

Provider Group – Joint Job Evaluation Job Fact Sheet <u>Job #029 – Payroll Clerk</u>

PLEASE PRINT

Section 1 – INTRODUCTION

Purpose:

This section provides general direction for completing the Job Fact Sheet and is further supplemented by the additional instructions set out in the remaining sections of this Job Fact Sheet.

The collection of accurate, complete, up-to-date and gender neutral job information is essential to, and forms the basis of, the job evaluation process.

This Job Fact Sheet (JFS) provides a format and serves as a questionnaire designed to describe a job, to capture the skill, effort and responsibility normally required in the work, and to record the conditions under which it is usually carried out. The JFS focuses on **CURRENT** job content and requirements. **THIS IS NOT AN APPRAISAL OF AN INDIVIDUAL'S PERFORMANCE ON THE JOB.**

Please read the JFS carefully, and complete each section. Throughout the JFS examples are requested and are important as you describe the job. Provide additional information on the back blank pages of this document, additional job holder comments can be recorded in Section (16) on page 26, or attach additional pages if necessary.

SUPERVISOR – STEPS TO FOLLOW:

- 1. a. New Job: complete Job Review Request Form (JRRF), complete a proposed JFS and proposed Job Description.
 - b. Forward all documents to your Human Resources representative.
- 2. DO NOT CHANGE EMPLOYEE'S RESPONSES.

EMPLOYEE - STEPS TO FOLLOW:

- 1. Please read the JFS carefully, and complete each section. If you find that some questions do not relate to your job, please write in "not applicable".
- 2. The information you provide should relate to the job content as it currently exists. When reviewing your duties and responsibilities, ensure that you consider the entire job cycle (activities that regularly occur in a one-year period).
- 3. Group submissions are encouraged for employees doing the same or very similar job duties.
- 4. It is suggested that you complete Sections 6 through 15 before completing Sections 4 and 5. The "Sample Key Activities" (see Appendix A) may assist you in completing Section 5.
- 5. Once you have completed the JFS and if you have not already submitted a JRRF, please complete and forward both documents to your Human Resources representative. Keep a copy of all documentation for your records. Please complete the Signatures Section (17) on page 26.
- 6. Your immediate Out-of-Scope Supervisor (Supervisor) will review your completed JFS and add comments at the end of each section.
- Please keep in mind that, although you are the employee(s) doing the job, what is being described are the current responsibilities of the job not how well you are performing these tasks and responsibilities. It is important that you concentrate only on providing the facts about the job and its responsibilities.

Purpose: This section gathers information regarding the organization	n in which your job functions.
Complete the Chart below: Be sure to write in the Provincial JE Job Title of the position – not the name of	of the person currently in the job.
Title of your immediate Out-of-Scope Supervisor	SUPERVISOR'S COMMENTS – ORGANIZATIONAL WORK CHART
	Are the responses to this question: Complete Do you agree with the responses: Yes No
Title of your immediate Supervisor (if different than above)	COMMENTS (must be completed if "Incomplete" or "No" is selected):
Your current Provincial JE Job Title	Supervisor's Initials:
Your current Provincial JE Job Number:	,
Provincial JE Job Titles that report directly to you (if applicable)	

Section 3 – JOB IDENTIFICATION						
Purpose: This section g	athers basic identifying	g material so we can keep tra	ack of comp	leted Job Fact S	heets.	
Provide your name and work telephone n	umber(s) for contact pur	poses. For group JFS submis	sions, please	note the name an	nd telephone number(s) of the contact	person.
Name of person completing the JFS for a ARE DOING THE SAME JOB):	single employee, or con	tact person for group JFS sub	mission (ON	ILY COMPLETE	E A GROUP SUBMISSION IF ALL E	EMPLOYEES
Name (Print):					Employee No.:	
Work Telephone:		E-Mail Address:				
Saskatchewan Health Authority/Affiliate						
Facility/Site:			Departm	nent:		
See Section 18 on page 28 for signatures.						
Provincial JE Job Title:					Date:	
Provincial JE Number:		Office use on	ly:	JEMC No.	<u>M</u>	
Section 4 – JOB SUMMARY						
Purpose: This section d	escribes why the job ex	rists.				
Briefly describe the general purpose of the	is job: Performs data en	ntry and clerical duties to fac	ilitate the pi	rocessing of payro	oll and benefit services.	
Tips: Consider "Why does this job exist?" an Think about what you would say if son You may wish to begin with: "The (Job	neone approached you ar	nd asked you about your job.	for"			
		**********	******	*****	******	
SUPERVISOR'S COMMENTS – JOB	SUMMARY		COMM	ENTS (<u>must</u> be o	completed if "Incomplete" or "No"	is selected):
Are the responses to this question:	☐ Complete	☐ Incomplete				
Do you agree with the responses:	☐ Yes	□ No			Supervisor's Initials:	
					Super visor's initials:	

Section 5 – KEY WORK ACTIVITIES

Purpose: This section describes the key activities, duties and responsibilities of the job.

Consider the full range of job duties or responsibilities undertaken over the year. Summarize these in rough form before completing this section.

Group the job duties or responsibilities that are related and summarize them in a phrase, at the top of each box (e.g., counseling and patient education, preventative maintenance, community involvement). Estimate (to the nearest 5%) the percentage of time per year spent on each key work activity summarized in the section(s) below. Most jobs can be described in three to five key work activities.

The total of all key work activity sections should equal but not exceed 100%. For example: ½ day every day per year = 50%; 3 months per year = 25%; 2½ weeks per year = 5%

After summarizing each key work activity, provide details or examples that describe the related job duties or responsibilities. If using abbreviations, acronyms or technical terminology, please initially explain their meaning.

- Don't get lost in detail in describing the duties and responsibilities. Use clear verbs about things that are done in connection with each one. Avoid using a gender biased wording (i.e. he or she) in describing the work.
- It is important that the **whole job** be described, not just a particular dimension or a special project.

The "Sample Key Activities" (see Appendix A) may assist you in completing this section.

Key Work Activity A: <u>Data Entry</u>	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES
Duties/Responsibilities:	Are the responses to this question: Complete Incomplete
 Enters data from time sheets into computerized payroll system. Processes data (e.g., new hires, employee status changes). 	Do you agree with the responses:
	COMMENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):
	Supervisor's Initials:

Key Work Activity B: Payroll / Benefits	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES
Outies/Responsibilities: Verifies and processes employee work records. Checks and corrects errors from payroll run. Prepares, sorts and files a variety of reports (e.g., month-end, statistics). Processes and distributes Record of Employment forms. May calculate retroactive pay and/or wage increases. May track vacation, earned time off, sick days, family days.	Are the responses to this question: Complete Incomplete Do you agree with the responses: Yes No COMMENTS (must be completed if "Incomplete" or "No" is selected) Supervisor's Initials:
ey Work Activity C: Related Key Work Activities Inties/Responsibilities: Responds to payroll inquiries. Prepares union invoicing. Participates in processing claims (e.g., Workers' Compensation Benefits, disability). Assists with maintaining employee and benefit files. Processes transportation and per diem allowances. Processes professional fees. Maintains and balances petty cash, cash register receipts. Performs client billing and other accounts receivable functions. Performs clerical duties. May show others how to perform tasks or duties by familiarizing new employees with the work area and processes.	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES Are the responses to this question: Complete Incomplete Do you agree with the responses: Yes No COMMENTS (must be completed if "Incomplete" or "No" is selected) Supervisor's Initials:

Key Work Activity D:	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES
outies/Responsibilities:	Are the responses to this question: Complete Incomplete
	Do you agree with the responses:
	COMMENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):
	Supervisor's Initials:
ey Work Activity E:	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES
uties/Responsibilities:	Are the responses to this question: Complete Incomplete
	Do you agree with the responses:
	COMMENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):
	Supervisor's Initials:

Section 6 – DECISION-MAKING

Purpose: This section provides a series of situations that may be encountered on the job requiring decision making before taking action.

For each situation, please indicate the response that most appropriately describes your job. Provide examples where requested. Add any additional examples under "Other".

Example: if the job requires you to follow specific instructions/procedures most of the time, check the box under "Most of the time" and give examples. If the job requires you to modify established methods often, check "Often".

(a)	In this job, do you (check all responses that apply)	Almost never	Sometimes	Often	Most of the time	
	Follow specific instructions/procedures, use well-defined methods or use established guidelines to achieve desired end results. Example:				X	
	Modify or change established department methods and procedures, but stay within program or legislative boundaries. Example:	X				
	Develop new solutions to diverse and complex problems with conflicting requirements because there are no guidelines. Example:	X				

When there is a situation you have not come across before, do you (check all responses that apply)	Almost never	Sometimes	Often	Most of the time
Immediately ask the supervisor/leader what to do			X	
Ask co-workers for help in deciding what to do			X	
Read manuals and figure out what to do		X		
Decide with your supervisor what to do			X	
Check guidelines and past practices				X
Decide what to do based on your related experience				X
Get advice with problems from management and/or other sources (e.g., supplier, consultants)		X		
Other (specify)				

(c)	To what extent are the dec and provide examples)	ision-making requi	rements of this job gu	nided by others (check all responses that apply	Almost never	Sometimes	Often	Most of the time
	Immediate supervisor						X	
	Example:						A.	
	Others in own program/depa	artment					X	
	Example:						Λ	
	Others within the SHA / Aff							
	Example:					X		
	Departmental Management					W.		
	Example:					X		
	Specialists / Clinical Experts	3			T Z			
	Example:	X						
	Senior Management				X			
	Example:				Λ			
	Other					X		
	Example: 3sHealth, WCB					Λ		
		******	******	*********				
		R'S COMMENTS – DECISION-MAKING COMMENTS (<u>must</u> be complete			omplete" (or "No" is s	elected):	:
	sponses to the question: ree with the responses:	☐ Complete ☐ Yes	☐ Incomplete☐ No					
you ag	ree with the responses:	□ 1es	□ 110					
						rvisor's Ini		

	Purp	oose: This s	ection gathers inform	ation on the minimu	um level of completed formal education required for the job.
_			f completed schooling t is the typical minim		ould be necessary for a new person being hired into this job? This does not reflect the education the job.
•		total minimum lever to graduation or co		ng or formal training	should include all classroom, laboratory, practicum, clinical, or apprenticeship, etc., time require
	(i)	High School:	Grade 10	Grade 11	Grade 12 ⊠
	(ii)	Technical/Vocat	onal/Community Colle	ge: 1 year 🖂	2 years 3 years
		Specify (Do not	use abbreviations): <i>Off</i>	ice Administration o	certificate
	(iii)		1 year 2 use abbreviations):	years 3 year	_ , _ , _
	(iv)	University: Specify (Do not	, <u> </u>	_	ters
	Is an	y Provincial, Natio	nal or professional cert	fication mandatory?	☐ Yes
		•	nal or professional cert	•	☐ Yes ☐ No cation / registration body (do not use abbreviations):
		•	•	•	
	If ye	es, please specify ar	d provide the name of	he licensing / certifica	
	Wha Spec	es, please specify ar	skills, training, or licer reviations): uter skills	he licensing / certifica	cation / registration body (do not use abbreviations):
the	What Spector of the s	es, please specify are additional special cify (Do not use ablaintermediate comp Communication skill Analytical skills OR'S COMMENT onses to the questi	skills, training, or licer reviations): uter skills ills ******* S – EDUCATION AN on: Compl	he licensing / certificates are needed to perform the session are needed t	cation / registration body (do not use abbreviations): rform the job? Indicate the length of the course/program: ***********************************
the	What Spector of the s	at additional special sify (Do not use ablantermediate comp Communication skill Analytical skills OR'S COMMENT	skills, training, or licer reviations): uter skills ills ******* S – EDUCATION AN on: Compl	he licensing / certificates are needed to perform the session of t	cation / registration body (do not use abbreviations): rform the job? Indicate the length of the course/program: ***********************************

ection	18 – EXPERIENCE								
		his section gathers informa elated experience and/or or			d for a job. Relevant experience may include previous job-				
	te the minimum relev to carry out the requi		rior to and/or (b) on-the-jo	b, that is required for a ne	w person with the education recorded in Section 7 to acquire the skil				
>	For part (b), ask yo		quired to learn new tasks a	nd responsibilities or to a	djust to the job? If so, how much?" 7, Education and Specific Training.				
a)	Required previous	related job experience (do no	ot include practicum or a	pprenticeship if covered	in Section 7 – Education and Specific Training)				
	None None	6 months	1 year	3 years	5 years				
	Up to 3 months	9 months	2 years	4 years	Other (specify)				
	Describe the experi	ence requirements gained or	previous jobs here or else	where needed to prepare f	for this job:				
	♦ No previous ex	sperience.							
)	Average time requi	Average time required on the job to learn and/or adjust to this job:							
	1 month or fewer	er 6 months	1 year	3 years					
	3 months	2 months	2 years	Other (specify)					
	Describe the tasks a	and responsibilities that need	to be learned in order to sa	atisfy the requirements of	this job:				
		hs on the job experience to glepartment policies and prod		ing of payroll system, coll	lective bargaining agreements, government regulation and become				
UPEK	RVISOR'S COMME	****** ENTS – EXPERIENCE	*******	******	**********				
	e responses to the qu		te Incomplete	COMMENTS (mu	<u>ust</u> be completed if "Incomplete" or "No" is selected):				
	agree with the resp	_	□ No						
					Supervisor's Initials:				

ectio	n 9 – INDEPEN	IDENT JUDGEN	MENT		
	Purpose:	This section g	gathers information	on the extent to which	h the job exercises independent action.
		ndependent action e no precedents to		rees. Some jobs are hig	ghly structured and have many formal procedures, while others require exercising judgement of
			provided to this job. thers and direct supe		om rules, instructions, established procedures, defined methods, manuals, policies, profession
a)	To what extendirecting action		ntrol its own work as	s opposed to being guid	ed by influences such as rules, procedures, policies, supervisory presence or instructions
	Please check	the answer that	most closely repres	ents expected job requ	irements.
	Most job r	requirements (to th	ne extent possible) an	re set out within structur	re and rules and/or readily understood schedules to guide job tasks/duties required.
	Some restr	rictions apply, but	the control over set	ting work priorities and	pace of work is contained within the job.
	☐ There are	minimal restrictio	ns, leaving significa	nt control over the work	s being carried out within the scope of the job.
	Other (ple	ase explain):			
(b)	Please check	the answer that	most closely repres	determine how the work ents expected job requ little need for judgemen	
	☐ Work may	y present some un	usual circumstances	that require judgement	or choices to be made. Example:
	☐ Work pre	sents difficult cho	ices or unique situat	ions that require judgen	nent. Example:
Are tl	CRVISOR'S CO	the question:	***** DEPENDENT JUDO Complete Yes		**************************************
					Supervisor's Initials:

Section 10 – WORKING RELATIONSHIPS

Purpose: This section gathers information on the typical contacts or working relationships <u>necessary</u> in doing the job.

What are the typical contacts or working relationships **necessary** in doing this job? For each contact listed, determine the purpose of the contact and **check off all that apply** in the chart below. **Do not include contact with employees you supervise.**

Purpose of Contact:

- A No exchange
- **B** Exchange of factual or work-related information
- C Explanation and interpretation of information or ideas
- **D** Discussion of problems with a view to obtaining consent, cooperation and/or coordination of activities
- **E** Counseling
- **F** Secure cooperation of others for the development of services, programs, policies or agreements on behalf of the Program / Department
- **G** Negotiation of service and / or supply agreements

		PURPOSE OF CONTACT Check off all that apply (more than one, if applicable)						
	A	В	C	D	E	F	G	
Employees in the same department		X	X	X				
Employees in another department/site (specify)		X	X	X				
Students	X							
Supervisor / supervisors of programs / departments or services		X	X	X				
Clients / patients / residents		X	X	X				
Family of clients / patients / residents		X						
Physicians	X							
Business representatives	X							
Suppliers / contractors	X							
Volunteers	X							
General Public	X							
Other health care organizations or agencies		X						
Professional organizations / agencies		X						
Government departments		X	X	X				
Social Service establishments		X	X	X				
Community Agencies	X							
Police and Ambulance	X							
Foundations	X							
Others (specify)								

Section 10 – WORKING RELATIONSHIPS (cont'd)

Questions (b) to (k) that follow provide a series of situations that may be encountered in your job. Please provide the response that fits best for each situation. Provide examples or specify where requested.

ном	V OFTEN DOES YOUR JOB REQUIRE YOU TO:	Almost never	Sometimes	Often	Most of the time
(b)	Have to tell people things they <u>DO NOT</u> want to hear?				
	Other employees		X		
	 Client / patients / residents / families (e.g., Home Care) 		X		
	The general public	X			
	Other (specify)				
(c)	Have contact with very upset or very angry:				
	 Clients / patients / residents / families (not other workers) 		X		
	Outside groups (not other workers)	X			
	General public	X			
	Other employees		X		
	■ Management	X			
	Physicians	X			
	Other (specify)				
(d)	Have contact with extreme / special needs clients / patients / residents?				
	Specify:	X			
(e)	Talk with clients / patients / residents to:				
	Get information from them		X		
	■ Inform them		X		
	 Counsel them 				
	 Devise mutual goals / objectives with them 	X			
	 Check on their progress 	X			
(f)	Talk with families to:				
	 Get information from them 		X		
	■ Inform them	X			
	 Counsel them 				
	 Devise mutual goals / objectives with them 	X			
	 Check on their progress 	X			
(g)	Talk with physicians to:				
	• Get information from them	X			
	■ Inform them	X			
	Devise mutual goals / objectives with them	X			

Section 10 – WORKING RELATIONSHIPS (cont'd)

HOV	V OFTEN DOES YOUR JOB REQUIRE YOU TO:		Almost never	Sometimes	Often	Most of
(h)	Talk with general public to:					
	Provide information		X			
	Respond to questions		X			
	 Make presentations 		X			
(i)	Talk with other employees to:					
	 Get information from them 				X	
	Inform them				X	
	 Counsel / persuade them 		X			
	Give them advice on work procedures			X		
	 Get advice from them on work procedures 			X		
	 Get cooperation from other parts of the organization on project 	cts and programs		X		
	Other (specify)					
(j)	Talk to vendors, contractors, consultants, government agencies an	d other external groups or organizations to:				
	 Get information from them 			X		
	 Confer with peer professionals 		X			
	■ Inform them			X		
	 Arrange for services 			X		
	 Devise mutual goals / objectives with them 		X			
	 Lead meetings 		X			
	 Check on their progress 		X			
	• Other (specify): (e.g., WCB/3sHealth)			X		
(k)	Other (specify):					
	************	**********				
	SOR'S COMMENTS – WORKING RELATIONSHIPS sponses to the question: Complete Incomplete	COMMENTS (must be completed if "Inc	omplete"	or "No" is s	elected):	:
a ag	ree with the responses:					
			Supe	rvisor's Init	ials:	

n 11 – IMPACT OF	ACTION		
	This section gathers information on the likelihesponsibility for actions, resources and services.	ood of impact of action occurring when carrying out the duties of the job. Conses, and the extent of the losses.	ider the
	your job duties and responsibilities, what is the as carelessness, willful neglect or extreme circu	likelihood of your actions having an impact or an outcome on the following? Such emstances.	ffects are typica
Injury or discomfor If yes, please provi		Is an impact likely? Yes	No ∑
If yes, please provi			⊠ No □
Delays in processing If yes, please provide	nta errors may result in embarrassment in emp ng or handling of information or in the delivery de an example(s): lata entry/remittances may delay payments.		⊠ No □
If yes, please provi	act on departmental / site / agency / SHA / Affil de an example(s): lata entry/remittances may delay payments.	ate operations	⊠ No □
Damage to equipm If yes, please provi	ent / instruments	Is an impact likely? Yes	□ No ⊠
Loss of or inaccura If yes, please provi		Is an impact likely? Yes	⊠ No □
	cluding withdrawal of commitment or withholdi		□ No ⊠
Other – If yes, please provi	de an example(s):	Is an impact likely? Yes	No 🗌
e responses to the q	ENTS – IMPACT OF ACTION uestion: Complete Incomple	********** COMMENTS (<u>must</u> be completed if "Incomplete" or "No" is selecte	ted):
agree with the resp	oonses:	Supervisor's Initials	:

Section 12 – LEADERSHIP/SUPERVISION

	hers information of ble them to carry		pervise others, lead others and / or provide functional guidance or technical
Leadership refers to the requirer carry out their job. Do not inclu			s, provide functional guidance or provide technical direction to enable other employees to
Specify any jobs or work group	as appropriate, und	er one or more of these cate	egories. Check all that apply and provide examples.
N			Examples
Familiarize new employees		•	Staff
Assign and/or check work of	G	•	
Lead a project team, prioritize achieve planned outcome(s)	ze tasks, assign wor	k, monitor progress to	
Provide functional advice / in	nstruction to others	in how to carry out work	
tasks Provide technical direction a carry out their primary job re		d in order for others to	Staff
Provide input to appraisal, hi	iring and/or replace	ment of personnel	
Coordinate replacement and	or scheduling of en	nployees	
Supervise a work group; assitake responsibility for all the		e, methods to be used, and	
☐ Supervise the work, practice	s and procedures of	a defined program	
☐ Supervise the work, practice	s and procedures of	a department	
Provide counseling and/or co	oaching to others		
Provide health promotion / o	outreach (teaching /	instruction)	
Other (specify)			
	*******	*******	****************
UPERVISOR'S COMMENTS – LEA	DERSHIP/SUPE	RVISION	
re the responses to the question:	☐ Complete	☐ Incomplete	COMMENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):
o you agree with the responses:	☐ Yes	□ No	
o you agree with the responses:	∐ 1es	☐ 1 10	
			Supervisor's Initials:

Section 13 – PHYSICAL DEMANDS

Purpose: This section gathers information on the physical effort and for the accurate hand/eye or hand/foot coordination required on a regular basis in your job.

- (a) What **physical effort** is required on a **typical** basis for your job? Please provide examples that are applicable to your job.
 - Duration means individual periods of **uninterrupted time** (except for scheduled breaks) i.e. how long you have to perform the activity each time.
 - Frequency means **how often** each activity occurs within the day.

Indicate the duration of time that the activity is present during the normal workday or shift (e.g., for an 8 hour shift – 6 hours = 75%; 4 hours = 50%; 2 hours = 25%; 1 hour = 12%; 1/2 hour = 6%). **Percentages may not add up to 100\% (due to simultaneous activities).**

Place a checkmark in the chart below indicating the duration, frequency and weight of the activity. Only indicate weight where applicable.

Light weight – up to 9 kg / 20 lbs

Occasional – means the activity occurs once in a while – less than 50% of the time

Medium weight – over 9 kg / 20 lbs

Regular – means the activity occurs often – between 50% - 75% of the time

Heavy weight – over 23kg / 50 lbs

Frequent – means the activity occurs every day – over 75% of the time

Exertions that are infrequent or that are not typical of the performance of the job should not be considered.

	DURATION	FREQUENCY			WEIGHT
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent	Light, Medium, Heavy (specify)
Computer operation	50 - 90%			X	L
Standing/crouching/lifting	10 – 20%		X		L - M
Walking/standing	10%		X		L

									PLEASE P
CAI	AL DEMAND	S (cont'd	i)						
ork	k require accu	rate han	d/eye or han	nd/foot coordination	? Please provide	examples that are applic	eable to your job.		
				sent during the norm		ft (e.g., for an 8 hour shif ous activities).	ft – 6 hours = 75%	6; 4 hours = 509	%; 2 hours = 25%
						g laundry; mechanical; p mops and shovels; stock			
ma	nark in the cha	rt below i	indicating the	e frequency of occur	ence over a year.				
	- means the	e activity	occurs often	in a while – less tha – between 50% - 75 day – over 75% of	% of the time				
						DURATION		FREQUENCY	Z .
ACTIVITY EXAMPLES		APLES		Approximate % of time/day	Occasional	Regular	Frequent		
pei	eration					50 – 90%			X
ng	g mail					5%		X	
	MMENTS – P	HYSICA				**************************************		te" or "No" ai	e selected):
e r	responses:] Yes	□ No					
								Sunervisor's In	
								S	Supervisor's In

Section 14 – SENSORY DEMANDS

Purpose: This section gathers information on the frequency and duration of sensory demands required by your job.

(a) What **Visual Effort** is required on a **concentrated** basis in your job? Please provide **examples** that are applicable to your job.

Indicate the duration of time that the activity is present during the normal workday or shift (e.g., for an 8 hour shift – 6 hours = 75%; 4 hours = 50%; 2 hours = 25%; 1 hour = 12%; 1/2 hour = 6%). **Percentages may not add up to 100% (due to simultaneous activities).**

Duration means individual periods of **uninterrupted time** (except for scheduled breaks) – i.e. how long you have to perform the activity each time.

Place a checkmark in the chart below indicating the frequency of occurrence over a year.

Frequency means **how often** each activity occurs within the day or week.

Occasional — means the activity occurs once in a while – less than 50% of the time

- means the activity occurs often – between 50% - 75% of the time

- means the activity occurs every day – over 75% of the time

	DURATION	FREQUENCY			
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent	
Computer operation	50 - 90%			X	
Creating reports	10%		X		
Filing/sorting mail	5%		X		
]			[]	

Section 14 – SENSORY DEMANDS (cont'd)

(b) Does your job require that you **Listen Attentively**? Please provide **examples** that are applicable to your job.

Indicate the duration of time that the activity is present during the normal workday or shift (e.g., for an 8 hour shift – 6 hours = 75%; 4 hours = 50%; 2 hours = 25%; 1 hour = 12%; 1/2 hour = 6%). **Percentages may not add up to 100% (due to simultaneous activities).**

Place a checkmark in the chart below indicating the frequency of occurrence over a year.

- **Examples**: taking dictation, counseling; negotiating; taking minutes of meetings; taking telephone messages; operating a switchboard; alarm systems; mechanical/equipment sounds; taking directions or instructions; observing clients/patients/residents.
- Duration means individual periods of **uninterrupted time** (except for scheduled breaks) i.e. how long you have to perform the activity each time.
- Frequency means **how often** each activity occurs within the day or week.

Occasional – means the activity occurs once in a while – less than 50% of the time

- means the activity occurs often – between 50% - 75% of the time

- means the activity occurs every day – over 75% of the time

	DURATION	FREQUENCY			
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent	
Communication	30 – 50%			X	

Section	14 – SENSORY DEMAND	S (cont'd)		
(c)	Must attention be shifted free	equently from one job de	etail to another?	
•	Examples: keyboarding and	d answering the telephor	ne; dictatyping; repairin	ng and listening to equipment
	Yes 🖂	Vo 🗌		
	If yes, please give example :	S:		
	♦ Data entry, clerical du	ties and staff inquiries.		
GLIDED	ANGODIG GOLD WINTE			***********************
	EVISOR'S COMMENTS – Stresponses to the question:	SENSORY DEMANDS	☐ Incomplete	COMMENTS (<u>must</u> be completed if "Incomplete" or "No" are selected):
	agree with the responses:	☐ Yes	☐ No	
				Supervisor's Initials:

Section 15 – WORKING CONDITIONS

Purpose: This section gathers information on the undesirable or disagreeable environmental conditions or hazards under which the job is carried

out.

(a) Are you exposed to some degree of **unpleasantness** in the day-to-day activities of your job? **Check all conditions that apply to you, and indicate only one of "occasional", "regular", or "frequent".**

Occasional – means the condition occurs once in a while – less than 50% of the time

Regular – means the condition occurs often – between 50% - 75% of the time

Frequent – means the condition occurs every day – over 75% of the time

CONDITION (specify if applicable)	Occasional	Regular	Frequent
Blood / body fluids			
Chemical substances (specify) toner	X		
Cold			
Congested workplace			
Dust			
Extreme temperature			
Foul language	X		
Grease			
Head lice			
Heat			
Inadequate lighting			
Inadequate ventilation			
Insects, rodents, etc.			
Interruptions			X
Isolation			
Latex			
Moisture			
Mold			
Multiple deadlines			X
Noise			
Odor			
Oil			
Radiation exposure (specify)			
Second-hand smoke			
Soiled linens			
Steam			
Transporting or handling human remains			
Travel			
Vibration			
Other (specify)			

Section 15 – WORKING CONDITIONS (cont'd)

(b) Is there some degree of exposure to hazards in the day-to-day activities of your job? Check all hazards that apply to you, and indicate only one of "occasional", "regular", or "frequent".

Occasional – means the condition occurs once in a while – less than 50% of the time

Regular – means the condition occurs often – between 50% - 75% of the time

Frequent – means the condition occurs every day – over 75% of the time

CONDITION (specify if applicable)	Occasional	Regular	Frequent
Abusive clients			
Blood / body fluids			
Chemical substances (specify) toner	X		
Traveling in inclement weather			
Excessive / unpredictable weights			
Exposure to infectious disease (specify)			
Extreme noise			
Faulty / inadequate equipment			
Personal injury			
Personal safety at risk due to isolation			
Radiation exposure (specify)			
Sharp objects			
Small aircraft			
Steam			
Verbal and/or physical abuse	X		
Violence			
Working from heights			
Other (specify)			

(c)	Do you have to take certain tra precaution(s) normally taken.)	ining, precautions or	wear protective clothin	g to avoid a work injury? (Check one and provide an explanation or example of the type of
	Yes No	П		
	Please explain your answer: • Personal Protective Equip	oment (PPE)		
	 ◆ Transfer, Lifting, Reposite ◆ Workplace Hazardous Mo 		System (WHMIS)	
		******	*******	*****
SUPE	RVISOR'S COMMENTS - WO	ORKING CONDITI	ONS	
	RVISOR'S COMMENTS – WO	ORKING CONDITI	IONS Incomplete	COMMENTS (<u>must</u> be completed if "Incomplete" or "No" are selected):
Are th				COMMENTS (<u>must</u> be completed if "Incomplete" or "No" are selected):

add any additional information or con	nments and reference the specific JFS section and question as appropriate.	
n 17 – SIGNATURES		
Single job submission:	NAME: (Please Print Legibly):	
a-a		
SIGNATURE:	DATE:	
Group submission (NAMES OF E	MPLOYEES DOING THE SAME JOB). Please print your name, then sign:	
•		
NAME:	SIGNATURE:	
NAME:	SIGNATURE: SIGNATURE:	
NAME:NAME:	SIGNATURE: SIGNATURE: SIGNATURE:	
NAME:NAME:NAME:	SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE:	
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Section 18 – OUT-OF-SCOPE SUPERVISOR'S COMMENTS						
Please add any additional information or comments and reference the specific JFS section and question as appropriate.						
Immediate Out-of-Scope Supervisor						
Infinediate Out-of-Scope Supervisor						
Name: (Please print legibly)		_				
C'anadana						
Signature:		_				
Job Title:		_				
Department:		_				
Work Phone Number:						
Work I hole I tuliber.		_				
E-Mail Address:		_				
_						
Date:		_				

Appendix A Sample Key Activity Summary Statements

A

- Accounting
- Accounting operation
- Activities and events
- Administration and communication
- Administration duties
- Administrative activities
- Administrative functions
- Administrative procedures
- Administrative support to executive levels
- Admission, discharges and transfers
- Analysis and detection of epidemics
- Assessment and diagnosis
- Assists with training programs

B

- Budget activities
- Budget administration
- Budget and financial management
- Budget and professional development
- Budget and unit administration
- Budget management
- Budget preparation and control
- Budget unit administration

\mathbf{C}

- Carpentry functions
- Cleaning designated areas

- Cleaning functions
- Clerical duties
- Clinical and patient pastoral services
- Clinical nursing practice
- Clinical pharmacy
- Clinical practice
- Clinical services
- Coding and abstracting
- Collaboration and Education
- Committee and coordination activities
- Committee and professional development
- Committee involvement
- Committee participation
- Committee representation
- Committees and communication
- Committees and community liaison
- Committees and meetings
- Communication and coordination
- Communications and public relations
- Community involvement
- Community resources and liaison
- Compiling reports and statistics
- Consultation
- Consultation and collaboration
- Consultation and program development
- Consultation with team
- Contact with medical staff
- Contact with vendor representatives
- Continuing education

- Control and allocation of beds
- Control of expenditures and government regulations
- Coordination and communication
- Coordination of health services functions
- Coordination of internal and external health care professionals
- Counseling
- Counseling and patient education
- Counseling, treatment and referrals

D

- Daily accounts receivable functions
- Department and administrative activities
- Department management
- Development of departments
- Development of nursing education programs
- Development of quality assurance programs
- Diagnosis
- Discharge planning
- Dispensing drugs and monitoring patient profiles
- Drug distribution
- Drug selection and information services

\mathbf{E}

Education

JE: Revised Dec 19/06

- Education (non patient)
- Education and research
- Education consultant
- Education program implementation
- Educational and professional development
- Emergency procedures
- Enforces security, fire and safety regulations
- Equipment testing
- Evaluates radiographs for quality
- Evaluation

F

- Financial and department planning
- Financial management
- Financial systems and controls
- First aid
- Food distribution
- Food preparation
- Food service and nutritional services

G

General office duties

H

- Health records and quality assurance
- Hospital management
- Housekeeping activities
- Human resource and budget management
- Human resource functions
- Human resources management

- Installations
- Investigations

L

- Laboratory Aide functions
- Laboratory technical functions
- Labour relations functions
- Laundry operations
- Lawn and garden maintenance
- Life safety programs and services

\mathbf{M}

- Mail and filing
- Maintains directory and files
- Maintains inventory control
- Maintenance and administration
- Maintenance and cleanliness
- Maintenance and committee work
- Maintenance and trouble shooting
- Maintenance of equipment
- Maintenance of records
- Maintenance of telephone and records
- Management of department
- Management of Health Records Department
- Management of laboratory
- Management of systems contractors and suppliers
- Management of the library
- Management of volunteers
- Materials management programs
- Media relations
- Medical management

- Menu board maintenance
- Mobilization and transporting of patients
- Monitors entry and exit of visitors/patients in and out of hospital

N

- Narcotic and controlled drugs
- Narcotic control drug audit
- Nursing care process
- Nutritional and dietary assessment

\mathbf{O}

- Occupational therapy program
- Ongoing health program administration
- Operates cash register
- Ordering supplies
- Ordering supplies and inventory
- Orientation
- Orientation of new staff
- Other secretarial functions

P

- Painting functions
- Participation in committees
- Patient care
- Performs electrical circuit installations and completes electrical change requests
- Performs laboratory test procedures
- Performs preventative maintenance
- Performs radiographic examinations
- Pharmacy budget and committees
- Pharmacy functions
- Physiotherapy program
- Planning and organizing

JE: Revised Dec 19/06

- Planning and organizing carpentry activities
- Planning and organizing of daily painting activities
- Planning and organizing plumbing activities
- Planning and unit administration
- Plant maintenance
- Plant operations
- Play therapy
- Plumbing functions
- Policy and procedure development
- Preparation of annual budgets
- Prepares and writes programs
- Processing of doctors orders
- Production reports and records
- Professional development
- Professional growth
- Professional standards
- Program development
- Protection of hospital building and premises
- Provides assistance to departments on request
- Provides information and Library Services
- Provides physical care to patients
- Psycho-social assessment and counseling
- Public inquires
- Public relations
- Pulmonary function testing
- Purchasing activities

Q

- Quality assurance and audit
- Quality assurance and maintenance of equipment
- Quality assurance/control
- Quality control and preventative maintenance

R

- Receipt and delivered items
- Reception and telephone
- Receptionist functions
- Recording and monitoring results
- Releasing information
- Repairs and maintenance to equipment
- Report production
- Reporting and communication
- Reporting and documentation
- Reporting the test results
- Reports and records information required by nursing staff
- Research
- Research and education
- Research into hospital activities
- Respiratory care
- Responds to incoming/outgoing telephone calls and inquires
- Reviewing test results

S

- Scheduling and coordination activities
- Scheduling and processing

- Scoring and interpretation
- Secretarial functions
- Selects, acquires and organizes library materials
- Social work functions
- Sterile product preparation
- Strategic planning
- Supervises activities
- Supervises technicians
- Supervision
- Surveillance of nursing units
- Systems development process
- Systems planning and maintenance

\mathbf{T}

- Teaching and education
- Telephone and reception
- Test administration
- Testing procedure
- Therapeutic counseling and treatment
- Training
- Transcription of medical reports

U

- Unit administration
- Unit management
- Unit nursing specialized activities
- Unit/technical management

W

• Word processing and typing function

JE: Revised Dec 19/06