

Provider Group – Joint Job Evaluation Job Fact Sheet Job #300-Combined Laboratory & X-Ray Technologist

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.

Section 2 – ORGANIZATIONAL WORK CHART **Purpose:** This section gathers information regarding the organization 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 the person currently in the job. Þ SUPERVISOR'S COMMENTS - ORGANIZATIONAL WORK Title of your immediate Out-of-Scope Supervisor CHART 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): Title of your immediate Supervisor (if different than above) 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	gathers basic identifyin	g material so we can keep ti	rack of comp	npleted Job Fact Sheets.
Provide your name and work telephone	number(s) for contact pu	rposes. For group JFS submi	ssions, please	se note the name and telephone number(s) of the contact person.
Name of person completing the JFS for ARE DOING THE SAME JOB):	a single employee, or co	ntact person for group JFS sul	omission (ON	ONLY COMPLETE A GROUP SUBMISSION IF ALL EMPLOYEES
Name (Print):				Employee No.:
Work Telephone:		E-Mail Address:		
Regional Health Authority/Affiliate:				
Facility/Site:			Departn	tment:
See Section 18 on page 28 for signature.	<i>s</i> .			
Provincial JE Job Title:				Date:
Provincial JE Number:		Office use or	ıly:	JEMC No. <u>M</u>
Section 4 – JOB SUMMARY				
-	describes why the job e			
Briefly describe the general purpose of t <i>conditions.</i>	his job: <i>Performs labor</i>	atory/radiology duties for the	detection, p	prevention and management of physiological and pathological
 Tips: Consider "Why does this job exist?" a Think about what you would say if so you about your job. You may wish to begin with:"The (Joint is responsible for" 	meone approached you a	ind asked		
SUPERVISOR'S COMMENTS – JOI		******	******	***********
	Complete	Incomplete	COMM	MENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):
Are the responses to this question: Do you agree with the responses:				
	—			Supervisor'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: $\frac{1}{2}$ day every day per year = 50%; 3 months per year = 25%; 2 $\frac{1}{2}$ 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: Specimen Procurement and Analysis	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES
Duties/Responsibilities:	Are the responses to this question: Complete
• Prepares patient (e.g., identification, consent, medical condition, instruction of procedure,	
for specimen procurement.	Do you agree with the responses: Yes No
• Collects, transports and prepares samples for in-house testing and/or dispatches to	
reference laboratories (e.g., Provincial Laboratory, TB Laboratory).	COMMENTS (must be completed if "Incomplete" or "No" is selected):
 Organizes and prioritizes specimens based on urgency of request, stability of specimen, and timing protocols. 	
• Assesses specimen integrity and maintains stability.	
• Performs laboratory testing and evaluates the validity of results based on the CLXT scope of practice.	
• Responds appropriately to critical values, unexpected results, and urgent requests.	
	Supervisor's Initials:

Section 5 – KEY WORK ACTIVITIES (cont'd)	

Key Work Activity B: <u>Radiographic Procedures</u>	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES			
Duties/Responsibilities:	Are the responses to this question: 🗌 Complete 🛛 Incomplete			
 Prepares patient (e.g., identification, consent, medical condition, instruction of procedure) for procedures. Prepares patient by portering, instructing, and positioning. 	Do you agree with the responses: Yes No			
 Performs radiographic procedures based on CLXT scope of practice. Develops radiographic films, prepares files and transports to requesting physician and/or radiolog Performs electrocardiograms, stress testing, and Holter monitoring, where required. 	<i>pgist.</i> COMMENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):			
	Supervisor's Initials:			
Key Work Activity C: <u>Clerical</u>	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES			
Duties/Responsibilities:	Are the responses to this question: 🗌 Complete 🛛 Incomplete			
 Completes and files various requisitions. Completes laboratory reports and distributes test results. Provides reception/clerical duties (e.g., telephone, fax, photocopying, booking appointments) Maintains daily lab ledger, tabulates daily units, and completes month/year end reports. Performs data entry. 	Do you agree with the responses: Yes No			
 Performs data entry. Completes incident reports (e.g., unlabeled/mislabeled specimens). 	COMMENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):			
	Supervisor's Initials:			

Section 5 – KEY WORK ACTIVITIES (cont'd)	
Key Work Activity D: <u>Equipment Maintenance / Quality Assurance</u>	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES
Duties/Responsibilities:	Are the responses to this question: 🗌 Complete 🛛 Incomplete
 Maintains equipment, troubleshoots minor repair problems, acts as a liaison with service representatives. Calibrates equipment according to established standards. Participates in internal and external Quality Assurance/Quality Control programs as required 	Do you agree with the responses: Yes No
by local protocol and regulatory bodies.	COMMENTS (must be completed if "Incomplete" or "No" is selected):
	Supervisor's Initials:
Key Work Activity E: <u>Departmental Duties</u>	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES
Duties/Responsibilities: • Provides input into policies and procedures.	Are the responses to this question: Complete
 Provides input into capital purchases and budgets. 	Do you agree with the responses: Yes No
 Provides input into research of new techniques and equipment. Represents the department at various meetings. Provides occasional guidance to the primary function of others, including training. May replace and/or schedule staff and check payroll records, where required by the job. 	COMMENTS (must be completed if "Incomplete" or "No" is selected)
	Supervisor's Initials:
Key Work Activity F: <u>Related Key Work Activities</u>	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES
Duties/Responsibilities:	Are the responses to this question: Complete
 Performs general cleaning and wash-up duties. Maintains inventory, orders supplies, where required by the job. Disposes of biohazardous waste, as per departmental procedures and policies. Orders, receives and issues blood products, where required. 	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".

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 results. Example:	l end			X
Modify or change established department methods and procedures, but stay within program or legislative boundaries. Example: <i>Patient's condition may necessitate modification of testing procedures</i> .		X		
Develop new solutions to diverse and complex problems with conflicting requirements because there are no guide Example:	lines. X			

Almost never	Sometimes	Often	Most of the time
		X	
		X	
		X	
		X	
		X	
			X
			X
	X		
		Sometimes	Sometimes Often

(c)	To what extent are the dec and provide examples)		ided by others (check all responses that apply	Almost never	Sometimes	Often	Most of the time
	Immediate supervisor				X		
	Example:		 		Χ		
	Others in own program/depa	artment			v		
	Example:		 		X		
	Others within the RHA				X		
	Example:		 		Δ		
	Departmental Management				X		
	Example:		 		Δ		
	Specialists / Clinical Expert	S			X		
	Senior Management			X			
	Example:		 				
	Other						
	Example:		 				
the re	SOR'S COMMENTS – DE(sponses to the question: ree with the responses:		**************************************				
,					rvisor's Init		

Section 7 – EDUCATION AND SPECIFIC TRAINING	
Purpose: This section gathers information on the min	nimum level of completed formal education required for the job.
that you have, but what is the typical minimum requiremen	g would be necessary for a new person being hired into this job? This does not reflect the education t of the job. ning should include all classroom, laboratory, practicum, clinical, or apprenticeship, etc., time required
 (i) High School: Grade 10 Grade 11 (ii) Technical/Vocational/Community College: 1 year Specify (Do not use abbreviations): Combined Laborato 	2 years 🖂 3 years 🗌
Specify (Do not use abbreviations):	3 years 4 years 5 years
(iv) University: 3 years 4 years 1 Specify (Do not use abbreviations):	Masters
(b) Is any Provincial, National or professional certification mandate If yes, please specify and provide the name of the licensing / certification of the licensing /	·
 (c) What additional special skills, training, or licenses are needed to Specify (Do not use abbreviations): Basic computer skills Analytical skills Communication skills Organizational skills Interpersonal skills Ability to work independently Valid driver's license, where required by the job 	o perform the job? Indicate the length of the course/program:
SUPERVISOR'S COMMENTS – EDUCATION AND SPECIFIC T Are the responses to the question: Complete Do you agree with the responses: Yes	COMMENTS (must be completed if "Incomplete" or "No" is selected):
	Supervisor's Initials:
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Section 8 – EXPERIENCE

		section gathers information ed experience and/or on-the			l for a job. Relevant experience may include previous job-
	te the minimum relevant to carry out the requirem		to and/or (b) on-the-job, t	hat is required for a new	w person with the education recorded in Section 7 to acquire the skills
	For part (b), ask yourse		ed to learn new tasks and i	responsibilities or to ad	ljust to the job? If so, how much?" 7, Education and Specific Training.
(a)	Required previous relat	ed job experience (do not in	clude practicum or appr	enticeship if covered i	n 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 experience	e requirements gained on pre	vious jobs here or elsewhe	ere needed to prepare for	or this job:
(b)	Average time required of 1 month or fewer	on the job to learn and/or adj	ust to this job:	3 years	
	\square 3 months	\square 9 months	\square 2 years	Other (specify)	
	 Become familiar w Gain understanding 	responsibilities that need to be with site specific instrumenta ag of other departments with with region/facility/departme	tion in the facility/region	<i>s</i>	
	RVISOR'S COMMENT		_	COMMENTS (mu	st be completed if "Incomplete" or "No" is selected):
	e the responses to the question: Complete Incomplete you agree with the responses: Yes No		Incomplete No		
					Supervisor's Initials:

Section 9 – INDEPENDENT JUDGEMENT

Purpose: This section gathers information on the extent to which the job exercises independent action.

All jobs require some independent action, but to varying degrees.	Some jobs are highly structured and have many	y formal procedures, while others requ	ire exercising judgement or
taking actions that have no precedents to serve as a guide.			

Consider the type and level of guidance provided to this job. Guidance can come from rules, instructions, established procedures, defined methods, manuals, policies, professional standards, precedents, leadership from others and direct supervision.

(a) To what extent does this job control its own work as opposed to being guided by influences such as rules, procedures, policies, supervisory presence or instructions directing actions required?

Please check the answer that most closely represents expected job requirements.

Most job requirements (to the extent possible) are set out within structure and rules and/or readily understood schedules to guide job tasks/duties required.

Some restrictions 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 (please explain):

(b) To what extent 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 mostly repetitive and predictable with little need for judgement. Example: _____

Work may present some unusual circumstances that require judgement or choices to be made. Example: ______

When performing testing on critically ill or difficult patients to ensure optimum results.

Work presents difficult choices or unique situations that require judgement. Example: ______

SUPERVISOR'S COMMENTS - INDEPENDENT JUDGEMENT

Are the responses to the question:

Complete Incomplete

Do you agree with the responses:

Supervisor's Initials:

COMMENTS (must be completed if "Incomplete" or "No" is selected):

Section 10 – WORKING RELATIONSHIPS

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

(a) 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
- E Counseling
- **F** Secure cooperation of others for the development of services, programs, policies or agreements on behalf of the Program / Department
- **D** Discussion of problems with a view to obtaining consent, **G** cooperation and/or coordination of activities
 - **G** Negotiation of service and / or supply agreements

		PURPOSE OF CONTACT Check off all that apply (more than one, if applicable)					
	Α	В	С	D	Е	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		X	
Clients / patients / residents		X	X	X			
Family of clients / patients / residents		X	X	X			
Physicians		X	X	X			
Business representatives		X					
Suppliers / contractors		X	X	X			
Volunteers	X						
General Public		X					
Other health care organizations or agencies		X	X				
Professional organizations / agencies		X					
Government departments Provincial Laboratory		X	X				
Social Service establishments	X						
Community Agencies	X						
Police and Ambulance		X	X	X			
Foundations & Health Auxiliary		X					
Others (specify) Couriers		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.

ноу	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 		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				
	• Other (specify)				
(d)	Have contact with extreme / special needs clients / patients / residents? Specify: Acutely impaired or disabled patients			X	
(e)	Talk with clients / patients / residents to:				
	Get information from them				X
	Inform them		ç		X
	Counsel them	X			
	 Devise mutual goals / objectives with them 	X	ç		
	Check on their progress	X			
(f)	Talk with families to:				
	Get information from them		X		
	Inform them		X		
	Counsel them	X			
	 Devise mutual goals / objectives with them 	X	ļ		
	 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)

HOW	V OFTEN DOES YOUR JOB REQUIRE YOU TO:		Almost never	Sometimes	Often	Most o the tim
(h)	Talk with general public to:					
	 Provide information 			X		
	 Respond to questions 			X		
1	Make presentations		X			
(i)	Talk with other employees to:					
	 Get information from them 				Х	
	 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 prog 	rams		X		
	• Other (specify)					
(j)	Talk to vendors, contractors, consultants, government agencies and other exte	ernal groups or organizations to:				
	 Get information from them 				Χ	
	Confer with peer professionals					
	Inform them			X		
	 Arrange for services 			X		
	 Devise mutual goals / objectives with them 		X			
	Lead meetings		Χ			
	Check on their progress		X			
	• Other (specify)					
(k)	Other (specify):					
ERVIS	**************************************		nloto?? -			
he res	sponses to the question:	IMENTS (<u>must</u> be completed if "Incomp	piece 0	01 1NU 1S SO	elected):	
ou agi	ree with the responses:					
3			Super	rvisor's Init	ials:	
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Section 11 – IMPACT OF ACTION

Purpose: This section gathers information on the likelihood of impact of action occurring when carrying out the duties of the job. Consider the responsibility for actions, resources and services, and the extent of the losses.

When carrying out your job duties and responsibilities, what is the likelihood of your actions having an impact or an outcome on the following? Such effects are typical and not considered as carelessness, willful neglect or extreme circumstances.

 Injury or discomfort of others If yes, please provide an example(s): <i>Radiation exposure. Mishandled specimens could result in exposure to</i> 	Is an impact likely? <i>Yes</i> No 🗌
 Kalalion exposure. Mishanalea specimens could result in exposure as Embarrassment in public, client / patient / resident, families, business or employed if yes, please provide an example(s): If imaging/testing done poorly, patient may need to be tested again. Patient may need to be tested again. Patient may need to be tested again. Patient may need to be tested again. 	ee relations Is an impact likely? Yes \boxtimes No \square
 Delays in processing or handling of information or in the delivery of services If yes, please provide an example(s): Delays in service may cause delay in treatment. 	Is an impact likely? <i>Yes</i> No
 Actions which impact on departmental / site / agency / region operations If yes, please provide an example(s): Delays in service or poor testing causes delays in treatment or other resting 	Is an impact likely? <i>Yes</i> ⊠ No □
Damage to equipment / instruments If yes, please provide an example(s): Inadequate maintenance/equipment breakdown may cause service del	Is an impact likely? <i>Yes</i> No
Loss of or inaccurate information If yes, please provide an example(s):	Is an impact likely? <i>Yes</i> ⊠ No □
 Financial losses including withdrawal of commitment or withholding of funds If yes, please provide an example(s): Inadequate maintenance/equipment breakdown may cause damage to 	Is an impact likely? <i>Yes</i> No Dequipment and costly replacement/repair.
Other – If yes, please provide an example(s):	Is an impact likely? Yes No
SUPERVISOR'S COMMENTS – IMPACT OF ACTION Are the responses to the question: □ Complete Do you agree with the responses: □ Yes	COMMENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):
	Supervisor's Initials:

Section 12 – LEADERSHIP/SUPERVISION

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Leadership refers to the requirements of the job to supervise others, lead other carry out their job. Do not include clients / patients / residents.	s, provide functional guidance or provide technical direction to enable other employees
Specify any jobs or work group as appropriate, under one or more of these cate	egories. Check all that apply and provide examples.
	Examples
Familiarize new employees with the work area and processes	Co-workers
Assign and/or check work of others doing work similar to yours	Co-workers
Lead a project team, prioritize tasks, assign work, monitor progress to achieve planned outcome(s)	
Provide functional advice / instruction to others in how to carry out work tasks	Co-workers
Provide technical direction as an expert in a field in order for others to carry out their primary job responsibilities	
Provide input to appraisal, hiring and/or replacement of personnel	New staff, co-workers
Coordinate replacement and/or scheduling of employees	Occasionally replace/schedule staff
Supervise a work group; assign work to be done, methods to be used, and take responsibility for all the group	
Supervise the work, practices and procedures of a defined program	
Supervise the work, practices and procedures of a department	
Provide counseling and/or coaching to others	
Provide health promotion / outreach (teaching / instruction)	Teach diabetic glucose monitoring
\boxtimes Other (specify)	Department statistical reports
**************************************	COMMENTS (<u>must</u> be completed if "Incomplete" or "No" is selected):
ou agree with the responses: Yes No	
	Supervisor's Initials:

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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

Medium weight – over 9 kg / 20 lbs

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

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)
Walking, standing, working in awkward positions	20 - 50%			X	L
Moving equipment, transporting/assisting patients	20 - 50%			X	L - H
Specimen procurement and processing	20 - 40%			X	L - H
Lifting/moving inventory	10%		X		L - M

Section 13 – PHYSICAL DEMANDS (cont'd)

(b)	Does your wo	ork require acc	curate hand/eve or	r hand/foot coordination	n? Please provide	e 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).

Examples: keyboard skills, repairing fine instruments/equipment; floor polishers; folding laundry; mechanical; plumbing; giving injections; dispensing oral medications; 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 in the chart below indicating the frequency of occurrence over a year.

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	REQUENCY	
	ACTIVITY EXAMPLES			Approximate % of time/day	Occasional	Regular	Frequent	
Venipuncture, pipetting, mic	Venipuncture, pipetting, microscope work			20 - 40%			Х	
Positioning patients and equi	Positioning patients and equipment for radiographic examination			20 - 50%			Х	
Computer operation	Computer operation			25%			X	
Repairing instruments				5%	Х			
SUPERVISOR'S COMMENTS – PH			**********	*******	****			
Are the responses to the question:		Incomplete	COMMI	ENTS (<u>must</u> be comple	ted if "Incomple	te" or "No" a	re selected):	
Do you agree with the responses: Yes No		No No						
					S	Supervisor's In	nitials:	

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
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	
Venipuncture, pipetting, microscope work	20 - 40%			Х	
Positioning patients and equipment for radiographic examination	20 - 50%			Х	
Computer operation	25%			Х	
Repairing instruments	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
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
Patients	5 - 50%			X
Equipment sounds	20 - 50%			X
Direction, instruction	20%		X	
Listening to staff	10%	X		

Section 14 – SENSORY DEMANDS (cont'd)					
(c)	Must attention be shifted frequently from one job detail to another?				
•	Examples: keyboarding and	answering the telephon	e; dictatyping; repairing	g and listening to equipment	
	Yes 🖂 No	o 🗌			
	If yes, please give examples :				
	Checking patients, testing				
		*****	****	*****	
SUPER	RVISOR'S COMMENTS – S				
Are the	e responses to the question:	Complete	Incomplete	COMMENTS (<u>must</u> be completed if "Incomplete" or "No" are selected):	
Do you	agree with the responses:	Series Yes	No No		
				Supervisor's Initials:	
Job #3	300 – Combined Laborator	y & X-Ray Technolo	gist (Feb 4/13)	Page 21 of 26	

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.
	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			X
Chemical substances (specify)			X
Cold			
Congested workplace			
Dust			
Extreme temperature			
Extreme temperature Foul language	X		
Grease			
Head lice	X		
Heat			
Inadequate lighting			
Inadequate ventilation			
Insects, rodents, etc.			
Interruptions			X
Isolation			
Latex			
Moisture			
Mold			
Multiple deadlines			X
Noise		X	
Odor		X	
Oil			
Radiation exposure (specify)	X		
Second-hand smoke			
Soiled linens		X	
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	X		
Blood / body fluids			X
Chemical substances (specify)			X
Traveling in inclement weather			
Excessive / unpredictable weights	X		
Exposure to infectious disease (specify) E.g., Blood-borne diseases			X
Extreme noise	X		
Faulty / inadequate equipment	X		
Personal injury <i>E.g., Home visits</i>	X		
Personal safety at risk due to isolation	X		
Radiation exposure (specify)	X		
Sharp objects			X
Small aircraft			
Steam			
Verbal and/or physical abuse	X		
Violence	X		
Working from heights			
Other (specify)			
	I		

SUPERVISOR'S COMMENTS - WORKING CONDITIONS Are the responses to the question: Complete Incomplete Do you agree with the responses: Yes No	Section 15 – WORKING CONDITIO	NS (cont'd)		
Please explain your answer:				ng to avoid a work injury? (Check one and provide an explanation or example of the type of
Required to wear personal protective equipment, as appropriate.	Yes 🖂 No			
UPERVISOR'S COMMENTS - WORKING CONDITIONS re the responses to the question: Complete Incomplete o you agree with the responses: Yes No	Please explain your answer:			
UPERVISOR'S COMMENTS – WORKING CONDITIONS COMMENTS (must be completed if "Incomplete" or "No" are select re the responses to the question: Complete Incomplete o you agree with the responses: Yes No	Required to wear personal pro	stective equipment, a	us appropriate.	
UPERVISOR'S COMMENTS – WORKING CONDITIONS COMMENTS (must be completed if "Incomplete" or "No" are select re the responses to the question: Complete Incomplete o you agree with the responses: Yes No				
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UPERVISOR'S COMMENTS – WORKING CONDITIONS COMMENTS (must be completed if "Incomplete" or "No" are select Are the responses to the question: Complete Incomplete Do you agree with the responses: Yes No				
Do you agree with the responses:		ORKING CONDIT	IONS	**************************************
Supervisor's Initials:				
Supervisor's Initials:				
Supervisor's Initials: _				
				Supervisor's Initials:

Sectio	on 16 – OTHER COMMENTS	
Please	e add any additional information or comments and reference t	ne specific JFS section and question as appropriate.
	on 17 – SIGNATURES	
(a)	Single job submission: NAME: (Please Prin	t Legibly):
	SIGNATURE:	DATE:
(b)	Group submission (NAMES OF EMPLOYEES DOING T	HE SAME JOB). Please print your name, then sign:
	NAME:	SIGNATURE:
	DATE:	
		RESOURCES DEPARTMENT OR AFFILIATE ADMINISTRATOR/EXECUTIV
	<u>DIRECTOR</u>	

Section	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.					
Immedia	ate Out-of-Scope Supervisor				
	Name: (Please print legibly)				
	Signature:				
	Job Title:				
	Department:				
	Work Phone Number:				
	work I none runder.				
	E-Mail Address:				
	Ditte				
	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

С

- 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

E

• Education

- 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

Ι

- Installations
- Investigations

L

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

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

0

- 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

- 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

Т

- 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