U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Phoenix Area Indian Health Service Office of Human Resources, Two Renaissance Square 40 North Central Avenue, Suite 510, Phoenix, AZ 85004-4424

Preference in filling vacancies is given to qualified Native American Indian Candidates or Alaska Natives in accordance with the INDIAN PREFERENCE ACT, TITLE 25, US CODE, SECTION 472 & 473. In order than the above, the Indian Health Service is an Equal Opportunity Employer.

"IHS-OPERATED PROPERTIES ARE TOBACCO FREE"

ANNOUNCEMENT NUMBER: OPENING DATE: CLOSING DATE: SWR-09-0251-1 05/05/2009 05/18/2009

REISSUED TO SOLICIT ADDITIONAL CANDIDATES.
THOSE WHO PREVIOUSLY APPLIED NEED NOT REAPPLY UNLESS THEY WISH TO UPDATE THEIR APPLICATIONS.

POSITION TITLE/SERIES/GRADE: Policy and Procedure Officer, GS-12

This vacancy is to fill <u>ONE</u> interdisciplinary professional position. The nature of the work is such that persons with education or experience in one the medical professions listed below may be considered equally well qualified to do the work.

Nurse Practitioner, GS-0610-12..... \$77,194 - \$95,005 per annum *

Medical Technologist, GS-0644-12..... \$68,932 - \$89,607 per annum

*Special rate authorized under 5 USC 5303 Pharmacist, GS-0660-12...... \$75,215 - \$93,026 per annum *

PROMOTION POTENTIAL: None SUPERVISORY/MANAGERIAL: No

RELOCATION EXPENSES: Travel to be paid in accordance with Federal Travel Regulations

HOUSING: Private Housing Only.

APPOINTMENT/WORK SCHEDULE: One Permanent Full-Time

AREA OF CONSIDERATION: Indian Health Service Area Wide

DUTY LOCATIONS: Phoenix Indian Medical Center, Phoenix, AZ

JOB DESCRIPTION: This position is located in the Performance Improvement Department and serves as an analyst and advisor to the Director of Performance Improvement. The incumbent is responsible for the development, content, and authentication of organization polices and procedures, clinical protocols, and clinical practice guidelines compliant with standards and appropriate regulations. Various duties include, but are not limited to, analyzing organization and multidisciplinary policies to assure that the procedures describe actual or intended practice; staying abreast of changes in the various regulations and standards to develop new policies or revise current policies to ensure that the organization is compliant; developing and tracking new policies to meet the changing needs of the organization; overseeing the coordination of the distribution of all new and revised policies; advising department managers and executive staff on ways to implement new regulations and processes; etc.

WHO MAY APPLY: Excepted Service, Merit Promotion, and PHS Officers. U.S. citizenship is required.

- Excepted Service Examining Plan Candidates (ESEP) Individuals entitled to Indian Preference who wish to be considered for excepted appointment in IHS, under authority of 5 CFR, Part 213, Schedule A 213.3116(B)(8).
- Merit Promotion Plan Candidates (MPP) Current permanent competitive Federal status employees, reinstatement eligible, and current IHS Indian Preference individuals and/or individuals who are eligible for excepted appointment in IHS under some other authority (e.g., handicapped authority, etc).
- PHS Commissioned Corps Officers Current active or inactive Commissioned Officers may apply.
- Veteran's Preference Preference eligible veterans who have been separated from the armed forces under honorable conditions after 3 years or more of continuous active service may apply.
- Applications will be accepted from individuals eligible for non-competitive appointment (e.g., applicants eligible for appointment under the Veterans Readjustment Act, the severely handicapped, those with a 30% or more compensable service-connected disability). Veterans who are preference eligible or who have been separated from the armed forces under honorable conditions after 3 years or more of continuous active service may apply.

Indian Preference applicants must indicate on their applications whether they are applying under the MPP, ESEP, or both. If not indicated, they will be considered under the MPP.

Qualified disabled applicants (Rehabilitation Act of 1973) and disabled veterans with 30% or more disability are encouraged to apply. Reasonable accommodations will be made for qualified applicants with disabilities, except when doing so would impose undue hardship on the Indian Health Service.

CONDITIONS OF EMPLOYMENT:

- 1. Selectee(s) are required to be immunized against Measles and Rubella and provide documentation prior to or at the time of their start date. Special consideration may be allowed to individuals who are allergic to a component of the vaccine or are currently pregnant. Selectee must have documented immunity to Rubella and Measles.
- 2. Selectee(s) are required to complete Security questionnaire and fingerprint chart for investigative purposes under PL 101-630 Indian Child Protection and Family Violence Prevention Act. Persons, who have been arrested for or charged with a crime involving a child, or violent crime against a person, are not eligible for employment with IHS under PL 101-630.
- 3. Selectee(s) are required to complete a "Declaration of Federal Employment Optional Form 306" to determine your suitability for Federal Employment, and to certify the accuracy of all the information in your application. Persons making false statements in any part of the application may not be hired; or fired after employment starts; or may be fined.
- 4. Males born after December 31, 1959 are required to be registered with the Selective Service System in order to be eligible for employment with the Federal Government.
- 5. Selectee(s) are required to have a viable bank account at a financial institution for electronic direct deposit of salary payment.
- 6. Some service units operate under extended service hours 7 days per week.
- 7. Licensure Requirement.

QUALIFICATION REQUIREMENTS:

<u>Basic Requirements:</u> Applicants must meet the following educational, training, registration and Selective Placement Factors for one of the eligible series listed below, in addition to the required specialized experience:

Specialized Experience: This experience must have equipped the applicant with the particular knowledge, skills, and abilities to perform successfully the duties of the position to be filled in addition to any required medical experience. To be creditable, specialized experience must have been equivalent to at least the next lower grade level in a two-grade interval occupation. Qualifying experience is experience in developing and implementing comprehensive policies and procedures for a complex healthcare organization.

<u>SELECTIVE PLACEMENT FACTOR:</u> In addition to the basic requirements listed below, the following Selective Placement Factors MUST be addressed on a separate sheet of paper. **FAILURE TO SUBMIT WILL RESULT IN AN INCOMPLETE APPLICATION.**

- 1) Ability to interpret various complex national and regulatory standards and to apply to the development of multidisciplinary organizational policies and procedures for a multifaceted health care organization that include outpatient and inpatient services; and includes at least three administrative departments (e.g. Human Resources, Finance, Engineering, etc.). Please include a description of the components of the health care environment experience that was gained and specific examples regarding interpretation and application.
- 2) Ability to facilitate the development and implementation of organizational policies, procedures, and programs, for a multifaceted health care organization that includes outpatient and inpatient services; and includes at least three administrative departments (e.g. Human Resources, Finance, Engineering, etc). Please include a description of the components of the health care environment experience that was gained and specific examples regarding interpretation and application.

NURSE SPECIALIST, GS-0610-12:

BASIC REQUIREMENTS: Education: Degree or diploma from a professional nursing program approved by the legally designated State accrediting agency at the time the program was completed by the applicant.

Licensure: All applicants for nurse positions must have active, current registration as a professional nurse in a State, District of Columbia, the Commonwealth of Puerto Rico, or territory of the United States. Please provide a copy of your license.

<u>ADDITIONAL REQUIREMENTS FOR THE GS-12:</u> 52 weeks specialized experience that also includes professional clinical nursing experience equivalent to the GS-11.

NURSE PRACTITIONER, GS-0610-12:

<u>BASIC REQUIREMENTS:</u> Education: Degree or diploma from a professional nursing program approved by the legally designated State accrediting agency at the time the program was completed by the applicant.

Licensure: All applicants for nurse positions must have active, current registration as a professional nurse in a State, District of Columbia, the Commonwealth of Puerto Rico, or territory of the United States.

<u>Selective Placement Factor:</u> Certification as a Nurse Practitioner by the National Commission on Certification for Nurse Practitioners. Please provide a copy of your certification.

<u>ADDITIONAL REQUIREMENTS FOR THE GS-12:</u> 52 weeks specialized experience that also includes professional nurse practitioner experience equivalent to the GS-11.

MEDICAL TECHNOLOGIST, GS-0644-12:

BASIC REQUIREMENTS:

- A. Successful completion of a 4-year program in: medical technology, chemistry, or biology that included or was supplemented by at least:
 - 16 semester hours of biological science of which one course was in microbiology and one course was in immunology. The remaining biology courses must have been in general biology, zoology, or any of the area listed below under "Evaluation of Education and Experience;" and
 - 16 semester hours of chemistry of which one course was in organic or biochemistry. The remaining chemistry courses must have been in general chemistry, qualitative analysis, qualitative chemistry, quantitative chemistry, physical chemistry, analytical chemistry, or any of the area listed blow under "Evaluation of Education and Experience;" and
 - 3 semester hours of college mathematics. OR;
- B. A full 4-year course of study that included or was supplemented by at least 12 months in a college or hospital-based medical technology program or medical technology school approved by a recognized accrediting organization. The professional medical technology curriculum may have consisted of a 1-year post-baccalaureate certificate program or the last 1 or 2 years of a 4-year program of study culminating in a bachelor's in medical technology. OR;
- C. A combination of (1) at least 35 semester hours of biological science, chemistry, and mathematics as described in paragraph A above and (2) additional appropriate education and/or experience totaling 4-years. This combination of education and experience must have provided knowledge of the theories, principles, and practices of medical technology equivalent to that provided by the full 4-year course of study described in A or B above. All science and mathematics' courses must have been acceptable for credit toward meeting the requirements for a science major at an accredited college or university. Acceptable experience is responsible professional or laboratory, or pharmaceutical hours; or teaching, test development, or medical research program experience that provided an understanding of the methods and techniques applied in performing professional clinical laboratory work. Certification/licensure as a medical technologist (generalist) obtained through written examination by a nationally recognized credentialing agency or State-licensing body is a good indication that the quality of experience is acceptable.

<u>ADDITIONAL REQUIREMENTS FOR THE GS-12:</u> 52 weeks specialized experience that also includes experience in the field of medical technology equivalent to the GS-11.

PHARMACIST, GS-0660-12:

BASIC REQUIREMENTS: Education: Four years bachelor's degree in pharmacy recognized by the American Council on Pharmaceutical Education.

Licensure: All applicants must be licensed to practice pharmacy in a State, territory of the United States or the District of Columbia.

<u>ADDITIONAL REQUIREMENTS FOR THE GS-12:</u> 52 weeks specialized experience that also includes professional pharmacy experience equivalent to the GS-11.

TIME IN GRADE: Candidates must have completed at least one year of service in a position no more than one grade lower than the position to be filled. (If selected under the Excepted Service Examining Plan, such individuals may be appointed under Schedule A authority without regard to Time-In-Grade requirements.)

LEGAL AND REGULATORY REQUIRMENTS: Candidates must meet time-after competitive appointment, time-in-grade, and qualification requirements by the closing date of the announcement.

METHODS OF EVALUATION: Evaluation is made on the basis of appropriate education, experience, performance appraisals, training, self-development, outside activities and special awards. Experience related to tribal involvement and to Indian community projects will also be evaluated. Applicants will also be evaluated on the following ranking factors, i.e., Knowledge, Skills, and Abilities (KSA's).

SUPPLEMENTAL QUESTIONNAIRE on KNOWLEDGE, SKILLS, AND ABILITIES (KSA): On a separate sheet of paper, discuss how you performed (or have potential to develop) the particular knowledge, skill, or abilities listed below. (Failure to submit written responses as part of your application may result in an ineligible rating.)

- 1. Ability to effectively communicate with multidisciplinary groups (support staff, clinicians, nurses, and administrators). What in your background shows you possess this ability? What was the duration of these activities? Who can verify this information? (Please provide a telephone number.)
- 2. **Ability to manage multiple projects and work assignments.** What in your background shows you possess this ability? What was the duration of these activities? Who can verify this information? (Please provide a telephone number.)
- 3. **Ability to work independently and under pressure**. What in your background shows you possess this ability? What was the duration of these activities? Who can verify this information? (Please provide a telephone number.)
- 4. Ability to use Microsoft software systems, and other IHS based data management systems (RPMS and ARMS), and ability to use Internet for data gathering and project enhancement. What in your background shows you possess this ability? What was the duration of these activities? Who can verify this information? (Please provide a telephone number.)

HOW TO APPLY/REQUIRED FORMS (Incomplete applications will not be considered):

- 1. Applicants may use one of the following to apply: (1) OF-612 Optional Application for Federal Employment, <u>or</u> (2) Resume (see requirements in **Attachment A**).
- 2. If claiming Indian Preference, BIA 4432 "Verification of Indian Preference for Employment in BIA and IHS".
- 3. If claiming Veteran's Preference, copy of DD-214 Form, and SF-15 if claiming 10 point Veteran's Preference.
- 4. Copy of latest Personnel Action (SF-50), if a current or former employee, and/or if requesting Reinstatement Eligibility.
- 5. Copy of most recent performance appraisal, if a current Federal Employee
- 6. Copies of college transcripts. Education will not be given credit without them. To claim credit or if you are substituting education for experience, you are required to provide evidence of the education by providing a copy of your official transcripts. No credit will be given without your transcripts.
- 7. Copy of current unrestricted Nursing License.
- 8. Written responses to the Selective Placement Factor (SPF). In order to be considered you are required to provide a written narrative for each SPF. See contents of Vacancy Announcement.
- 9. Completed PL 101-630 Questionnaire (Indian Child Care Form **form attached**). And The Declaration for Federal Employment (OF-306)
- 10. Completed Selective Service Registration Form (form attached).
- 11. Written Responses to the Knowledge, Skills, and Abilities (KSA) (failure to submit may result in an ineligible rating or substantially lower score).
- 12. Commissioned Corps Officer: (1) Curriculum Vitae, (2) Nursing License, (3) The Declaration for Federal Employment (OF-306) form and the (Child Care & Indian Child Care Worker Positions PL 101-630 Questionnaire **form attached**, (4) latest COER, and (5) current Billet Description, and (6) BIA FORM 4432 if claiming Indian Preference, and (7) Written Response to the Selective Placement Factor (SPF). In order to be considered you are required to provide a written narrative for each SPF. See contents of Vacancy Announcement.

Application and required forms must be identified by this announcement number and submitted to the address below:

ATTN: SWR-09-0251-1 Office of Human Resources Phoenix Indian Medical Center 1616 E. Indian School Rd., Suite 360E Phoenix, AZ 85016

Facsimile is acceptable – this office is not responsible for incomplete transmissions. All submitted materials are subject to retention by this office. You should duplicate and retain copies, since requests for copies will <u>not</u> be honored. Additional information regarding Federal job opening can be obtained at <u>www.opm.gov</u>, or at USAJOBS <u>www.usajobs.opm.gov</u> or check the IHS Website at <u>www.ihs.gov</u>. All documents are subject to the provision of the Privacy Act (PL 93-579) and become the property of Department of Health and Human Services (DHHS).

Phone: (602) 248-4180

Fax: (602) 248-4182

Additional selections of candidates may be possible within 90 days from the date the certificate of eligible is issued for this announcement, for filing additional or similar positions.

Human Resource Specialist: (Call 602-364-5219 to contact a Human Resources Specialist.) Date: 5/5/2009

ATTACHMENT A

Resume Requirements - Your resume or other application format must contain the following information to allow for qualification determination.

- Identify your application/resume by the announcement number, title and grade(s)
- Full Name (first, middle, last ~ include other names used, i.e., maiden name)
- Mailing Address
- Phone Number where you can be reached
- Email Address (if applicable)
- Social Security Number
- Country of citizenship
- Education: list high school and colleges attended, type of degree (list major) received, date of degrees conferred, and city and state of school.
- Work Experience: (include non-paid work as well as paid)
- Job Title (if Federal employment, indicate series and grade)
- Duties and Accomplishments
- Employer's name and Address
- Employer's name and phone number
- Starting and ending dates of employment (month/year)
- Hours of work per week
- Salary
- Indicate if you do <u>not</u> want us to contact your current supervisor (if not specified, it will be assumed that we may do so)
- List job related training (title, year obtained, hours of training)
- Honors or awards received
- License or certificates obtained (submit with application)
- Special accomplishments (i.e., publications, memberships, leadership and community recognition, etc).

Indicate if you do <u>not</u> want your current supervisor contacted for reference purposes.

ATTACHMENT B

- 1. You may be eligible for special selection priority consideration under the Career Transition Assistant Program (CTAP) if you are a current career or career-conditional (tenure group I or II) employee of the DHHS Agency at the GS-15 grade level or below or equivalent, and who has received a specific RIF separation notice or a Certificate of Expected Separation indication your job is surplus, or notice of removal for declining a directed reassignment or transfer of function outside the local commuting area. To qualify for special selection priority consideration under CTAP you MUST also meet the criteria shown in paragraph 3 below.
- 2. You may be eligible for special selection priority consideration under the Interagency Career Transition Assistance Program (ICTAP) if you are a current or former career-conditional (tenure group I or II) employee of any agency in the competitive service at the GS-15 grade level or below or equivalent, who has received a specific RIF separation notice or a notice of proposed removal for declining a directed reassignment or transfer of function outside the local commuting area. You may also be eligible if you were separated because of a compensable injury and your compensation has been terminated; or you retired with a disability and your disability annuity has been or is being terminated; or you were in receipt of a RIF separation notice and retired on the effective date of the RIF or under discontinued service; or you are a former Military Reserve Technician or National Guard Technician who is receiving a special disability retirement annuity from OPM. To qualify for special selection priority consideration under ICTAP you MUST also meet the criteria shown in paragraph 3 below.
- 3. To qualify for special selection priority consideration under CTAP or ICTAP for this vacancy, you MUST also meet ALL of the following:
 - (a) Have a current or last performance rating of record of at least fully successful or equivalent. A copy <u>MUST</u> be submitted with your application package. (Note: this requirement does not apply to candidates who are eligible due to compensable injury or disability retirement).
 - (b) Be applying for a position at or below the grade level from which you will be, or have been separated, and which does not have a greater promotion potential that the position from which you will be, or have been separated.
 - (c) Occupy or be displaced from a position in the same local commuting area of the position for which you are requesting priority consideration.
 - (d) File your application by the vacancy announcement closing date and meet all the applicable criteria. Your application MUST include ALL documents that support your claim of eligibility for priority consideration RIF separation notice, or notice of proposed removal for declining a directed reassignment or transfer of function to another commuting are; SF-50 Notification of Personnel Action, showing that they were separated as a result of RIF, or declining a transfer of function or directed reassignment to another area; official certification from an agency stating that it cannot place an individual whose injury compensation has been or is being terminated; or official notification from the Military Department or National Guard Bureau that the employee has retired under 5 USC 8337(h) Or 8456.
 - (e) Be rated "well qualified" for this position. A numerical rating of 85 is considered to be well qualified for this position.

APPLICANT'S STATEMENT OF SELECTIVE SERVICE REGISTRATION STATUS

If you are a male born after December 31, 1959, and are at least 18 years of age, civil service employment law {5 U.S.C. 3328} requires that you must be registered with the Selective Service law, unless you meet certain exemptions under Selective Service law. If you are required to register but knowingly and willfully fail to do so, you are ineligible for employment by executive agencies of the Federal Government.

CERTIFICATION OF REGISTRATION STATUS

Date signed {please use ink}

Check o	ne:
	I certify I am registered with the Selective Service System.
	I certify I have been determined by the Selective Service to be exempt from the registration provisions of Selective Service law.
	I certify I have not registered with the Selective Service System.
	I certify I have not reached my 18 th birthday and understand I am required by law to register at that time.
NON-R	EGISTRANTS UNDER AGE 26
	re under age 26 and have not registered as required, you should register promptly at a United States Post Office or consular you are outside the United States.
NON-R	EGISTRANTS AGE 26 OR OVER
register the Office decision OPM de	were born in 1960 or later, are 26 years of age or older, and were required to register but did not do so, you can no longe under Selective Service law. According, you are not eligible for appointment to an executive agency unless you can prove to ce of Personnel Management (OPM) that your failure to register was neither knowing nor willful. You may request an OPM through the agency that was considering you for employment by returning this statement with your written request for an etermination together with an explanation and documentation you wish to furnish to prove that your failure to register was knowing nor willful.
PRIVA	CY ACT STATEMENT
to provi This inf	e information on your registration status is essential for determining whether you are in compliance with 5 U.S.C. 3328, failure de the information requested by this statement will prevent any further consideration of your application for appointment formation is subject to verification with the Selective Service System and may be furnished to other Federal agencies for law ment or other authorized use in implementing this law.
FALSE	STATEMENT NOTIFICATION
	statement may be grounds for not hiring you, or for firing you if you have already begun work. Also, you may be punished by mprisonment (Section 1001 of title 18, United States Code).
Legal si	gnature of individual {please use ink}

Addendum to Declaration for Federal Employment (OF 306) Indian Health Service Child Care & Indian Child Care Worker Positions

Child Care & Indian Child Care Worker Positions

Name: Social Security Number:		ty Number:
Job Title of Announcement: Policy and Procedur	re Officer	Announcement Number: SWR-09-0251-
Section 231 of the Crime Control Act of 1990, Pu Federal Child care positions contain a question askir with a crime involving a child and for the disposition	ng whether the	individual has ever been arrested for or charge
Section 408 of the Miscellaneous Indian Legislation positions in the Department of Health and Human S Children. The agency must ensure that persons him nolo contendere to violent crimes.	Services that in	volve regular contact with or control over India
To assure compliance with the above laws, the f Employment.	following quest	ions are added to the Declaration for Federa
1) Have you ever been arrested for or charged with	h a crime involv	ring a child? YES NO
[If YES , provide date, explanation of the violation the name and address of the police department of		
2) Have you ever been found guilty of, or enterfelonious or misdemeanor offense under Federal, St molestation, contact or prostitution, or crimes against	tate, or Tribal l	aw involving crimes of violence, sexual assaul
[If YES , provide date, explanation of the violence the name and address of the police department of		
I certify that (1) my response to these questions is mate to \$2,000 or 5 years imprisonment, or both; and (2) I understand my right to obtain a copy of any criminal my right to challenge the accuracy and completeness	I have received I history report	notice that a criminal check will be conducted. made available to the Indian Health Service and
Applicant's Signature (sign in ink)	-	Date

Public Burden Statement: In accordance with Paperwork Reduction Act (5 CFR 1320.8 (b)(3), a Federal agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Respondents must be informed (on the reporting instrument, in instructions, or in a cover letter) the reasons for which the information will be collected; the way the information will be used to further the proper performance of the functions of the agency; whether responses to the collection of the information are voluntary, required to obtain a benefit (citing authority), or mandatory (citing authority); and the nature and extent of confidentiality to be provided, if any (citing authority). Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the necessary data, and completing and reviewing the collection information. Send comments regarding the burden estimate or any other aspect of this collection of information to the IHS PRA Information Collection Clearance Staff, 12300 Twinbrook Parkway, Suite 450, Rockville, MD 20852. *Please do not send completed data collection instruments to this address.*

FORM APPROVED: O.M.B. NO. 0917-0028 Expires 02/28/2009