

Provider Group – Joint Job Evaluation Job Fact Sheet <u>Job #162 – Payroll & Benefits Officer</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 (<u>must</u> be completed if "Incomplete" or "No" is selected):
Your current Provincial JE Job Title	
Your current Provincial JE Job Number:	Supervisor's Initials:
Provincial JE Job Titles that report directly to you (if applicable)	

Section 3 – JOB IDENTI	FICATION				
Purpose:	This section gath	ers basic identifyi	ng material so we can keep t	rack of com	npleted Job Fact Sheets.
rovide your name and wo	rk telephone num	ber(s) for contact p	urposes. For group JFS submi	ssions, pleas	ase note the name and telephone number(s) of the contact person.
ame of person completin RE DOING THE SAME		gle employee, or co	ontact person for group JFS su	bmission (Ol	ONLY COMPLETE A GROUP SUBMISSION IF ALL EMPLOYEE
ame (Print):					Employee No.:
ork Telephone:			E-Mail Address:		
askatchewan Health Auth	ority/Affiliate: _				
acility/Site:				Departr	rtment:
ee Section 18 on page 28	for signatures.				
rovincial JE Job Title:					Date:
Provincial JE Number:			Office use of	nly:	JEMC No. <u>M</u>
ection 4 – JOB SUMMA	ARY				
Purpose:	This section desc	ribes why the job	exists.		
riefly describe the genera	l purpose of this j	ob: <i>Responsible fo</i>	or payroll and benefit services	in accordan	nnce with departmental and provincial requirements.
	ould say if someor	ne approached you	oonsible for?" and asked you about your job. "The (<u>Job Title</u>) is responsible	y for"	
UPERVISOR'S COMM	IENTS – JOB SU		*******	******	**************
are the responses to this		☐ Complete	☐ Incomplete	COMM	MENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):
ire the responses to this	-	Yes	_ •	-	
o you agree with the res	sponses:	⊥ res	□ No		

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: Payroll Processing

Duties/Responsibilities:

- ♦ Performs data entry on computerized payroll system (e.g., scheduling data).
- ♦ Enters, verifies, analyzes, audits and maintains employee information (e.g., staff change/hire forms).
- ◆ Calculates retroactive payments, pay adjustments/advances, supplemental employment benefits (SEB), overpayments and wage increases.
- ♦ Processes provisional payments due to errors and follow up (e.g., manual cheques, electronic funds transfer requests, recalculation of benefits).
- ♦ Processes legal requests for garnishment of wages.
- ♦ Monitors statutory holidays, earned time off, vacation, sick days and family days for correct pay-out and accrual.
- ♦ Verifies and processes employee work records and daily flow sheets.
- ♦ Checks and corrects errors from payroll run.
- ♦ Processes and distributes Record of Employment forms.
- Verifies and applies collective bargaining agreement provisions regarding payroll/benefits.
- ♦ Investigates, analyzes and prioritizes reported problems using computer systems.
- Researches and implements payroll solutions.
- Retrieves, analyzes and presents payroll data to managers for the purposes of education, research, quality improvement, program planning and statistical reporting.
- ♦ Creates and maintains position numbers and makes adjustments to full time equivalent (FTE) status.

SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES						
Are the responses to this question: Complete Incom	ıplete					
Do you agree with the responses:						
COMMENTS (must be completed if "Incomplete" or "No" is sele	ected):					
Supervisor's Initials:						

Section 5 – KEY WORK ACTIVITIES (cont'd)	
Key Work Activity B: Payroll Remittances and Accounting	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES
 Duties/Responsibilities: Forwards appropriate deductions from employees' pay to appropriate organization (e.g., unions dues, Revenue Canada, insurance). Balances payroll-related general ledger accounts. Provides payroll, benefits and budget information to various departments. Prepares yearly T-4 slips, reconciles and distributes. Prepares monthly and year-end reports. Provides payroll evidence/documentation for legal proceedings (e.g., arbitrations). Employment insurance reconciliations for Service Canada. Verification of employment as requested. Calculations of hours worked for various licensing bodies (e.g., College of Licensed Practical Nurses of Saskatchewan). Union invoicing. 	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 C: <u>Benefits</u> Duties/Responsibilities: Creates, maintains and organizes Employee Benefit data. Administers and coordinates Workers' Compensation Board (WCB)/disability income plan (DIP) claims and payroll/seniority adjustments. Informs employees of changes/new benefit information. Answers inquiries about employer policies and/or collective agreement provision applications. Resolves inquiries on health/dental plans, pension, DIP, group life and Out-of-Scope Flex Spending Account. Advises management on procedures for processing claims. Liaises with 3sHealth, Saskatchewan Health Employee Pension Plan, insurers (e.g., WCB, SGI), Human Resource consultants. Processes changes in benefit plans (e.g., enroll/terminate/amend). Assists employees with pension and benefit information upon retirement.	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:

Section 5 – KEY WORK ACTIVITIES (cont'd)						
Key Work Activity D: Related Key Work Activities	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES					
Duties/Responsibilities: ♦ Researches and responds to payroll/benefits inquiries. ♦ Prepares journal transactions for payroll/benefits adjustments. ♦ Prepares a variety of reports (e.g., attendance and portability of benefits statements). ♦ Ensures seniority list is accurate and updated regularly. ♦ Performs accounts receivable/accounts payable duties. ♦ Performs month-end duties and reports. ♦ May perform job posting duties. ♦ Provides occasional guidance to the primary function of others, including training. ♦ Corrects errors in the payroll system after weekly upload from scheduling program. ♦ Reviews/corrects uploaded information to ensure validity/accuracy.	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 E:	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES					
Duties/Responsibilities:	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:					

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)	ble:	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: Revise seniority list, multi-site enrollments for benefits.		X		
	Develop new solutions to diverse and complex problems with conflicting requirements because there are no guidelines. Example: Work-arounds between payroll/scheduling and computerized human resource information system.		X		

) V	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
Ir	mmediately ask the supervisor/leader what to do		X		
A	ask co-workers for help in deciding what to do		X		
R	tead manuals and figure out what to do			X	
D	Decide with your supervisor what to do		X		
C	Check guidelines and past practices				X
D	Decide what to do based on your related experience			X	
G	Get advice with problems from management and/or other sources (e.g. supplier, consultants)		X		
O	Other (specify): Research files to determine eligibility			X	

Immediate supervisor Example: Others in own program/department Example: Others within the SHA / Affiliate Example: Departmental Management Example: Specialists / Clinical Experts Example: Senior Management Example: Cother Example: Senior Management Example: Senior Management Example: Cother Example: Cother Example: Other	(c)	To what extent are the decision-making requirements of this job guided and provide examples)	d by others (check all responses that apply	Almost never	Sometimes	Often	Most of the time
Example: Others in own program/department Example: Others within the SHA / Affiliate Example: Departmental Management Example: Specialists / Clinical Experts Example: Senior Management Example: Other Example: Senior Management Example: Other Example: Other Example: Other Example: 3sHealth, WCB		Immediate supervisor				Y	
Example:		Example:				Α	
Example: Others within the SHA / Affiliate Example: Departmental Management Example: Specialists / Clinical Experts Example: Senior Management Example: Other Example: Other Example: 3sHealth, WCB		Others in own program/department			v		
Others within the SHA / Affiliate Example: Departmental Management Example: Specialists / Clinical Experts Example: Senior Management Example: Other Example: Other Example: Standard Affiliate X X X X Senior Management Example: Other Example: Other Example: 3sHealth, WCB		Example:			Α		
Example:							
Departmental Management Example:		Example:			X		
Example: Specialists / Clinical Experts Example: Senior Management Example: Other Example: 3sHealth, WCB **********************************	Departmental Management Example: Specialists / Clinical Experts Example:						
Example:		Example:		A			
Example:		Specialists / Clinical Experts					
Senior Management Example:		Example:			X		
Example:				T 7			
Example: 3sHealth, WCB ***********************************		Example:		X			
Example: 3sHealth, WCB ***********************************		Other			v		
VISOR'S COMMENTS – DECISION-MAKING		Example: 3sHealth, WCB			A		
responses to the question: Complete Incomplete		Example: 3sHealth, WCB ***********************************		omplete" (el	ected):
	ou ag	gree with the responses:					
agree with the responses:							
				_ Supe	rvisor's Init	ials:	

Purp	oose: This section g	gathers information	on the minimum	n level of completed formal education required for the job.
	at minimum level of compl you have, but what is the			d be necessary for a new person being hired into this job? This does not reflect the education e job.
	total minimum level of control of control of control of certification or certification of		r formal training sl	hould include all classroom, laboratory, practicum, clinical, or apprenticeship, etc., time require
(i)	High School:	Grade 10	Grade 11	Grade 12 ⊠
(ii)	Technical/Vocational/Co	mmunity College:	1 year 🗌	2 years 3 years
	Specify (Do not use abbr			loma oll Association Payroll Compliance Practitioner course
(iii)	Licensed Trades: 1 years	•	•	4 years 5 years 5
(iv)	University: 3 years Specify (Do not use abbr	ars 4 years eviations):		_
Is an	ny Provincial, National or p	rofessional certificat	ion mandatory?	Yes No
If ye	es, please specify and provide	le the name of the li	censing / certificat	ion / registration body (do not use abbreviations):
Spec	at additional special skills, the cify (Do not use abbreviation intermediate computer skills organizational skills Leadership skills Communication skills interpersonal skills intermediate accounting skills Analytical skills Problem solving skills	ns): lls kills		orm the job? Indicate the length of the course/program:
FDVICO	OR'S COMMENTS – EDI			**************************************
				COMMENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):
_	onses to the question: e with the responses:	☐ Complete	☐ Incomplete	
you agree	e with the responses:	□ 1 es	☐ 1 N 0	
				Supervisor's Initials:

Section	18 – EXPERIENC	E			
		This section gathers inform related experience and/or o			ed for a job. Relevant experience may include previous job-
		evant experience gained: (a) uirements of this job.	orior to and/or (b) on-the-jo	b, that is required for a ne	ew person with the education recorded in Section 7 to acquire the skill
>	For part (b), ask y		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	s related job experience (do n	ot include practicum or a	pprenticeship if covered	in Section 7 – Education and Specific Training)
	☐ None	6 months	⊠ 1 year	3 years	5 years
	Up to 3 month	s 9 months	2 years	4 years	Other (specify)
	Describe the expe	erience requirements gained o	n previous jobs here or else	where needed to prepare f	for this job:
	♦ Twelve (12)	nonths previous experience p	performing payroll and acc	ounting functions related	l to collective agreements.
b)	Average time requ	uired on the job to learn and/o	r adjust to this job:		
	1 month or fev	wer 6 months	∑ 1 year	3 years	
	3 months	9 months	2 years	Other (specify)	
	Describe the tasks	s and responsibilities that need	l to be learned in order to sa	atisfy the requirements of	this job:
					actices with regards to federal and provincial legislation, and/or lepartment policies and procedures.
XI IPFI	RVISOR'S COMM	****** IENTS – EXPERIENCE	*******	********	**********
	e responses to the	_	ete 🔲 Incomplete	COMMENTS (mu	<u>ust</u> be completed if "Incomplete" or "No" is selected):
	agree with the res		□ No		
					Supervisor's Initials:

ccii	Purpose:	This section gathers information on the extent to which the job exercises independent action.							
		independent action, but to varying degrees. Some jobs are highly structured and have many formal procedures, while others require exercising judgement of the no precedents to serve as a guide.							
		level of guidance provided to this job. Guidance can come from rules, instructions, established procedures, defined methods, manuals, policies, profession leadership from others and direct supervision.							
a)	To what exter directing action	nt does this job control its own work as opposed to being guided by influences such as rules, procedures, policies, supervisory presence or instructions ons required?							
	Please check	the answer that most closely represents expected job requirements.							
	Most job r	requirements (to the extent possible) are set out within structure and rules and/or readily understood schedules to guide job tasks/duties required.							
	Some rest	rictions apply, but the control over setting work priorities and pace of work is contained within the job.							
	There are	minimal restrictions, leaving significant control over the work being carried out within the scope of the job.							
	Other (ple	Other (please explain):							
(b)	To what exter	nt does this job exercise judgement to determine how the work is to be done?							
	Please check	the answer that most closely represents expected job requirements.							
	☐ Work is n	mostly repetitive and predictable with little need for judgement. Example:							
	── Work ma	y present some unusual circumstances that require judgement or choices to be made. Example:							
	♦ Multi-fac	cility positions, managing co-employed benefit bank and increments.							
	☐ Work pre	Work presents difficult choices or unique situations that require judgement. Example:							
SUPE	CRVISOR'S CO	**************************************							
		COMMENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):							
	he responses to t								
Do yo	u agree with the	e responses:							
		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

		Che	eck of	C OF (If all to one, i	hat aj	pply	
	A	В	C	D	E	F	G
Employees in the same department		X	X	X			
Employees in another department/site/agency (specify)		X	X	X			
Students	X						
Managers/supervisors of programs/departments or services		X	X	X			
Clients/patients/residents	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 (e.g., 3sHealth, SHEPP)		X	X	X		X	
Professional organizations/agencies		X	X	X			
Government departments		X	X	X			
Social Service establishments		X					
Community Agencies	X						
Police and Ambulance		X					
Foundations		X	X	X			
Others (specify) <i>Unions</i>		X	X	X			

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.

HOV	V OFTEN DOES YOUR JOB REQUIRE YOU TO:	Almost never	Sometimes	Often	Most of the time
(b)	Have to tell people things they DO NOT want to hear?				
	■ Other employees		X		
	 Client / patients / residents / families 	X			
	The general public	X			
	 Other (specify) department managers 		X		
(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 	\boldsymbol{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 	\boldsymbol{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 the time
(h)	Talk with general public to: Provide information	X			
	Respond to questionsMake presentations	X 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 projects and programs 		X		
	Other (specify)				
(j) (k)	Talk to vendors, contractors, consultants, government agencies and other external groups or organizations to: Get information from them Confer with peer professionals Inform them Arrange for services Devise mutual goals / objectives with them Lead meetings Check on their progress Other (specify): (e.g., Workers' Compensation Board/Employment Insurance/3sHealth/SHEPP) Other (specify):	X X	X X X X X		
ie re	**************************************		or "No" is se	elected):	:
		G	rvisor's Init		

	ection gathers informationsibility for actions, resou			carrying out the duties of the job. Consider the	!
	job duties and responsibili relessness, willful neglect			act or an outcome on the following? Such effects an	e typica
Injury or discomfort of of If yes, please provide ar				Is an impact likely? Yes	No 🗵
If yes, please provide ar		•	oloyee relations le deterioration in employee rel	Is an impact likely? Yes	No 🗆
Delays in processing or If yes, please provide an	handling of information or	in the delivery of service	S	Is an impact likely? Yes 🖂	No [
Actions which impact o If yes, please provide ar	n departmental / site / agen	cy / SHA / Affiliate opera	itions	Is an impact likely? Yes 🖂	No 🗆
Damage to equipment / If yes, please provide ar	instruments			Is an impact likely? Yes	No 🗵
Loss of or inaccurate in: If yes, please provide ar		amous to various geams	la and van outs	Is an impact likely? Yes 🖂	No [
• •	ng withdrawal of commitme		•	Is an impact likely? Yes □	No 🖂
Other – If yes, please provide ar	example(s):			Is an impact likely? Yes	No [
			*********	*****	
e responses to the question	S – IMPACT OF ACTION on: Complete	N ☐ Incomplete	COMMENTS (must be co	ompleted if "Incomplete" or "No" is selected):	
agree with the response	s:	□ No			
				Supervisor's Initials:	

Section 12 – LEADERSHIP/SUPERVISION

Leadership refers to the require carry out their job. Do not incl			provide functional guidance or prov	ide technical direction to enable other employees t
Specify any jobs or work group	as appropriate, und	er one or more of these cat	ories. Check all that apply and pr	ovide examples.
N				Examples
Familiarize new employees		-	Staff	
Assign and/or check work o		•	Staff	
Lead a project team, prioriti achieve planned outcome(s		k, monitor progress to		
Provide functional advice / tasks	instruction to others	in how to carry out work	Staff	
Provide technical direction carry out their primary job		d in order for others to	Staff	
Provide input to appraisal, l	niring and/or replace	ment of personnel		
Coordinate replacement and	d/or scheduling of er	nployees		
Supervise a work group; ass take responsibility for all th		e, methods to be used, and		
☐ Supervise the work, practice	es and procedures of	a defined program		
☐ Supervise the work, practice	es and procedures of	a department		
☐ Provide counseling and/or o	coaching to others			
Provide health promotion /	outreach (teaching /	instruction)		
Other (specify)				
	******	*******	**********	****
ERVISOR'S COMMENTS – LE	ADERSHIP/SUPE	RVISION		
the responses to the question:	☐ Complete	☐ Incomplete	COMMENTS (<u>must</u> be completed	d if "Incomplete" or "No" is selected):
ou agree with the responses:	☐ Yes	□No		

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

Section 13 – PHYSICAL	DEMANDS (cont'd)						PLEASE P			
		and/foot coordination? P	Please provide (examples that are applic	able to your job.					
Indicate the durati	Does your work require accurate hand/eye or hand/foot coordination ? 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 hour = 12%; 1/2 hour = 6%). Percentages may not add up to 100% (due to simultaneous activities).									
	Examples : keyboard skills, repairing fine instruments/equipment; floor polishers; folding laundry; mechanical; plumbing; giving injections; dispensing oral medi lawn mowers; sorting mail; electrical; driving; drafting; using long-handled tools such as mops and shovels; stocking shelves; positioning patients and equipment; carpentry.									
Place a checkmark	Place a checkmark in the chart below indicating the frequency of occurrence over a year.									
Regular	 means the activity occurs on means the activity occurs of means the activity occurs ev 	en – between 50% - 75% o	of the time							
			DURATION		FREQUENCY	Y				
	ACTIVITY EXAMPLES				Occasional	Regular	Frequent			
Computer opera	tion			<i>50 - 90%</i>			X			
Filing, scanning	, faxing, photocopying			5 – 10%		X				
Sorting mail				5%		X				
<u> </u>										
UPERVISOR'S COMM	******* ENTS – PHYSICAL DEMA	**************************************	******	*********	*****					
			COMMI	ENTS (<u>must</u> be comple	ted if "Incomple	te" or "No" a	re selected):			
re the responses to the question: O you agree with the responses: Yes No										
o you agree with the res	ponses.									
					S	lupervisor's Ir	ntials:			

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/reading/completing forms	10 – 20%		X		
Filing, scanning, faxing, photocopying	5 – 10%		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

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

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

	DURATION	FREQUENCY			
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent	
Communication	20 – 40 %			X	

ection	14 – SENSORY DEMAND	S (cont'd)		
c)	Must attention be shifted fre	equently from one job d	etail to another?	
•	Examples: keyboarding and	d answering the telepho	ne; dictatyping; repairin	ng and listening to equipment
	Yes 🖂	No 🗌		
	If yes, please give example	s:		
	♦ Computer operation, to	elephone, and preparat	on of payroll reports.	
		*******	*******	*******
	VISOR'S COMMENTS – S			COMMENTS (must be completed if "Incomplete" or "No" are selected):
	responses to the question:	☐ Complete ☐ Yes	☐ Incomplete	
o you	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 timeRegular- means the condition occurs often - between 50% - 75% of the timeFrequent- means the condition occurs every day - over 75% of the time

CONDITION (specify if applicable)	Occasional	Regular	Frequent
Blood / body fluids			
Chemical substances (specify) <i>Toner</i>	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) <i>Toner</i>	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)			

Sectio	on 15 – WORKING CONDITIO	ONS (cont'd)		
(c)	Do you have to take certain tr precaution(s) normally taken.		wear protective clothin	g to avoid a work injury? (Check one and provide an explanation or example of the type of
	Yes 🖂 No			
	Please explain your answer:			
	 Personal Protective Equal Transfer, Lifting, Reposition Workplace Hazardous Management 	tioning (TLR)	System (WHMIS)	
SUPE	ERVISOR'S COMMENTS – W			********
	he responses to the question:	☐ Complete	☐ Incomplete	COMMENTS (must be completed if "Incomplete" or "No" are selected):
	ou agree with the responses:	☐ Yes	☐ No	
				Supervisor's Initials:

٠	add any additional information or c	omments and reference the specific JFS section	and question as appropriate.	
	 1 17 – SIGNATURES			
110	Single job submission:	NAME: (Please Print Legibly):		
	CLONATURE			
	SIGNATURE:		DATE:	
		EMPLOYEES DOING THE SAME JOB). Plea		
	Group submission (NAMES OF		se print your name, then sign:	
	Group submission (NAMES OF)	EMPLOYEES DOING THE SAME JOB). Plea	se print your name, then sign: SIGNATURE:	
	Group submission (NAMES OF) NAME:	EMPLOYEES DOING THE SAME JOB). Plea	SIGNATURE: SIGNATURE:	
	Group submission (NAMES OF) NAME: NAME: NAME:	EMPLOYEES DOING THE SAME JOB). Plea	SIGNATURE: SIGNATURE: SIGNATURE:	
	Group submission (NAMES OF) NAME: NAME: NAME: NAME:	EMPLOYEES DOING THE SAME JOB). Plea	SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE:	
	Group submission (NAMES OF) NAME: NAME: NAME: NAME: NAME:	EMPLOYEES DOING THE SAME JOB). Plea	SIGNATURE:	
	Group submission (NAMES OF) NAME: NAME: NAME: NAME: NAME: NAME:	EMPLOYEES DOING THE SAME JOB). Plea	SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE:	
	Group submission (NAMES OF) NAME: NAME: NAME: NAME: NAME: NAME:	EMPLOYEES DOING THE SAME JOB). Plea	SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE:	

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							
ininiculate Out-of-Scope Supervisor							
Name: (Please print legibly)		_					
Signatura							
Signature:		_					
Job Title:		_					
Department:		_					
Work Phone Number:							
Work I hole I tallice!		_					
E-Mail Address:		_					
D .							
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

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

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