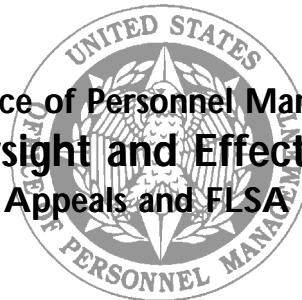


U.S. Office of Personnel Management  
Office of Merit Systems Oversight and Effectiveness  
Classification Appeals and FLSA Programs



Washington Oversight Division  
1900 E Street, N.W.  
Washington, DC 20415

**Classification Appeal Decision**  
**Under Section 5112 of Title 5, United States Code**

**Appellant:** [name]

**Agency classification:** Dental Hygienist  
GS-682-7

**Organization:** Periodontics Department  
[medical center]  
Department of the Navy  
[city and State]

**OPM decision:** Dental Hygienist  
GS-682-7

**OPM decision no.:** C-0682-07-01

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Richard Quasney  
Classification Appeals Officer

June 30, 1999

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Date

As provided in section 511.612 of title 5, Code of Federal Regulations, this decision constitutes a classification certificate that is mandatory and binding on all administrative, certifying, payroll, disbursing, and accounting officials of the Government. The agency is responsible for reviewing its classification decisions for identical, similar, or related positions to ensure consistency with this decision. There is no right of further appeal. This decision is subject to discretionary review only under the conditions and time limits specified in title 5, Code of Federal Regulations, sections 511.605, 511.613, and 511.614, as cited in the Introduction to the Position Classification Standards, appendix 4, section G (address provided in appendix 4, section H).

**Decision sent to:**

[appellant]

[servicing personnel officer]

Ms. Janice W. Cooper  
Chief, Classification Branch  
Field Advisory Services Division  
Department of Defense  
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## **Introduction**

On March 24, 1999, the Washington Oversight Division of the U.S. Office of Personnel Management (OPM) accepted a position classification appeal from [appellant], who is employed as a Dental Hygienist, GS-682-7, in the Periodontics Department at the [medical center], Department of the Navy, in [city and State]. [Appellant] requested that her position be classified at the GS-8 level. This appeal was accepted and decided under the provisions of section 5112 of title 5, United States Code.

An on-site position audit was conducted by a Washington Oversight Division representative on June 21, 1999, including an interview with the appellant's first-line supervisor, [name]. This appeal was decided by considering the audit findings and all information of record furnished by the appellant and her agency, including her official position description, number K102016001, most recently classified by the servicing personnel office as Dental Hygienist, GS-682-7, on February 3, 1999.

## **General Issues**

The appellant described several duties and considerations that she believes warrant upgrading of her position to the GS-8 level. Some of these elements are directly addressed in the below factor level evaluation. Certain others, however, either cannot be considered, or can only be considered to a limited extent.

First among these are the appellant's responsibility for developing and presenting instructional materials for patients and other dental personnel. The appellant has, in past years, developed and revised a manual on oral hygiene for new mothers and newborns (1982, 1996) and a study skills guide for dental technicians (1992), and had co-directed a five-day preventive dentistry course for dental technicians (discontinued in 1997). However, because these are not regular and recurring duties, and the appellant has not been involved in any instructional activities of this nature for the past two years, they cannot be considered in the grade level evaluation of her position. This is based on guidance provided in the Introduction to the Position Classification Standards (dated August 1991), which instructs that a particular kind and level of work may be grade-controlling only if "the work is officially assigned to the position on a regular and recurring basis," and "it is a significant and substantial part of the overall position (i.e., occupying at least 25 percent of the employee's time.)"

Second, the appellant occasionally tries out new products sent to her by dental supply companies, gives them feedback, and may recommend purchase to the supervisor. However, this likewise is not a particularly frequent duty and is limited to reporting her own or her patients' subjective opinions rather than a more technical evaluation of the product's efficacy. Thus, this particular activity is not specifically addressed in the below evaluation.

Third, the appellant has, for the past two years, been assigned to the [special assignment], in which capacity she provides dental hygiene treatment to [identified parties]. She reported that the appointments are at three-month intervals for each person and that this generally involves about

one visit every three weeks. The appellant is the first dental hygienist to be selected for this assignment, these services historically having been provided by the appointed dentist. This is an honorary assignment, to continue for at least the duration of the current Administration, and as such is a reflection of the appellant's high level of competence and professionalism. This assignment is considered below under Factor 6, Personal Contacts. Beyond that, however, it has no bearing on the remainder of the evaluation, in that it does not actually impose any greater knowledge requirements or complexity than her regular dental hygiene caseload.

### **Position Information**

As the sole dental hygienist in the periodontics department, the appellant provides advanced prophylactic and preventive periodontic treatment and related instructional services to active duty and retired military personnel and their dependents.

### **Series Determination**

The appellant's position is properly assigned to the Dental Hygiene Series, GS-682. Neither the appellant nor the agency disagrees.

### **Title Determination**

The appellant's position is correctly titled as Dental Hygienist, which is the authorized title for positions in this series involving work of a clinical nature. Neither the appellant nor the agency disagrees.

### **Standard Determination**

The position was evaluated by application of the position classification standard for the Dental Hygiene Series, GS-682, dated March 1982. This standard is written in the Factor Evaluation System (FES) format, under which factor levels and accompanying point values are to be assigned for each of the following nine factors, with the total then being converted to a grade level by use of the grade conversion table provided in the standard. The factor point values mark the lower end of the ranges for the indicated factor levels. For a position to warrant a given point value, it must be fully equivalent to the overall intent of the selected factor level description. If the position fails in any significant aspect to meet a particular factor level description, the point value for the next lower factor level must be assigned, unless the deficiency is balanced by an equally important aspect that meets a higher level.

#### *Factor 1, Knowledge Required by the Position*

This factor measures the nature and extent of information an employee must understand in order to do the work, and the skills needed to apply that knowledge.

At Level 1-4, work requires knowledge of basic dental hygiene sciences, related clinical techniques and procedures, and standard dental instruments and materials to perform routine prophylactic treatment such as cleaning, scaling, and polishing, and to provide basic oral health care instructions to patients; and knowledge of common oral diseases and abnormal conditions, such as dental decay, gingivitis, and oral abscesses, sufficient to recognize them, provide the necessary prophylactic treatment, and educate patients in the prevention of tooth decay and gum inflammation.

At Level 1-5 (the highest level described under this factor), work requires:

- Knowledge of dental hygiene sciences sufficient to perform a variety of specialized diagnostic, prophylactic, and preventive dental hygiene procedures, such as complete preliminary dental examinations; oral prophylaxis, including root planing and curettage under local anesthesia; polishing and finishing amalgam restorations; inserting temporary sedative fillings in teeth; and placement and removal of periodontal packing.
- Knowledge of oral pathology sufficient to recognize symptoms, understand the disease processes, and determine proper referral or appropriate course of dental hygiene treatment.
- Knowledge of various medical diseases that alter standard prophylactic and therapeutic dental hygiene procedures, and understanding of the effects of the diseases and related medications on the care and treatment of the teeth.
- Skill in conducting individual or group health care instructions to motivate patients with special needs toward the practice of effective oral hygiene techniques.
- Skill in manipulating a variety of instruments while performing specialized dental hygiene procedures.

The knowledge required by the appellant's position is consistent with Level 1-5. The appellant works in the periodontics department treating almost exclusively patients with advanced gum disease. She also reported that patients from the oral medicine department with the more serious or complex medical conditions are routinely referred to her for dental hygiene treatment. She estimated that of approximately 35 patients each week, about 10 are medically compromised, with less than 5 of the remainder constituting walk-in patients requiring a routine half-hour treatment. The rest are advanced periodontic patients whose appointments generally take at least an hour. The appellant regularly performs such specialized dental hygiene procedures as deep scaling, root planing, and curettage under local anesthesia or sedation, tooth implant care, desensitization of teeth, cleaning of obdurators and the associated oral cavities, and insertion of antibiotic periochips. She treats patients with a variety of medical conditions and diseases, such as oral cancer, diabetes, HIV, tuberculosis, and blood dyscrasia, and must know their effects on the patients' teeth, any specialized treatment or precautions that must be taken, and whether pre-treatment antibiotics are necessary. These aspects of her work transcend the "routine" prophylactic treatment described

at Level 1-4 and align her position more closely with Level 1-5 in its description of “specialized” dental hygiene procedures and “special need” patients.

Level 1-5 is credited.

750 points

### *Factor 2, Supervisory Controls*

This factor covers the nature and extent of direct or indirect controls exercised by the supervisor, the employee’s responsibility, and the review of completed work.

At Level 2-2, the hygienist carries out most assignments independently without direct observation, but the dentist provides specific instructions and assistance in carrying out treatment procedures on patients requiring specialized care.

At Level 2-3 (the highest level described under this factor), the supervisor assigns ongoing responsibility to the hygienist for coordinating and carrying out the preventive phase of the dental service in accordance with the set philosophy and objectives of the dental program. Some dental hygienists at this level are assigned regular and continuing responsibility for providing special dental hygiene treatment and education to patients with acute or unusual oral problems. The hygienist carries out the preventive phase of the program with relative freedom for exercising independent judgment and resourcefulness, develops instructional activities, provides appropriate dental hygiene treatment, and plans and carries out the training of other dental hygienists, dental assistants, and members of the nursing staff. The hygienist is responsible for coordinating the preventive services with other staff of the dental service and with members of organizations outside the service, e.g., medical staff and members of affiliated colleges and universities. The results of the work are generally reviewed at completion for adherence to the policies and objectives of the dental service.

The level of responsibility under which the appellant works is comparable to Level 2-3. The appellant’s long experience in dental hygiene enables her to treat even patients with severe and unusual problems independently without preliminary instruction. Once a patient is referred to her for prophylactic services, she is responsible for assessing the extent and frequency of the treatments necessary, coordinating with the referring dentist. As the [medical center] is a training facility, she is called upon several times each year to provide training to military dental technicians in basic prophylactic techniques, and more informally, advises dental residents in other departments on specialized cleaning procedures. Her work clearly exceeds Level 2-2, where the hygienist works independently only within the context of routine and recurring assignments.

Level 2-3 is credited.

275 points

### *Factor 3, Guidelines*

This factor covers the nature of the guidelines used and the judgment needed to apply them.

The appellant's use of guidelines matches Level 3-2. At that level, guidelines include agency manuals and operating procedures, accepted dental hygiene procedures and techniques, and established policies and practices of the dental care program. The hygienist is also guided by the ethics and principles of the dental profession and the applicable State standards. The hygienist must use judgment in selecting and adapting the most appropriate guidelines and procedures to individual cases or problems. Situations requiring significant deviations from the guidelines are referred to the supervisor. Correspondingly, the appellant uses judgment in selecting instruments and in determining the type and length of treatment, and sequence of appointments, appropriate for individual patients.

The position does not meet Level 3-3 (the highest level described under this factor). At that level, guidelines include agency policies and objectives governing activities of the dental health service, State and local regulations pertaining to accepted practices of dental hygiene, policy manuals of the professional associations, professional journals and dental health literature, and the recognized ethics of the field. The standards and methods for delivery of preventive dental care lack specificity and, in some cases, require further development. The hygienist must use judgment in selecting, developing, or adapting methods, technical procedures, and materials appropriate for the treatment and education of various patients and targeted groups. Also, at this level the hygienist may make recommendations regarding new techniques or changes in the objectives of the preventive dental program or approaches to providing care.

This level is applicable to those hygienist positions regularly involved in developing, adapting, or presenting instructional materials to individual patients and targeted groups. As was mentioned above, this has not been a regular, recurring, or recent element of the appellant's position. The setting in which she works, a dental teaching facility where patients come in for appointments and leave immediately thereafter, does not readily lend itself to regular performance of these types of instructional assignments as would, for example, a hospital (with large numbers of in-patients being treated for similar ailments) or community health clinic (where educational services are an integral part of the mission).

Level 3-2 is credited.

125 points

#### *Factor 4, Complexity*

This factor covers the nature, number, variety, and intricacy of the tasks or processes in the work performed, the difficulty in identifying what needs to be done, and the difficulty and originality involved in performing the work.

At Level 4-2, the patients treated are characterized as having minor dental hygiene problems requiring the performance of routine dental hygiene procedures, where the method and type of treatment rendered are the same in most cases.

At Level 4-3 (the highest level described under this factor), the work involves the performance of a variety of specialized dental hygiene procedures, methods, and techniques. Patient treatment is usually lengthy, nonroutine in nature, and frequently complicated by medical and dental related problems. The hygienist must assess the extent of the patient's dental problem, determine the best course of dental hygiene treatment, coordinate the patient's medical and dental hygiene treatment, and choose the appropriate instruments, materials, and techniques from among many alternatives.

The complexity of the appellant's work is comparable to Level 4-3. Her caseload consists almost entirely of advanced periodontal and oral surgery patients. The treatment is lengthy (appointments taking over one hour) and nonroutine, and frequently complicated by such problems as advanced gum disease and oral cancer.

Level 4-3 is credited.

150 points

*Factor 5, Scope and Effect*

This factor covers the relationship between the nature of the work, and the effect of the work products or services both within and outside the organization.

At Level 5-2, the purpose of the work is to provide specific dental hygiene treatment and educational services to patients. The work affects the attitude of patients toward maintaining good oral health.

At Level 5-3 (the highest level described under this factor), the purpose of the work is to plan and provide comprehensive dental hygiene treatment and educational programs, and additionally to plan instructional programs and the development of materials for patients participating in the dental hygiene program.

The scope and effect of the appellant's work match Level 5-2, in that the primary purpose of her position is the provision of individualized dental hygiene services to patients rather than the development of the broader instructional programs described at Level 5-3.

Level 5-2 is credited.

75 points

*Factor 6, Personal Contacts*

This factor includes face-to-face and telephone contacts with persons not in the supervisory chain. The relationship between Factors 6 and 7 presumes that the same contacts will be evaluated under both factors.

At Level 6-2 (the highest level described under this factor), contacts may include patients, medical and dental personnel, representatives of community organizations, school faculty members, and



dental and medical professional associations. The standard notes that the majority of dental hygiene positions are at this level. The appellant's personal contacts match this level.

Since the GS-682 standard does not include criteria beyond Level 6-2, the Primary Standard was consulted to consider the possible impact of the appellant's assignment to the [special assignment] under this factor. (The Primary Standard serves as the "standard for standards" for the Factor Evaluation System, providing the basic factor level criteria that are used as the foundation for the more specific occupational standards.) In the Primary Standard, contacts at national levels are reflected at Level 6-4. However, at that level, and to a somewhat lesser extent at Level 6-3, these contacts take place in unstructured settings, where the purpose and extent of each meeting is different and the employee's role and authority may be unclear. The appellant's contacts with the [identified parties] are in the structured settings typical of Level 6-2, with the purpose of the contact and the appellant's role well defined.

Level 6-2 is credited.

25 points

#### *Factor 7, Purpose of Contacts*

This factor covers the purpose of personal contacts ranging from factual exchange of information to situations involving significant or controversial issues and differing viewpoints and objectives.

At Level 7-2, contacts are for the purposes of planning and coordinating dental hygiene treatment and educational services, motivating individuals to practice effective oral health techniques, presenting demonstrations in oral hygiene, advising patients on proper follow-up dental care, general diet, and nutrition, and instructing medical and dental personnel in the methods and techniques of oral hygiene. This accurately characterizes the purposes of the appellant's contacts.

The position does not meet Level 7-3 (the highest level described under this factor). At that level, there is regular and recurring contact with persons or groups who are unusually difficult to treat or communicate with because of problems such as deep rooted skepticism and fear, lack of self control, resistant behavior, or impediments in ability to understand or follow instructions. In the appellant's case, although patients may vary in their degree of receptivity to dental treatment, the nature of the work setting (a dental teaching facility) does not regularly present the types of difficult clientele intended at this level as would, for example, a psychiatric or similar facility.

Level 7-2 is credited.

50 points

#### *Factor 8, Physical Demands*

This factor covers the requirements and physical demands placed on the employee by the work situation.

The position matches Level 8-2 (the highest level described under this factor), which covers the physical demands imposed by the chairside treatment of patients.

Level 8-2 is credited. 20 points

*Factor 9, Work Environment*

This factor considers the risks and discomforts in the employee’s physical surroundings or the nature of the work assigned and the safety regulations required.

The position matches Level 9-2 (the highest level described under this factor), which describes the risks typically associated with the performance of clinical dental hygiene procedures, such as radiation, contagious diseases, burns, and flying dental debris, and where protective clothing and equipment are worn.

Level 9-2 is credited. 20 points

*Summary*

| <u>Factors</u>       | <u>Level</u> | <u>Points</u> |
|----------------------|--------------|---------------|
| Knowledge Required   | 1-5          | 750           |
| Supervisory Controls | 2-3          | 275           |
| Guidelines           | 3-2          | 125           |
| Complexity           | 4-3          | 150           |
| Scope and Effect     | 5-2          | 75            |
| Personal Contacts    | 6-2          | 25            |
| Purpose of Contacts  | 7-2          | 50            |
| Physical Demands     | 8-2          | 20            |
| Work Environment     | 9-2          | <u>20</u>     |
| Total                |              | 1490          |

The total of 1490 points falls within the GS-7 range (1355-1600) on the grade conversion table provided in the standard.

**Decision**

The appealed position is properly classified as Dental Hygienist, GS-682-7.