

Provider Group – Joint Job Evaluation Job Fact Sheet Job #005 – Caretaker

Section 1 – INTRODUCTION

PLEASE PRINT

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 25, 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 25.
- 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. 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 identifying material so we can keep track of completed Job Fact Sheets. Provide your name and work telephone number(s) for contact purposes. For group JFS submissions, please note the name and telephone number(s) of the contact person. Name of person completing the JFS for a single employee, or contact person for group JFS submission (ONLY COMPLETE A GROUP SUBMISSION IF ALL EMPLOYEES ARE DOING THE SAME JOB): Name (**Print**): Employee No.: Work Telephone: ______ E-Mail Address: ______ Regional Health Authority/Affiliate: Facility/Site: Department: See Section 18 on page 28 for signatures. Provincial JE Job Title: Date: Provincial JE Number: Office use only: M - -JEMC No. Section 4 – JOB SUMMARY **Purpose:** This section describes why the job exists. Briefly describe the general purpose of this job: Maintains the cleanliness of the interior and exterior of the facility. Performs minor maintenance repairs and maintains grounds. Tips: Consider "Why does this job exist?" and "What is this job responsible for?" Think about what you would say if someone approached you and asked you about your job. You may wish to begin with: "The (Job Title) exists to ..." or "The (Job Title) is responsible for ... " SUPERVISOR'S COMMENTS - JOB SUMMARY **COMMENTS** (must be completed if "Incomplete" or "No" is selected): **Incomplete Complete** Are the responses to this question: Yes No No Do you agree with the responses: Supervisor's Initials:

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: <u>Housekeeping / Waste Disposal</u>

Duties/Responsibilities:

- Maintains floors dry/wet mop, burnish, vacuum, strip, auto-scrub, seal and finish.
- Prepares cleaning solutions (e.g., dilutes).
- Removes waste, including sharps and recyclables.
- General cleaning, including furniture, windows, vents and appliances.
- Sets up rooms for functions (e.g., tables, chairs, etc.)

SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES

Are the responses to this question: Complete

Do you agree with the responses: Yes No

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 B: Inventory / Stock Distribution

Duties/Responsibilities:

- Ships and receives inventory.
- Distributes stock.

Are the responses to this quest	ion: 🗌 Complete	Incomplete
Do you agree with the response		— ·
COMMENTS (<u>must</u> be complete		
	Supervisor's I	nitials:
SUPERVISOR'S COMMENT Are the responses to this quest		
Do you agree with the response	es: 🗌 Yes	🗌 No
COMMENTS (<u>must</u> be complete	ed if "Incomplete" (or "No" is selected)
	Supervisor's I	nitials:

Key Work Activity C: <u>Maintenance</u>

Duties/Responsibilities:

- Cleans and maintains equipment (e.g., vacuums, burnishers and auto-scrubber).
- Performs minor repairs to equipment and facility including painting and carpentry repairs.
- *Maintains pest control.*
- Operates garbage compactor.

Section 5 – KEY WORK ACTIVITIES (cont'd)

Key Work Activity D: Groundskeeping

Duties/Responsibilities:

- Weed control and lawn care.
- Prunes, trims hedges and trees.
- Maintains flowerbeds.
- Maintains grounds (e.g., snow removal, sweeping sidewalks and stairwells).

Are the responses to this que	stion: 🗌 Complete	e 🗌 Incomplete
Do you agree with the respon	nses: 🗌 Yes	🗌 No
COMMENTS (<u>must</u> be compl	eted if "Incomplete"	or "No" is selected):
	Supervisor's	Initials:
CUDEDUICODIC COMMEN		
SUPERVISOR'S COMMEN	TS – KEY WORK	ACTIVITIES
SUPERVISOR'S COMMEN Are the responses to this que		
	stion: 🗌 Complete	
Are the responses to this que	estion: 🗌 Complete	e 🗌 Incomplete
Are the responses to this que Do you agree with the respor	estion: 🗌 Complete	e 🗌 Incomplete
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Are the responses to this que Do you agree with the respor	estion: Complete nses: Yes eted if "Incomplete"	e 🗌 Incomplete

Key Work Activity E: <u>Related Key Work Activities</u>

Duties/Responsibilities:

- May show others how to perform tasks or duties by familiarizing new employees with the work area and processes.
- Porters supplies.
- May communicate with suppliers/contractors for the acquisition of services and supplies.
- May lock and unlock doors.

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 end results. Example:				X
	Modify or change established department methods and procedures, but stay within program or legislative boundaries. Example: <i>Prioritize work</i>		X		
	Develop new solutions to diverse and complex problems with conflicting requirements because there are no guidelines. Example:	*			*

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)				

Section 6 -	- DECISION-MAKING (con	t'd)						
(c)	To what extent are the deci and provide examples)	sion-making requi	rements of this job gu	ided by others (check all responses that apply	Almost never	Sometimes	Often	Most of the time
	Immediate supervisor						v	
	Example:						X	
	Others in own program/depart					X		
	Example:							
	Others within the RHA				X			
	Example:							
	Departmental Management			X				
	Example:						Λ	
	Specialists / Clinical Experts				v			
	Example:				X			
	Senior Management							
	Example:				X			
	Other							
	Example:							
re the re	SOR'S COMMENTS – DEC sponses to the question:	ISION-MAKING	Incomplete	**************************************	omplete" (or "No" is s	elected):	
o you ag	ree with the responses:	TYes	No No		Supa	rvisor's Init	tials	
					_ Supe	1 7 1501 8 1111	uais:	

7 – EDUCATI	ION AND SPECIF	IC TRAINING		
Purpose:	This section ga	thers information	on the minimum level of	f completed formal education required for the job.
				cessary for a new person being hired into this job? This does not reflect the education
			formal training should inc	clude all classroom, laboratory, practicum, clinical, or apprenticeship, etc., time required
(i) High So	chool:	Grade 10 🖂	Grade 11 Grade	e 12 🗌
	•		-	4 years 5 years
Is any Provinc	cial, National or pro-	fessional certificat	ion mandatory? 🗌 Ye	es 🛛 No
If yes, please s	specify and provide	the name of the lie	censing / certification / reg	gistration body (do not use abbreviations):
What addition	al special skills, tra	ining, or licenses a	re needed to perform the j	ob? Indicate the length of the course/program:
 Basic kno Basic con Ability to 	owledge of tools and nputer skills work independentl	d equipment y	ob	
VISOR'S CO	MMENTS – EDUG			
responses to t	inimum level of completed schooling or formal training would be necessary for a new person being hired into this job? This does not reflect the education u have, but what is the typical minimum requirement of the job. al minimum level of completed schooling or formal training should include all classroom, laboratory, practicum, clinical, or apprenticeship, etc., time required graduation or certification. High School: Grade 10 ⊠ Grade 11 □ Grade 12 □ Technical/Vocational/Community College: 1 year □ 2 years □ 3 years □ Specify (Do not use abbreviations):			
agree with the	e responses:	Yes	🗌 No	
				Supervisor's Initials:
	Purpose: What minimu that you have The total mini- prior to gradua (i) High Sa (ii) Technid Specify (iii) License Specify (iv) Universe Specify Is any Province If yes, please se What addition Specify (Do n Basic know Basic cont Ability to Valid drive RVISOR'S COL e responses to t	Purpose: This section gathers What minimum level of complete that you have, but what is the ty The total minimum level of comprior to graduation or certification (i) High School: (ii) Technical/Vocational/Composition Specify (Do not use abbrew) (iii) Licensed Trades: 1 year Specify (Do not use abbrew) (iv) University: 3 years Specify (Do not use abbrew) Is any Provincial, National or prooinf yes, please specify and provide What additional special skills, transpecify (Do not use abbrewiations) Basic knowledge of tools and Basic computer skills Ability to work independentified	What minimum level of completed schooling or for that you have, but what is the typical minimum r The total minimum level of completed schooling or prior to graduation or certification. (i) High School: Grade 10 🛛 (ii) Technical/Vocational/Community College: Specify (Do not use abbreviations):	Purpose: This section gathers information on the minimum level of completed schooling or formal training would be need that you have, but what is the typical minimum requirement of the job. The total minimum level of completed schooling or formal training should in prior to graduation or certification. (i) (i) High School: Grade 10 \sciences Grade 11 \sciences Grade 11 \sciences Grade (ii) (ii) Technical/Vocational/Community College: 1 year \sciences 2 year Specify (Do not use abbreviations):

Purpose:			on the minimum rele e-job learning or adjus		for a job. Relevant experience may include previous job-
	m relevant experience e requirements of thi		to and/or (b) on-the-jol	b, that is required for a new	person with the education recorded in Section 7 to acquire th
For part (b),	ask yourself, "Is time	e on the job requir		nd responsibilities or to adju	ust to the job? If so, how much?" , Education and Specific Training.
Required pro	vious related job exp	perience (do not in	clude practicum or ap	prenticeship if covered in	Section 7 – Education and Specific Training)
None 🛛	🗌 6 r	nonths	1 year	3 years	5 years
Up to 3 r	nonths 9 r	nonths	2 years	4 years	Other (specify)
	ious experience.	ients gamed on pre	vious jobs here of elsev	where needed to prepare for	
Average tim	e required on the job	to learn and/or adj	ust to this job:		
1 month	or fewer $\mathbf{\boxtimes 6}$ <i>n</i>	nonths	1 year	3 years	
\Box 3 months	9 r	nonths	2 years	Other (specify)	
	-			tisfy the requirements of this	is job: pairs to equipment/furnishings and department policies and
procedu		-		****	
CRVISOR'S Contract of the responses to	OMMENTS – EXPI		Incomplete		be completed if "Incomplete" or "No" is selected):
ou agree with th	-	☐ Yes	□ No		

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 formal procedures, while others require 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.

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 (a) 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:

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

SUPERVISOR'S COMMENTS - INDEPENDENT JUDGEMENT

Do you agree with the responses:

Complete	Incomplete
Yes	□ No

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

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

			POSE				[
			eck of				`
			than				
	A	B	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	X	X			
Physicians		X					
Business representatives		X					
Suppliers / contractors		X	X	X			
Volunteers		X					
General Public		X					
Other health care organizations or agencies	X						
Professional organizations / agencies		X	X	X			
Government departments	X						
Social Service establishments	X						
Community Agencies	X						
Police and Ambulance		X					
Foundations	X						
Others (specify)							

Job #005 – Caretaker (October 17, 2019)

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 o the tim
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	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)

OF	Sometimes	Often	Most of the time
Tall			
	X		
	X		
Tall			
	X		
	X		
Tall			
		X	
	X		
	X		
	X		
	X		
Oth			•
OR'			
	or "No" is se	elected):	:
e wi			
//	· · · · ·	• - 1	
- "	rvis	or's Init	or's Initials:
TEN DOES YOUR JOB REQUIRE YOU TO: Ammere with general public to:	X X X X X X X X X or "No" is s		x selected):

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): Improper maintenance of walkways and stairwells may result in minor injuries. 	Is an impact likely? Yes	No 🗌
 Embarrassment in public, client / patient / resident, families, business or employee relations If yes, please provide an example(s): Inadequate cleaning may result in minor embarrassment in public relations. 	Is an impact likely? Yes 🔀	No 🗌
Delays in processing or handling of information or in the delivery of services If yes, please provide an example(s):	Is an impact likely? Yes	No 🖂
 Actions which impact on departmental / site / agency / region operations If yes, please provide an example(s): Inadequate snow removal may delay ambulance operations. 	Is an impact likely? Yes 🔀	No 🗌
 Damage to equipment / instruments If yes, please provide an example(s): Improper handling of equipment may result in damage and expensive repairs. 	Is an impact likely? Yes 🖂	No 🗌
Loss of or inaccurate information If yes, please provide an example(s):	Is an impact likely? Yes	No 🖂
Financial losses including withdrawal of commitment or withholding of funds If yes, please provide an example(s):	Is an impact likely? Yes	No 🖂
Other – If yes, please provide an example(s):	Is an impact likely? Yes	No 🗌
***************************************	*	
PERVISOR'S COMMENTS – IMPACT OF ACTION COMMENTS (<u>must</u> be completed if "In-	complete" or "No" is selected):	
e the responses to the question: Complete Incomplete you agree with the responses: Yes No		
	Supervisor's Initials:	

Section 12 – LEADERSHIP/SUPERVISION

	thers information o able them to carry o		pervise others, lead others and / or provide functional guidance or technical
Leadership refers to the require carry out their job. Do not inc			rs, provide functional guidance or provide technical direction to enable other employees t
Specify any jobs or work group	as appropriate, unde	er one or more of these cate	tegories. Check all that apply and provide examples.
🛛 Familiarize new employees	with the work area a	nd processes	Examples Staff
Assign and/or check work of	of others doing work	similar to yours	
Lead a project team, priorit achieve planned outcome(s		c, 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		l in order for others to	
Provide input to appraisal, I	niring and/or replace	nent of personnel	
Coordinate replacement and	l/or scheduling of em	ployees	
Supervise a work group; as take responsibility for all the		, methods to be used, and	
Supervise the work, practic	es and procedures of	a defined program	
Supervise the work, practic	es and procedures of	a department	
Provide counseling and/or o	coaching to others		
Provide health promotion /	outreach (teaching / i	nstruction)	
Other (specify)			
PERVISOR'S COMMENTS – LE the responses to the question: you agree with the responses:			**************************************
			Supervisor's Initials:
#005 – Caretaker (October 17	2019)		Page 16 of 26

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.

What **physical effort** is required on a **typical** basis for your job? Please provide examples that are applicable to your job. (a)

- ► 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

Heavy weight - over 23kg / 50 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 **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		
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent	Light, Medium, Heavy (specify)
Lifting	20%		X		L-H
Shoveling Snow	30%	X			Н
Pushing	50%				L-H
Walking	75%			X	
Moving equipment	10%		X		L-H
Reaching	25%		X		
Climbing	5%		X		
Driving	0 - 10%	X			
Computer operation	5 - 10%	X			

Section 13 – PHYSICAL DEMANDS (cont'd)

(b)	Does your work	c require accura	te hand/eye or l	hand/foot coordination?	Please provide	examples that a	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		
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent
Operating equipment	25%		X	
Hand / power tools	10%		X	
Repairing equipment	10%		X	
Driving	0 - 10%	X		
Stocking / shelving	5 - 10%	X		
Computer operation	5 - 10%	X		

SUPERVISOR'S COMMENTS – PHYSICAL DEMANDS

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

Are the responses to the question	:
Do you agree with the responses	

Complete **Incomplete** Yes

Do you agree with the responses:

No No

Supervisor's Initials:

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	
Operating equipment	25%		X		
Repairing equipment	10%		X		
Driving	0 - 10%	X			
Reading	10%		X		
Furniture assembly	5%	X			
Computer operation	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		Ŷ
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent
Communication	25%		X	
Equipment sounds	35%			X

Sectio	Section 14 – SENSORY DEMANDS (cont'd)					
(c)	Must attention be shifted frequently from one job detail to another?					
•	Examples: keyboarding and answering the telephone; dictatyping; repairing and listening to equipment					
	Yes 🖂	No 🗌				
	If yes, please give	examples:				
	• In emergent	situations.				
SUPF	**************************************					
				COMMENTS (must be completed if "Incomplete" or "No" are selected):		
	ne responses to the o		Incomplete			
Do yo	u agree with the res	sponses: 🗌 Yes	□ No			
				Supervisor's Initials:		
	OOF Operatelese (O a t a h a m 17, 0010)				

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	X		
Chemical substances (specify)		X	
Cold	X		
Congested workplace	X		
Dust		X	
Extreme temperature	X		
Foul language	X		
Grease	X		
Head lice			
Heat		X	
Inadequate lighting	X		
Inadequate ventilation	X		
Insects, rodents, etc.		X	
Interruptions	X		
Isolation			
Latex			
Moisture	X		
Mold			
Multiple deadlines	X		
Noise	X		
Odor	X		
Oil	X		
Radiation exposure (specify)			
Second-hand smoke			
Soiled linens	X		
Steam			
Transporting or handling human remains			
Travel	X		
Vibration	X		
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) Cleaning solutions		X	
Traveling in inclement weather	X		
Excessive / unpredictable weights		X	
Exposure to infectious disease (specify)	X		
Extreme noise	X		
Faulty / inadequate equipment	X		
Personal injury	X		
Personal safety at risk due to isolation			
Radiation exposure (specify)			
Sharp objects	X		
Small aircraft			
Steam	X		
Verbal and/or physical abuse	X		
Violence			
Working from heights	X		
Other (specify)			
	1	1	

Section	n 15 – WORKING CONDITIO	NS (cont'd)			
(c)	Do you have to take certain tra precaution(s) normally taken.)	ining, precautions or	wear protective clothing	g to avoid a work injury? (Check one and provide an explanation or example of the type of	
	Yes 🖂 No				
	Please explain your answer:				
• PPE, TLR, WHMIS, PART, PME.					
		******	*****	*****	
SUPEF	RVISOR'S COMMENTS – WO	ORKING CONDIT	IONS	COMMENTS (must be completed if "Incomplete" or "No" are selected):	
Are the	e responses to the question:	Complete	Incomplete		
Do you	agree with the responses:	Yes	No No		
				Supervisor's Initials:	
Job #0	005 – Caretaker (October 17	, 2019)		Page 24 of 26	

Section 16 – OTHER COMMENTS				
Please add any additional information or comments and reference the specific JFS section and question as appropriate.				
ectio	on 17 – SIGNATURES			
)	Single job submission: NAME: (Please Print	Legibly):		
	SIGNATURE:	DATE:		
)	Group submission (NAMES OF EMPLOYEES DOING TH	IE SAME JOB). Please print your name, then sign:		
	NAME:	SIGNATURE:		
	DATE:			
	<u>PLEASE SUBMIT TO REGIONAL HUMAN</u> <u>DIRECTOR</u>	RESOURCES DEPARTMENT OR AFFILIATE ADMINISTRATOR/EXECUTI		

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					
Name: (Please print legibly)		-			
Signature:		-			
Job Title:		-			
Department:					
Work Phone Number:		-			
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

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

\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

Ν

- 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

Р

- 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