CLASSIFICATION STANDARD OPERATING PROCEDURE COMPLETING OPTIONAL FORM 8 (OF-8) – ORD FIELD ACTIVITIES

SOP CSSU-007

Classification

Functional Area(s):

Classification Shared Service Unit (CSSU)

Signatory Authority

Director, Human Resources Operations Office (HROO) CSSU

Effective Date: August 23, 2023

Responsible Owner:

Deputy Director, CSSU HROO CSSU Supervisor Recertification Date: August 31, 2028

1. PURPOSE AND AUTHORITY

The purpose of this Standard Operating Procedure (SOP) is to provide guidance to ORD Field Activities for the procedures on completing the OF-8 prior to submission into LEAF. This SOP must be followed by ORD Field Activities who have the responsibility for ensuring the accurate completion of this form as it will be used as the position description cover sheet.

2. PROCEDURES

a. **Box 1: Department Position Number.** This can be left blank as the assigned Classifier will fill in the proper PD number.

b. <u>Box 2: Reason for Submission.</u> Please select the appropriate box as to why the PD is being submitted for action. Options include Redescription, New, Reestablishment, and Other (covers things such as change in title or occupational series without a change in duties or responsibilities). Under "Explanation" show any position(s) redescribed, replaced, amended, or reactivated. Include the position classification title, series, grade, date classified, and position number. Reason for submission must be checked.

c. Box 3: Service. All ORD Field Activities will select "Field".

d. **Box 4: Employing Office Location.** Enter geographical location by city and State where the Field Activity is located.

e. **Box 5: Duty Station.** Enter geographical location if different from that of Item 4.

(1) If an employee is regularly scheduled to work at least twice each biweekly pay period at the regular worksite (where the employee's work activities are based), then this location is considered the employee's official duty station. (Ex. if an employee is

working at a facility in Seattle, Washington at least twice each pay period, then the Official Duty Station is Seattle.)

(2) If an employee covered by a telework agreement does not meet the above requirement (or any of the exceptions detailed in 5 CFR 531.605), then their official duty station is the location of the employee's telework site.

f. **Box 6: OPM Certification Number.** Leave blank as this box is to be completed by OPM when certifying positions.

g. <u>Box 7: Fair Labor Standards Act.</u> Check one to note whether the incumbent is exempt or nonexempt from the minimum wage and overtime provisions of the Fair Labor Standards Act. This will be reviewed and updated by the assigned Classifier.

h. **<u>Box 8: Financial Statements Required.</u>** Check box if statement is required. To be completed by originating office with advice and guidance by the servicing HR management office.

i. Box 9. Subject to IA Action. Check one to show whether Identical Additional positions are permitted (i.e., multiple incumbents can be assigned to the same PD). Agencies may show the number of such positions authorized and/or established after the "Yes" block.

j. Box 10: Position Status. Check which applies to the position. Is it Competitive Service, Excepted Service, or SES?

k. **<u>Box 11. Position Is.</u>** Check which applies to the position. Is it Supervisory, Managerial, or Neither in nature?

I. <u>Box 12: Sensitivity.</u> Check one to show whether the position is Non-sensitive, Noncritical sensitive, Critical Sensitive, or Special Sensitive for security purposes.

m. **Box 13: Competitive Level Code.** Leave blank as the assigned Classifier will fill in this box.

n. **Box 14: Agency Use**. Leave blank as the assigned Classifier will fill in this box.

o. <u>Box 15: Official Title of Position, Pay Plan, Occupational Code, Grade.</u> Lines "a" through "c" are not for ORD Field Activity use. Line "d" is to be completed by the assigned Classifier. Line "e" will be filled out by the submitting supervisor or ORD initiating Field Activity with the proposed information for the position.

p. **Box 16: Organizational Title of Position.** Enter the organizational, functional, or working title if it differs from the official title. Although optional, supervisors and initiating officers are encouraged to complete if different from official classification title.

q. <u>Box 17: Name of Employee.</u> Enter the name of the incumbent. If there is no incumbent, enter "vacancy." For IA positions with more names than can be accommodated in the space provided, an additional sheet of bond paper listing all the incumbents may be attached to the position description. This should be utilized when the ORD Field Activity is submitting a classification request for a Principal Investigator.

r. **Box 18: Department, Agency, or Establishment.** Enter the organizational location of the position, starting with the name of the department or agency and working down from there.

(1) Department Of Veterans Affairs

(2) For First Subdivision enter Veterans Health Administration.

(3) For Second through Fifth Subdivision Enter the VISN the Field Activity is located in, the ORD Field Activity, and so forth down the organization chain of command (i.e., VISN 22, San Diego Health Care System, Research and Development Service, etc.

s. **Box 19: Employee Review.** If the position is occupied, have the incumbent read the attached description of duties and responsibilities. The employee's signature is optional. Although optional, a note indicating that the employee has read the position description may be included if the employee declines to sign. For IA positions, the employees may sign the attached bond sheet listing the incumbents (see item 17 above).

t. **Box 20: Supervisory Certification.** Supervisors are reminded of their personal responsibility and liability relating to the contents of the position description and certification thereof. No classification action should be taken before the signatures of the immediate and, as appropriate, a higher-level supervisor or director are obtained.

(1) 20a - Immediate Supervisor. The immediate supervisor (direct report) must sign this box. A higher-level supervisor or manager may sign for the immediate supervisor if they are away from the office (i.e., Annual Leave, On Detail, etc.) or if the immediate supervisor position is vacant.

(2) 20b - Higher-Level Supervisor or Manager. In the field, the higher-level supervisor should be at least one level higher that the immediate supervisor and this signature is optional.

u. **Box 21: Classification/Job Grading Certification.** This certification must be completed by any appropriate official (assigned Classifier) to whom position classification authority has been delegated.

v. **Box 22: Standards Used in Classifying/Grading Position.** Leave blank as the assigned Classifier will enter the position classification/job grading standard(s) used and date of issuance. The identification of the standard(s) used does not negate the responsibility for preparing and attaching a position evaluation report as necessary.

w. **Box 23: Position Review.** This can be left blank unless the ORD Field Activity is submitting a Pen and Ink change or other formal review. If so, the submitting supervisor will fill out the appropriate line item in Box 23. If further questions arise, please reach out to the CSSU for questions. The initials by the supervisor and classifier represent recertifications of the statements in Items 20 and 21 respectively.

x. <u>Box 24: Remarks.</u> Agencies may use this space for any additional coding requirements or for any appropriate remarks. Leave this box blank unless the position submitted is an Excepted Service position. Then please enter the authority for the exception (e.g., "Schedule A-213.3102(d)). The assigned Classifier to whom position classification authority has been delegated will use this section to include the following information for all positions: Bargaining Unit Status Code (BUS) (as designated by an ER/LR Specialist), Position Risk Level, Cybersecurity Code, and Supervisory Level.

y. **Box 25: Description of Major Duties and Responsibilities.** This is the draft position description which includes the major duties and responsibilities, applicable factors, and other significant information formatted in Microsoft Word.

3. DEFINITIONS

a. <u>**Redescription.**</u> The duties and responsibilities of an existing position are being changed.

b. New. Position has not previously existed.

c. **<u>Reestablishment.</u>** Position previously existed but has been cancelled.

d. <u>Permanent Position.</u> Position that has been established for a period of time without limit, or for a limited period of a year or more or which, in any event, has been occupied continuously for a year of more (regardless of the intent when it was established).

e. **<u>Temporary Position</u>**. Position that has been established for a limited period of less than 1 year, and which has been filled continuously for less than 1 year.

4. REFERENCES

Optional Form 8 (Rev. 1-85), U.S. Office of Personnel Management

5. REVIEW AND RECERTIFICATION

SOPs must be reviewed upon recertification or when there are changes to the governing documents, systems, or organization, whichever occurs earlier. Authors will be required to review existing SOPs or policies two years following the latest signature date. Recertification (review and approval by Signatory Authority) will be required five years following the latest signature date.

6. SIGNATORY AUTHORITY

JON DEMOREST Digitally signed by JON DEMOREST Date: 2023.08.28 10:29:59 -04'00'

for Adam D. Mann Director, HROO CSSU

Date Approved: August 28, 2023 Review Date: August 31, 2025 Recertification Date: August 31, 2028