS-12

- (a) **Experience.** In addition to meeting the basic requirements, the completion of two years of progressively complex experience, which includes one year equivalent at the next lower grade directly related to the position being filled, is required.

AND,

- (b) **Certification.** Certification in a specialty treatment area in art therapy such as, but not limited to: Trauma Informed Art Therapy, Focused-Oriented Art Therapy, Photo Therapy, Mandala Assessment Research Instrument (MARI®), Art Therapy Analytics, or in a directly related field such as dementia, motivational

- interviewing, and/or cognitive behavior therapy.
- (c) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Skill in differentiating signs, symptoms, and contraindications as related to clinical diagnoses in order to independently determine appropriate interventions.
 - ii. Ability to apply advanced clinical judgment and critical thinking when interpreting and documenting interactions related to complex medical conditions.
 - iii. Ability to design comprehensive and complex screening tools and templates.
 - iv. Ability as a skilled listener sensitive to a variety of human needs.
 - v. Ability to exhibit emotional stability, patience, and interpersonal skills.
 - vi. Knowledge of insight and psychological processes.
 - vii. Skill in using a higher degree of sensitivity of group dynamics, interpersonal interactions, and symptoms with special attention to complexity, comorbidity and contraindications.
 - viii. Knowledge of a variety of art mediums through continuing education for application in clinical settings.
 - ix. Knowledge of how therapy impacts revenue resource allocation as it relates to complex diagnosis, treatment, and diagnostic coding.
- (d) **Assignment.** For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. At this level, the therapist uses independent judgment to administer clinically based complex and specialized art psychotherapy treatment interventions and programs, including an assessment of a diverse patient population with varying diagnoses, functioning levels, and cultural backgrounds. The therapist also provides clinical practice guidance for other art therapy staff. In the application of art materials and therapeutic interventions, the therapist uses advanced knowledge of theories related to clinical practice for program evaluation. The therapist independently recognizes and demonstrates an understanding of the diversity of artistic expression, symbolism, and meaning in artwork and art making from across cultures, aptitudes, and functioning levels. Therapist at this level, will have the autonomy to implement specialty art therapy treatment modalities. They serve as the sole art therapist or as a consultant member of specialty care programs or treatment teams. They use their clinical expertise in

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outpatient clinics and in the development and improvement of inpatient programs, while frequently executing high-level decision making. The art therapist creates an environment that examines the symbolic expressions of the art process and art product to promote a variety of outcomes including but not limited to: behavior management, catharsis, a sense of mastery, conflict resolution, and non-verbal communications. They provide direction in quality assurance efforts and strategic planning for art therapy programs across multiple areas of practice. The creative arts therapist provides and promotes the highest quality art psychotherapy programs using best practices. They may coordinate or support medical center research projects in order to develop outcome oriented, evidence-based initiatives. They develop and implement complex art therapy programs and interventions such as multimedia projects, mixed media projects, collaborative murals, group exhibits, and other art mediums using specialty treatment. The specialty treatment may include, but is not limited to Trauma Informed Art Therapy, Focused-Oriented Art Therapy, Photo Therapy, Mandala Assessment Research Instrument (MARI®), Art Therapy Analytics, or a directly related field specialty, such as Motivational Interviewing, Cognitive Behavior Therapy, etc., to promote the utilization of the creative process for insight, resilience, self-expression, and advocacy. The creative arts therapist establishes and maintains alliances with stakeholders and educates recipients, stakeholders, and colleagues about the theory and application of art psychotherapy as applied in clinical settings, which may include formal and informal internal and external presentations and in-service training. They coordinate and train clinical student interns, to include administration and oversight, assignments, supervision, and evaluations, as well as mentor therapists at the full performance level or less.

e. Creative Arts Therapist (Dance/Movement)**(1) Creative Arts Therapist (Dance/Movement), GS-9**

- (a) **Experience/Education.** None beyond the basic requirements.
- (b) **Assignment.** Employees at this level serve in an entry level position as a creative arts therapist (dance/movement). Employees have knowledge of their respective discipline and work under direct guidance from higher-level or supervisory staff. Established treatment procedures are substantially adapted and applied for patients who are acutely ill. Therapists at this level may be given general assignments in a program area.

(2) Creative Arts Therapist (Dance/Movement), GS-11

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:

- i. Ability to independently analyze and interpret assessment data for the development of an interdisciplinary treatment plan.
 - ii. Skill in implementing specialized programming in accordance with internal and external regulatory requirements, including patient safety.
 - iii. Ability to establish and maintain a safe therapeutic environment to promote expression through dance/movement therapy.
 - iv. Knowledge of foundational dance/movement therapy techniques, protocols, and treatment interventions that are considered best practices.
 - v. Skill in developing and selecting dance/movement therapy interventions for use with specific populations for therapeutic purposes (i.e., emotional regulation, containment and structure, etc.).
 - vi. Ability to assess and use patient cultural backgrounds and values in dance/movement treatment planning and interventions.
- (c) **Assignment.** Employees at this level serve as a creative arts therapist (dance/movement) at the full performance level. They provide direct patient care and receive guidance from higher-level or supervisory staff members for complex patients only. Assignments at this level include, but are not limited to: review of pre-evaluation data in the medical record upon admission or through consult; assist with assessment and development of individualized treatment goals; conduct assessments to determine current level of functioning and clinical needs through interviews with patients and other stakeholders; and identify patient's physical, cognitive, social, and emotional needs, and quality of life. In collaboration with patients and consistent with the interdisciplinary team, the therapist conducts dance/movement therapy interventions to develop expression, communication, affect regulation, adaptive behaviors, and improve functioning. In partnership with the patient, caregiver, and interdisciplinary team, the therapist develops discharge plan, including, but not limited to establishing outpatient care and identifying community resources for dance and movement programs for therapeutic benefit. They apply dance movement therapy interventions to support coping and self-care for those living with long-term conditions within the least restrictive environment. They serve as a consultant to an interdisciplinary team and other staff on issues related to non-verbal behavior/communication and mind-body connection. The therapist plans, coordinates, and directs specialized programs, such as creative arts festivals and performances.

(3) Creative Arts Therapist (Dance/Movement), GS-12

- (a) **Experience.** In addition to meeting the basic requirements, the completion of two years of progressively complex experience, which includes one year equivalent at the next lower grade directly related to the position being filled, is required.

AND,

- (b) **Certification.** Certification in a specialty treatment area in dance therapy/movement therapy, such as but not limited to: analytic dance therapy, cognitive behavioral dance therapy, authentic movement, or in a directly related field, such as dementia, trauma studies, and motivational interviewing.
- (c) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Skill in differentiating diagnostic signs, symptoms, and contraindications, as related to the clinical diagnoses, to independently determine appropriate interventions.
 - ii. Skill in adapting dance/movement therapy assessment tools and using unconventional methods.
 - iii. Knowledge as it relates to designing screening tools, templates, as well as designing and documenting specialized programs and specific plans of care and patient abilities.
 - iv. Skill in the interpretation and documentation of interactions related to complex medical conditions.
 - v. Knowledge of how therapy impacts revenue resource allocation as it relates to complex diagnosis, treatment, and diagnostic coding.
 - vi. Ability to conduct and adapt best practice dance/movement therapy interventions (e.g., Chi-Gong, Tai-Chi, Authentic Movement, Anna Haltran, etc.).
 - vii. Skill to effectively motivate patients with complex medical and mental health issues (e.g., aphasia, stroke, TBI, and PTSD) using motivational techniques considered as best practice.
- (d) **Assignments.** For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. The creative arts therapist (dance/movement) (advanced) conducts dance/movement therapy assessments, interprets current level of functioning, and applies results to determine the most appropriate treatment options for patients with multiple diagnosis and complex medical conditions. They develop unconventional dance/movement screening tools within the therapeutic environment. They use evidence-based or evidenced-informed advanced mind-body techniques to implement and develop specialized clinical interventions that may include meditation, yoga, martial arts, or relaxation skills (if appropriately trained in these specialties). They develop a therapeutic relationship and maintain a safe

therapeutic environment with each patient to facilitate mind-body connection, deepened personal insight, and improved overall functioning by incorporating the use of metaphor, symbolism, and storytelling through movement interventions. They may evaluate current research and coordinate or support research projects to conduct evidence-based initiatives. They assist in quality assurance efforts and strategic planning for dance therapy programs. The creative arts therapist may develop dance therapy interventions or special programs focusing on the therapeutic benefit for the patient. They coordinate and manage specialized programs, such as creative arts festivals and performances. They provide an opportunity to advocate for patients and promote community reintegration. They develop and maintain alliances with stakeholders. They serve as a consultant to interdisciplinary teams and other staff on issues related to non-verbal behavior/communication and mind-body connection. They provide education on dance/movement therapy through in-service presentations, conferences, and other teaching opportunities. They may coordinate and train clinical student interns, to include administration, oversight, assignments, and evaluations.

f. Creative Arts Therapist (Drama)

(1) Creative Arts Therapist (Drama), GS-9

- (a) **Experience/Education.** None beyond the basic requirements.
- (b) **Assignment.** Employees at this level serve in an entry level position as a creative arts therapist (drama). Employees have knowledge of their respective discipline and work under direct guidance from a higher-level or supervisory staff. Established treatment procedures are substantially adapted and applied for patients who are acutely ill. Therapists at this level may be given general assignments in a program area.

(2) Creative Arts Therapist (Drama), GS-11

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
 - i. Skill in using clinical judgment and critical thinking skills in identifying potential risks, adapting interventions, or when modifying and developing new techniques for complex patients.
 - ii. Skill in applying evidence-based motivation techniques to develop and implement new approaches to treatment interventions, based on patient response to treatment in a manner that uses creative thinking and problem solving that goes beyond the typical diagnosis-based treatment pathways, to maximize clinical outcomes.

- iii. Ability to demonstrate patient engagement in, and reflection of, the dramatic/theater process and product to develop and understand specific skills attained through drama, including but not limited to increased independence, sense of self-worth, coping skills, healthy living alternatives, and social skills.
 - iv. Ability to apply effective use of professional skill, objectivity, and insight to respond constructively to both positive and negative reactions and establish and maintain a therapeutic relationship with professional boundaries to reflect trusting, empathetic, and respectful interactions.
 - v. Ability to use drama/theater in providing opportunities to work through emotional disturbances within a safe environment for the patient to understand the symbolic expression of their theatrical product, process, and experience with the materials, as it relates to their recovery and wellness.
 - vi. Ability to communicate effectively through various communication techniques.
 - vii. Ability to develop unconventional assessment and interview approaches to gather clinical information about patients with severe or multiple diagnosis that require unconventional interview approaches and treatments to devise effective methods and approaches.
 - viii. Ability to use counseling skills to effectively conduct person-centered drama therapy sessions.
- (c) **Assignment.** Employees at this level serve as a creative arts therapist (drama) at the full performance level. They provide direct patient care and receive guidance from higher-level or supervisory staff members for complex patients only. They develop drama therapy programs, objectives, and interventions that promote utilization of the creative process for insight mood management, interpersonal skill development, promote self-actualization, non-verbal communication, self-expression, and emotional expression. They independently gather drama therapy based assessment data, interpret medical record information, review drama therapy consults, and conduct mental and physical evaluations to develop and implement a drama therapy treatment plan. Interventions may include customized design of performance, digital media, media development and production, theatrical techniques, team building, improvisations, and self-characterizations. They develop and implement an individualized treatment plan with potential goals to regulate emotion; resolve traumatic memories to promote communication; develop an understanding of negative consequences; and self-actualization. They use diverse clinical frameworks, such as drama/theatrical/psychodrama or skill-focused groups. They integrate diagnostic information and medical significance for functional performance, and support maximum rehabilitation potential to the clinical team. They evaluate current research and may initiate, coordinate, or support research

projects involving drama therapy to develop evidence-based initiatives. They may evaluate processes, including relevant and effective therapeutic drama/theater interventions for patients with multiple diagnoses that require unconventional approaches to treatment (e.g., multi-media productions, films, lighting, empty chair improvisations, enactments) and resourcefulness in devising effective therapeutic methods and procedure.

(3) Creative Arts Therapist (Drama), GS-12

- (a) **Experience.** In addition to meeting the basic requirements, the completion of two years of progressively complex experience, which includes one year equivalent at the next lower grade directly related to the position being filled, is required.

AND,

- (b) **Certification.** Certification in a specialty treatment area in drama therapy, such as, but not limited to: symbolic expression, theater/dramatic processes, special effects, film/theater production, script writing, or in a directly related field, such as dementia, trauma studies, conflict resolution, cognitive behavior therapy, and/or Wellness Recovery Action Plan facilitator.
- (c) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Skill in utilizing advance clinical judgment and critical thinking skills, with special attention to complexity, comorbidity, and contraindications when modifying and developing new techniques.
 - ii. Ability to apply advanced evidence-based motivation techniques to develop and implement new approaches to the treatment intervention, based on patient response to treatment in a manner that uses creative thinking and problem solving that goes beyond the typical diagnosis-based treatment pathways, to reach maximal outcomes.
 - iii. Skill to use drama/theater in providing opportunities to work through emotional disturbances within a safe environment, for the patient to understand the symbolic expression of their theatrical product, process, and experience with the materials, as it relates to their recovery and wellness.
 - iv. Skill in experiential approaches, group dynamics, interpersonal interactions and symptoms, and socio drama techniques, such as team building, poetry, performance, sound, and music to create a story enactment, as well as other dramatic mediums for diverse populations to promote the utilization of the creative process for self-expression, emotional expression, insight mood management, verbal and non-verbal communication, and self-advocacy.

patients who are acutely ill. Employees at this level would not be assigned work at a CBOC unless supervision is on site.

(2) Creative Arts Therapist (Music), GS-9

- (a) **Experience/Education.** At least one year of creditable experience at the next lower grade level **or** a master's degree in creative arts therapy (music) may be substituted for the required one year of professional creative arts therapist (music) experience.
- (b) **Demonstrated Knowledge, Skills, and Abilities (KSAs).** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Ability to perform a varied repertoire of popular, folk, and traditional songs appropriate for use in a clinical setting using at least two of the following: keyboard, voice, guitar, percussion or other musical instruments suitable to a clinical setting.
 - ii. Knowledge of the roles and meaning of music in various cultures and subcultures.
 - iii. Knowledge to design, develop, or adapt unique music therapy methods for assessment, treatment, or palliation and evaluation procedures.
 - iv. Skill to apply objectivity and insight to respond constructively to both positive and negative reactions while maintaining a safe environment for the patient and therapist.
- (c) **Assignment.** Employees at this level serve in a developmental level position as a creative arts therapist (music). They work under general supervision. Employees have an understanding of music therapy processes and procedures to provide patient care. They exercise judgment, administer and interpret music therapy assessments, and use clinical knowledge to develop assessment and interview approaches. They plan and organize music therapy interventions for persons diagnosed with chronic or life-threatening conditions, as well as their families and in collaboration with an interdisciplinary or multidisciplinary team. Duties may include, but are not limited to the use of music listening, singing, playing, creating, and improvising for therapeutic or palliative treatment. They recommend new treatment groups and programs (including co-treatment opportunities) for treating patients with medical or mental health issues.

(3) Creative Arts Therapist (Music), GS-11

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience

above, the candidate must demonstrate all of the following KSAs:

- i. Knowledge of the roles and meaning of music in various cultures and subcultures, how culture influences identity formation, concepts of health and pathology, and understanding of the role of music therapy and how music therapy is practiced.
 - ii. Knowledge of current methods of music therapy assessment, treatment, and evaluation related to human growth and development, musical development, diagnostic classifications, etiology, symptomatology, and prognosis in formulating complex treatment plans, including the contraindications of music therapy for individuals and groups.
 - iii. Ability to design, develop, or adapt unique music therapy methods for assessment, treatment or palliation, and evaluation procedures for complex clinical cases, through a broad range of specialized music therapy services for various and emerging patient populations.
 - iv. Ability to use music therapy interventions to provide opportunities to work through treatment issues, including emotional disturbances, by establishing a safe environment for the patient to understand the symbolic expression of their musical product, process, and experience as it relates to recovery and wellness.
 - v. Ability to apply effective use of professional skill, objectivity, and insight to respond constructively to both positive and negative reactions, establish and maintain a therapeutic relationship with professional boundaries to reflect trusting, empathetic, and respectful interactions.
 - vi. Ability to apply current research literature and co-facilitate treatment with professionals from other disciplines, the uses of the creative arts therapies and recreation therapy, as well as understanding emerging models and trends in music therapy and.
- (c) **Assignment.** Employees at this level serve as creative arts therapists (music) at the full performance level. They have a full understanding of music therapy processes and procedures, and require only general supervision when providing direct patient care. They exercise independent judgment, administer and interpret music therapy assessments, and utilize clinical knowledge to develop unconventional assessment and interview approaches to effectively elicit information. They review pre-evaluation data in the medical record upon admission or through consult. They conduct, analyze, interpret, and report assessment data across functional domains (i.e., behavioral, cognitive, communicative, emotional/affective, physical, sensory, and social) as well as musical knowledge, skills, and abilities. They plan, organize, and implement developmentally and situationally appropriate and evidence-based comprehensive music therapy interventions for persons diagnosed with chronic

or life-threatening conditions, as well as their families, and in collaboration with an interdisciplinary or multidisciplinary team. These may include, but are not limited to: music listening, singing, playing, creating and improvising to understand musical behaviors as a means of self-expression, communication, and adaptive behavior; for neurological or physical rehabilitation; pain management; increased independence; exploring self-concept; improved coping skills; interpersonal relationships and social skills; and group cohesion. They recommend and develop new treatment groups and programs (including co-treatment opportunities) for treating patients with complex medical or mental health issues including, but not limited to Traumatic Brain Injury (TBI) to promote a variety of clinical outcomes, such as improved coping with grief, loss, or palliative care/terminal illness; behavior management, conflict resolution, or non-verbal communication of difficult subject matter. They participate in co-treatment opportunities including neurological rehabilitation, mental health recovery programs, and palliative care, often related to the symptoms of a terminal illness. They plan, organize, implement, and evaluate public relations for the program to inform and educate others about music therapy, in various settings, including the complex interactions of the therapeutic process, as well as the efficacy of music therapy in complex cases.

(4) Creative Arts Therapist (Music), GS-12

- (a) **Experience.** In addition to meeting the basic requirements, completion of two years of progressively complex experience, which includes one year equivalent at the next lower grade directly related to the position being filled.
- AND,
- (b) **Certification.** Certification in a specialty treatment area in music therapy, such as but not limited to: advanced improvisational music therapy, bonny method of guided imagery and music (BM-GIM), neurological music therapy (NMT), creative music therapy, or in a directly related field, such as palliative care, dementia care, or substance abuse.
- (c) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Ability to apply the creative processes of music listening, singing, playing, creating, and improvising to respond to the complex dynamics of musical and interpersonal relationships that emerge at different stages in the therapeutic process and to accomplish therapeutic or palliative care treatment goals.
 - ii. Ability to reproduce, notate, and transcribe musical responses of patients, provide spontaneous musical support for patient improvisations, compositions, or responses, and to use different methods of musical analysis for patient assessment and evaluation.

- iii. Ability to identify and differentiate theoretical constructs and treatment orientations, including but not limited to: cognitive-behavioral therapy, psychotherapy, person-centered therapy, humanistic therapy, existential therapy, psychosocial development, and human development that underlies the various clinical practices and approaches of current models of music therapy for individuals, families, or groups.
 - iv. Knowledge of strategies for self-care and use of self-awareness and insight, using personal reflection (e.g., journaling, artistic involvement, meditation, other spiritual pursuits) to identify and address one's personal issues and the impact of these issues within the therapeutic process, to provide appropriate breadth and depth to the patient's experience and process in music therapy.
 - v. Skill in supervising and mentoring students in clinical training, supervision, teaching, and research, designing and implementing methods of observing and evaluating student competence, and the use of music and the norms and practices of other cultures.
 - vi. Ability to collaborate with others to conduct research, using various methods and appropriate procedures to avoid or minimize potential confounding of the data; to interpret and disseminate research results consistent with established standards of inquiry; and to evaluate scholarly and student research regarding research questions or problems, methods, procedures, data collection, analysis, and conclusions.
- (d) **Assignment.** For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. Music therapists at this level have an understanding of specialized music therapy clinical skills for use in complex cases. With a high degree of autonomy and independence, they create an environment that examines the symbolic expressions of the musical process and product to promote a variety of outcomes, including but not limited to: sensory stimulation; integration in multi-sensory environments; social skills training; cognitive-behavioral change techniques; physical or neurological rehabilitation; psychomotor and impulse control skills; psychological and psychosocial issues, such as behavior management, catharsis, a sense of mastery, focus to task, conflict resolution, and non-verbal communication of difficult subject matter. They evaluate and respond to therapeutic musical interventions for patients with complex and multiple diagnoses to understand how it reflects the patient's personality, the therapeutic relationship, and the mind-body connection, to facilitate change and enhance overall functioning. They collaborate, establish, and maintain liaison and provide music therapy instruction or in-service training for employees in other disciplines or service lines, as well as the interdisciplinary team. They mentor therapists who are at the full performance level or below and may coordinate clinical training programs, to include student supervision,

administration and oversight, assignments, and evaluations. They assist in quality assurance, program performance improvement, and strategic planning related to music therapy. They may develop music therapy interventions or special programs focusing on the therapeutic benefit for the patient and provide an opportunity to advocate for patients by developing and maintaining alliances with stakeholders, such as research, non-profit, and community organizations, as well as other clinics and services.

h. Creative Arts Therapist (Art, Dance/Movement, Drama, Music)

(1) Creative Arts Therapist (Clinical Education Coordinator), GS-12

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
 - i. Ability to develop, maintain, and coordinate clinical education programs and assignments for student affiliations with universities, colleges, and other academic organizations with shared values, to include the formulation of academic agreements, MOUs, and student assignments.
 - ii. Knowledge of current treatment approaches (evidence-based and best practice) across multiple areas of practice.
 - iii. Ability to educate others in the application of specialized and technically advanced knowledge, skills, and treatment approaches and to clinically guide staff in using these tools.
 - iv. Ability to provide educational opportunities and consultation to other health care practitioners and stakeholders about clinical practice and areas of expertise.
 - v. Ability to synthesize clinical processes and practice to guide and train the students' clinical/educational experience and skills.
 - vi. Knowledge of local and national licensing and certification boards and committees to include guidelines and requirements.
 - vii. Ability to apply scientific methods, research design, and statistics.
- (c) **Assignment.** For all assignments above the full-performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. This assignment occurs at active, affiliated VA facilities where specialized clinical treatment programs in art, dance/movement, drama, and music are provided.

Clinical education coordinator positions are generally found in complexity level 1 facilities or in facilities of lesser complexity levels where there is a large affiliate network where recreation and/or creative arts therapy programs are provided. The clinical education coordinator develops, coordinates, and administers clinical training programs and practicums, which may include, but are not limited to: students, interns, therapy assistant trainees, associated health trainees, facility new employees, and/or other disciplines. Duties include, but are not limited to: establishing, negotiating, mediating, and maintaining affiliation agreements and memoranda of understanding (MOU); serving as a liaison with the university to determine number of students, dates of training, and areas of training and assignment; designing, coordinating, conducting, and evaluating educational experiences for students, associated health trainees, and other personnel assigned to clinical program for training; arranging and serving as an instructor for staff in-service training programs; creating innovative education/training/research opportunities for students and staff; assisting principal investigators or co-investigators and/or serving as principal investigator or co-investigator in projects of limited complexity or scope. They coordinate and direct staff participating in the clinical and administrative aspects of the program.

(2) Creative Arts Therapist (Program Coordinator), GS-12

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Knowledge of management/administration principles, procedures, and practice, which includes supervision, consultation, negotiation, mediation, and monitoring.
 - ii. Ability to analyze clinically appropriate data and make recommendations to optimize quality, efficiency, performance, and productivity within services.
 - iii. Ability to perform the full range of supervisory duties, which includes responsibility for assignment of work to be performed; competency assessments; performance evaluations; selection of staff; recommendation of awards, advancements, and disciplinary actions, when appropriate.
 - iv. Ability to monitor and report on the status and progress of work, evaluate program quality to ensure that methods, deadlines, and standards have been met, and prioritize the workload.
 - v. Ability to effectively communicate goals, objectives, and focused initiatives to an interdisciplinary team, specialized clinical program, or subsection, as well as guide the team members on work methods, practices, standards, and procedures.

- vi. Knowledge of regulatory requirements, interdisciplinary structure, and organizational structure to serve as a liaison between specialty care and other programs that affect coordination of care, healthcare access, program evaluation, assessment, and planning future needs.
 - vii. Skill in employing recognized leadership and managerial methods and strategies, including interpersonal relations and conflict resolution in the management of employees, team leaders, and managers.
- (c) **Assignment.** For all assignments above the full-performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. The program coordinator is generally found in complexity level 1 facilities, or in facilities of lesser complexity levels where large affiliate network services are found. Creative arts therapist at this level serves as program coordinator in many areas of creative arts therapy to include art, dance/movement, drama, and music. This assignment requires administrative direction and decision-making skills, interagency coordination of care, program evaluation and analysis, budgetary controls, and planning. The program coordinator has overall responsibility for planning, assessing, and evaluating programs to ensure proper coordination between care delivered by the program and overall delivery of healthcare within the facility. They are responsible for daily program operations, developing policies and procedures, and preparing reports and statistics for facility, VISN, and national use. They assist with special administrative projects, which include but are not limited to strategic planning, performance improvement plans, and coordination and training of interdisciplinary team members. They are responsible for the overall technical and administrative oversight for operations within their program area, including coordination of clinical assignments for multiple professionals comprising of an interdisciplinary team. They may provide treatment to patients in a specialty program, as well as services in more complex and unconventional cases. The program coordinator may or may not have supervisory responsibilities but is responsible for program management. They ensure orientation and competency assessment of assigned staff and maintain interdepartmental relations with other services to accomplish medical center goals. They plan and develop policies, procedures, and goals, and interpret, implement, and educate staff on applicable directives, handbooks, or other policies. When performing as a supervisor, duties include planning and scheduling work; assigning and evaluating work of subordinate staff; resolving problems which may interfere with patient assessment or treatment; accepting, amending, or rejecting completed work; appraising performance; and recommending performance standards.

(3) Lead Creative Arts Therapist, GS-12

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.

- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Knowledge of creative arts therapy across multiple types of clinical practice.
 - ii. Ability to provide professional oversight and consultation for staff therapists and guidance to auxiliary staff, volunteers, and trainees.
 - iii. Ability to monitor and report on the status and progress of work and make adjustments to accomplish the workload, in accordance with established procedures.
 - iv. Ability to facilitate in program development, outcome management, and strategic planning.
 - v. Ability to act as a liaison between staff, volunteers or trainees, and immediate supervisor to resolve informal complaints and concerns.
 - vi. Knowledge of clinical procedures and policies to provide oversight and training for auxiliary staff, volunteers, and trainees.
 - vii. Skill in coordinating clinical activities within the workgroup.
 - viii. Skill in leading and directing staff to implement evidence-based recreation therapy and/or creative arts therapy approaches to patients with varied treatment needs and skill level.
- (c) **Assignment.** For all assignments above the full-performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. Lead therapists are found in complexity level 1 facilities, or in facilities of lesser complexity levels where there are large affiliate network recreation and/or creative art therapy departments. Therapists at this level have experience that demonstrates advanced practice skills and sound clinical judgment across many areas of recreation and/or creative arts therapies to include art, dance/movement, drama, and music. Lead therapists are responsible for completing complex evaluations and treatments. They are required to apply advanced evaluation methodologies and treatment theories in the provision of care to a vast array of patients with differing functional impairments. They provide clinical practice guidance for other recreation and/or creative arts therapy staff. Lead therapists monitor work flow and make work assignments, provide input on performance, resolve daily workplace issues, and maintain efficient flow of patient care. The lead therapist may provide primary reports to the chief for the daily delivery of department programs, reporting, staffing, and scheduling. Lead therapists provide training for the department's auxiliary staff, volunteers, and trainees, provide instruction in maintenance of all service equipment, and

coordinate patient care plans to reduce redundancies and delay in patient treatment.

(4) Supervisory Creative Arts Therapist, GS-12

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Ability to provide treatment in complex cases and to work with great independence.
 - ii. Ability to balance multiple responsibilities, set priorities, delegate tasks, meet multiple deadlines, analyze organizational problems, and develop and implement effective solutions.
 - iii. Ability to analyze organizational and operational problems to develop and implement solutions that result in efficient operations and use data effectively to manage workload, quality, performance, and productivity within the service.
 - iv. Skill in interpersonal relationships in dealing with employees, team leaders, and managers.
 - v. Ability to use evidence-based practices and clinical practice guidelines in a professional area, and to guide the staff in applying these tools.
 - vi. Knowledge of organizational theories and strategies to positively impact the overall goals and objectives within the service.
 - vii. Knowledge related to administrative functions such as fiscal, material supply, equipment management, and clinical and program management.
- (c) **Assignments.** For all assignments above the full-performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. Supervisors at this level are typically found in complexity level 2 or level 3 medical centers. They are responsible for the supervision, administrative management, and direction of program services. They evaluate programs to ensure proper coordination with the overall delivery of health care. The incumbent has full administrative oversight for planning and directing the staff assignments in a variety of clinical settings to include art, dance/movement, drama, and music therapies. They have responsibility for general or technical supervision of key clinical and training programs. Typical duties include: assigning work; monitoring clinical performances of staff; resolving staff conflicts, which may interfere with the delivery of services; identifying continuing education

and training needs; and preparing performance standards and ratings. They interview candidates for positions, recommend appointments, advancements, or when appropriate, disciplinary actions. The supervisor accepts, amends, or rejects completed work, and ensures that performance requirements are met. They ensure compliance with accrediting agency and regulatory requirements, establish and monitor the quality of the pre-analytical processes as part of the overall service's quality management program, and take corrective action as needed. The supervisor ensures orientation and competency assessment of assigned staff. The supervisor develops policies and procedures, manages document control, develops performance standards, position descriptions and functional statements, and is responsible for professional and administrative management of an assigned area, to include time and attendance and leave management. The supervisor conducts department meetings at regular intervals to convey information to staff. The supervisor maintains interdepartmental relations with other services/departments, individuals, and community partners to accomplish medical center goals and may provide clinical treatment in the most complex of cases.

(5) Supervisory Creative Arts Therapist, GS-13

- (a) **Experience.** At least one year of creditable experience at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Ability to independently provide treatment in complex cases.
 - ii. Ability to balance multiple responsibilities, set priorities, delegate tasks, meet multiple deadlines, analyze organizational problems, and develop and implement effective solutions.
 - iii. Ability to analyze organizational and operational problems to develop and implement solutions that result in efficient operations and use data effectively to manage workload, quality, performance, productivity within the service.
 - iv. Skill in interpersonal relationships and conflict management.
 - v. Ability to use evidence-based practices and clinical practice guidelines in a professional area and to guide the staff in applying these tools.
 - vi. Knowledge of organizational theories and strategies to positively impact the overall goals and objectives within the service.
 - vii. Knowledge related to administrative functions, such as fiscal, material supply, equipment management, and clinical and program management.

- (c) **Assignment.** For all assignments above the full-performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. Supervisors at this level are found in complexity level 1 facilities, or in facilities of lesser complexity levels where there are large affiliate network recreation therapy and/or creative arts therapy programs to include art, dance/movement, drama, and music. The supervisor is responsible for the supervision, administrative management, and direction of program services. The supervisor develops and initiates new treatment programs based upon current research findings. They evaluate programs to ensure proper coordination with the overall delivery of health care. The incumbent may be delegated full administrative and clinical responsibility for planning and directing staff assignments in a variety of clinical settings. They have responsibility for general or technical supervision of key clinical and training programs. Typical duties include: assigning work, monitoring clinical performances of staff, resolving staff conflicts, which may interfere with the delivery of services, identifying continuing education and training needs, and other clinical and administrative responsibilities to ensure that the mission of the service and the medical center has been satisfied. They interview candidates for positions, recommend appointments, advancements, or disciplinary actions, when appropriate. They make decisions that affect staff and other resources with wide latitude of control and independent judgment. The supervisor accepts, amends, or rejects completed work and ensures that performance requirements are met. The supervisor ensures compliance with accrediting agency and regulatory requirements, establishes and monitors the quality of the pre-analytical processes as part of the overall service's quality management program and ensures corrective action is initiated, as needed. The supervisor encourages professional development, serves as a mentor to staff, and creates an environment of learning. The supervisor develops policies and procedures; manages document control; develops performance standards, position descriptions and functional statements; and is responsible for administrative management of an assigned area, to include budget execution and time and leave management. The supervisor conducts department meetings at regular intervals to convey information to staff. The supervisor maintains interdepartmental relations with other services to accomplish medical center goals and may provide clinical treatment in more complex cases. The supervisor fosters and maintains community contacts that augment and enhance service goals.

(6) Supervisory Creative Arts Therapist (Assistant Chief), GS-13

- (a) **Experience.** At least one year of creditable experience equivalent at the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:

- i. Skill in the analysis and application of scientific and clinical literature in professional area.
 - ii. Knowledge of contemporary recreation therapy, creative arts therapies, rehabilitation, recovery, and wellness theories, techniques, practices, and related disciplines.
 - iii. Ability to supervise, motivate, and manage a diverse clinical staff.
 - iv. Skill in assessing qualifications and abilities of current and prospective employees.
 - v. Ability to organize work, set priorities, delegate tasks and responsibilities, and meet multiple deadlines for the service.
 - vi. Ability to adapt to new and changing work conditions, staffing, and contingencies.
 - vii. Knowledge of management/administration theories and concepts.
- (c) **Assignment.** For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. Assistant chief positions are generally found in complexity level 1 facilities or in facilities of lesser complexity levels where there are large affiliate network recreation and/or creative arts therapy programs to include art, dance/movement, drama, and music. Assistant chiefs serve as an assistant to a service chief in a stand-alone recreation therapy service and share full scope of delegated managerial responsibilities. They manage and supervise all aspects of professional areas in the service-level department. Assistant chiefs exercise supervision, administrative management, and direction of professional areas. They serve as the acting service chief in the absence of the service chief. They develop and maintain a system of internal reviews that ensures service programs operate at a satisfactory level of performance and are in compliance with regulations. The assistant chief has responsibility for utilization of resources and budget. They make selections, assign personnel, and serve as a mentor to help employees develop their full potential.

(7) Supervisory Creative Arts Therapist (Service Chief), GS-14

- (a) **Experience.** At least one year of creditable experience equivalent to the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:

- i. Skill in supervising, motivating, and managing a diverse clinical staff applicable to a service level department in a large, complex, or multi-division facility, including inherent strategic planning and fiscal management.
 - ii. Skill in providing authoritative advice and coordination of recreation and/or creative arts therapy services across the continuum of care that may encompass multiple medical centers, including consolidated facilities or departments.
 - iii. Skill in collaborating with strategic planning committees at local, VISN, or national levels for new ventures addressing patient care delivery systems, facilities management, system reorganization, etc.
 - iv. Ability to translate extensive recreation/creative art therapy, rehabilitation, mental health, long-term care, and other specialty care knowledge areas into cogent and useful policy in complex facilities.
 - v. Knowledge in reconciling contradictory requirements based upon regulations and standards of various regulatory and medical or other professional credentialing groups, such as The Joint Commission.
 - vi. Knowledge of analytical and evaluative methods sufficient to analyze complex issues and provide alternative solutions to executive leadership that support timely and sound decision making.
- (c) **Assignment.** For all assignments above the full performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. Creative arts therapists at this level serve as the service chief of a stand-alone service. Chief positions are generally found in complexity level 1 facilities or in facilities of lesser complexity levels where there are large affiliate network recreation and/or creative arts therapy programs to include art, dance/movement, drama, and music. The work is technically authoritative. Service chiefs have broad and overall responsibility for a service-level department. Service chiefs have full responsibility for clinical practice, program management, education, human resources management, and supervision for the service. They autonomously manage substantive parts of specialized, complex, professional services, which significantly impact the care provided to patients. Service chiefs provide leadership with objective, independent assessments, and recommendations for policy, operational and administrative issues, and initiatives requiring decision and action. Service chiefs monitor work performance to ensure production and accuracy requirements are satisfied; interpret a wide variety of data and processes data related to program planning and specialized needs of the service, as well as the medical center; ensure policies or issues have been fully coordinated, vetted and staffed; advise leadership on implications, key issues, relationships to interest groups, both internal and external and recommend

courses of action. Service chiefs coordinate and negotiate resolutions to complex problems. They may prepare special reports and responses, Congressional responses, briefing papers, issue briefs, and decision papers for medical center leadership, which may be highly sensitive, confidential, and of a complex nature. They may negotiate affiliation agreements with academic partners; set training objectives; and delegate responsibilities to subordinate section or assistant chiefs (if applicable). Service chiefs at this grade generally may have assignments determined by the need of the local facility, VISN/VACO, National Director, or the assistant director of recreation therapy services.

(8) Creative Arts Therapist (Clinical Research), GS-14

- (a) **Experience:** At least one year of creditable experience equivalent to the next lower grade level.
- (b) **Demonstrated Knowledge, Skills, and Abilities.** In addition to the experience above, the candidate must demonstrate all of the following KSAs:
- i. Skill in applying techniques for specific, highly complex patient populations that often involve, but are not limited to multiple physical, mental, developmental, behavioral, sensory, motor, and cognitive conditions or diagnoses, and other comorbid concerns that may compromise biopsychosocial functioning.
 - ii. Skill in applying and interpreting specialized assessments, other evaluative procedures and subject specific tests, as well as qualitative and quantitative research protocols to conduct research that meets the standards of validity, reliability, and statistical significance.
 - iii. Skill in research administration that includes, but is not limited to: grant writing, budgeting, data collection and analysis, organizing findings, and disseminating results including publication.
 - iv. Skill in communicating scientific concepts and methodological principles to individuals with diverse levels of technical expertise and understanding.
 - v. Skill in using evidence-based practices, clinical practice guidelines, and resources to develop appropriate research protocols and methodologies.
 - vi. Ability to guide an interdisciplinary team through conducting a research protocol that minimizes extraneous variables that could jeopardize the validity of the research.
 - vii. Ability to collaborate with strategic planning committees at local, VISN, or national levels for new research ventures addressing patient care delivery systems, facilities management, system redesign, system reorganization, etc.

viii. Knowledge of national and local research policies, procedures, and practices.

- (c) **Assignment.** For all assignments above the full-performance level, the higher-level duties must consist of significant scope, complexity (difficulty), range of variety, and be performed by the incumbent at least 25% of the time. A creative arts therapist at this level serves as clinical research specialist at the VISN level. Clinical research specialists at this grade generally may have assignments determined by the need of the local facility, VISN/VACO, National Director, or the assistant director of recreation therapy services. The clinical research specialist serves as the subject matter expert in a content specialty area of recreation and/or creative arts therapy; functions as a consultant to the departments, service lines, and other clinical staff in evaluating, treating, and researching specialty areas that may have significant impact on VHA. Clinical expertise should include focused areas for a specific patient population with varying degrees of highly complex biopsychosocial treatment needs, such as the medical, rehabilitative, psychosocial, comorbid conditions related to TBI, SCI, amputation, blind and low vision, PTSD, military sexual trauma, etc. They are responsible for funded research projects that make discipline-specific clinical contributions to research, add merit to the field, as well as possess the potential for significant impact on the practice of recreation and creative arts therapy. They participate in peer-reviewed publications, professional literature, and present findings to national audiences of same and varied treatment disciplines. The clinical research specialist provides professional, clinical oversight and consultation for staff therapists, as well as monitors and evaluates clinically appropriate treatment programs with broad latitude of variation. They may be involved in peer review activities for VHA and non-VHA research, such as grant review for VHA, NIH proposals, or local research service committees, which include but are not limited to Research and Development (R&D), Internal Review Board (IRB), Geriatric Research Education and Clinical Centers (GRECC), or serving as consulting editors for peer-reviewed journals. They are responsible for ensuring the coordination of research programs and activities in collaboration or cooperation with other departments, services, and other internal or external entities. Under the guidelines of national and local research objectives, goals, and strategies, they establish research priorities, develop and coordinate projects, obtain funding, to include the submission of grant proposals, and ensure the overall coordination of research efforts, as well as oversee work of others involved in a research project.

5. DEVIATIONS.

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

PART II

APPENDIX G60

- b. Under no circumstances will the education requirement be waived. Under no circumstances will the registration and/or certification requirements be waived at the GS-11 level and above.
- 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.

Authority: 38 U.S.C. §§ 7402, 7403.]