

# Provider Group – Joint Job Evaluation Job Fact Sheet <u>Job #220 – Cytotechnologist II</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 **CURRE'NT** 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.

	in which your job functions.
Chart below: ite in the <b>Provincial JE Job Title of the position</b> – <b>not</b> the name of	the person currently in the job.
tle 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
your immediate Supervisor (if different than above)	COMMENTS (must be completed if "Incomplete" or "No" is selected):
Your current Provincial JE Job Title	
rent Provincial JE Job Number:	Supervisor's Initials:
JE Job Titles that report directly to you (if applicable)	
	tle of your immediate Out-of-Scope Supervisor  your immediate Supervisor (if different than above)  Your current Provincial JE Job Title  rent Provincial JE Job Number:

Section	on 3 – JOB IDE	NTIFICATION						
	Purpose:	This section	gathers basic identifying	g material so we can keep tr	ack of comp	leted Job Fact S	Sheets.	
Provi	de your name and	d work telephone	number(s) for contact pur	poses. For group JFS submis	sions, please	note the name a	nd telephone number(s) of	the contact person.
Name ARE	e of person compl DOING THE SA	leting the JFS for AME JOB):	a single employee, or cor	ntact person for group JFS sub	omission (ON	ILY COMPLETE	E A GROUP SUBMISSIO	N IF ALL EMPLOYEES
Name	e ( <b>Print</b> ):						Employee No.:	
Work	Telephone:			E-Mail Address:				
Saska	tchewan Health	Authority/Affiliate	2:					
Facili	ty/Site:				Departm	nent:		
See S	ection 18 on page	e 28 for signature	s.					
Provi	ncial JE Job Title	»:					Date:	
Provi	ncial JE Number	:		Office use on	ly:	JEMC No.	<u>M</u>	
Section	on 4 – JOB SUM	IMARY						
	Purpose:	This section	describes why the job ex	xists.				
				scopic examination and diagase processes. Performs post-			cological and non-gynecol	logical specimens to aid in
▶Thi	nk about what yo	ou would say if so		onsible for?" nd asked you about your job. The ( <u>Job Title</u> ) is responsible	for"			
CLIDI		MATERIES 101		*********	*****	*****	*****	
	he responses to	MMENTS – JO	□ Complete	☐ Incomplete	COMM	ENTS ( <u>must</u> be	completed if "Incomplete	e" or "No" is selected):
	ou agree with the	-	☐ Yes	☐ No		·		
							Supervisor's In	nitials:
							_	

#### 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: Specimen Preparation and Analysis

#### **Duties/Responsibilities:**

- ♦ Ensures required information for patient and specimen identification is on requisition and specimen.
- ♦ Organizes and prioritizes specimens based on urgency of request.
- ♦ Enters data and prepares samples for in-house testing.
- ♦ Assesses specimen adequacy/integrity and initiates corrective action, as required.
- ♦ Responds appropriately to abnormal results by providing preliminary diagnosis to pathologist.
- Performs specialized testing (e.g., fine needle aspiration and thin prep).
- Performs laboratory testing, correlates results and evaluates the validity of these results.

Bet ER visor s comment	J-REI WORK	
Are the responses to this questi	on: Complete	☐ Incomplete
Do you agree with the response	es: Yes	□ No
COMMENTS (must be complete	ed if "Incomplete" o	r "No" is selected):
·		
	G	*** 3
	Supervisor's I	nitials:

SUPERVISOR'S COMMENTS - KEY WORK ACTIVITIES

Section 5 – KEY WORK ACTIVITIES (cont'd)	
Key Work Activity B: <u>Post-Screening / Recording / Reporting</u>	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES
<ul> <li>Post-screens and records abnormal results.</li> <li>Documents and communicates results according to established protocol.</li> <li>Issues final reports for post-screened gynecological specimens that are diagnosed "within normal limits".</li> <li>Assigns all non-gynecological and abnormal gynecological cases to pathologist.</li> <li>Performs retro-reviews on all abnormal cases that have had previous normal histories.</li> <li>Utilizes statistics and other indicators to monitor the acceptability of results and maintain appropriate documentation.</li> </ul>	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:
<ul> <li>Key Work Activity C: Quality Assurance / Quality Control</li> <li>Duties/Responsibilities:</li> <li>◆ Participates in Quality Assurance/Quality Control programs as required by local protocols and government regulations.</li> <li>◆ Follows preventative maintenance programs by maintaining instrument logs and recognizing equipment malfunctions.</li> </ul>	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: Administration** SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES Are the responses to this question: $\square$ Complete $\square$ Incomplete **Duties/Responsibilities:** ♦ Provides technical direction/functional advice for staff and students. Do you agree with the responses: $\square$ Yes □ No ♦ Prioritizes workload and schedules work flow. Submits payroll information. Acts as a liaison with other departments. **COMMENTS** (must be completed if "Incomplete" or "No" is selected): Provides input into and reviews policies and procedures. Provides general instruction/training for students and new staff. Researches and reviews new versus existing methodologies. Coordinates special projects (e.g., Laboratory Information System, College of American Pathologists program). Supervisor's Initials: Key Work Activity E: Related Key Work Activities SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES Are the responses to this question: Complete Incomplete **Duties/Responsibilities:** ♦ Performs preventative maintenance. Do you agree with the responses: $\square$ Yes □ No Cleans instruments and work area. Disposes of biohazardous waste, as per departmental procedures and policies. **COMMENTS** (<u>must</u> be completed if "Incomplete" or "No" is selected): ♦ Performs computer work (e.g., data entry). Communicates test results to physicians. Maintains the documentation of workload measurement and other statistics. Prepares and files test results and reports. Maintains glass slide teaching file for use by pathologist, pathology residents and cytotechnologists. Supervisor's Initials: \_\_\_\_\_

#### Section 6 – DECISION-MAKING

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

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

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

(a)	In this job, do you (check all responses that apply)	Almost never	Sometimes	Often	Most of the time
	Follow specific instructions/procedures, use well-defined methods or use established guidelines to achieve desired end results.  Example: <i>Technical methods for collecting, recording, interpreting and reporting.</i>				X
	Modify or change established department methods and procedures, but stay within program or legislative boundaries. Example: <i>Evaluate and/or alter special stain procedures</i> .		X		
	Develop new solutions to diverse and complex problems with conflicting requirements because there are no guidelines. Example: <i>Develop plans to achieve short term goals when creating training schedules.</i>		X		

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

(c)	To what extent are the decision-making requirements of this job guided by others (check all responses that a and provide examples)	pply Almost never	Sometimes	Often	Most of the time
	Immediate supervisor		X		
	Example:		<b>A</b>		
	Others in own program/department		X		
	Example:				
	Others within the SHA / Affiliate	X			
	Example:				
	Departmental Management		X		
	Example:		Λ		
	Specialists / Clinical Experts				
	Example:			X	
	Senior Management	X			
	Example:	A			
	Other				
	Example:				
NI IDED V	Other  Example:				
	COMMENTS (must be completed i	f "Incomplete"	or "No" is s	elected):	i.
	sponses to the question:  Complete Incomplete  ree with the responses:  No				

	Purp	ose: This section g	athers information	on the minimum level of	completed formal education required for the job.					
_		minimum level of compl you have, but what is the			essary for a new person being hired into this job? This does not reflect the education					
١		otal <b>minimum</b> level of corto graduation or certificati		r formal training should inc	lude all classroom, laboratory, practicum, clinical, or apprenticeship, etc., time required					
	(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	eviations): <i>Cytotech</i>	nology diploma						
	(iii)	Licensed Trades: 1 years Specify (Do not use abb	_ ,		4 years					
	(iv)	University: 3 year	ars 4 years	Masters						
	Is any	Is any Provincial, National or professional certification mandatory?   Yes   No								
	If yes	s, please specify and provid	le the name of the li	censing / certification / regi	stration body (do not use abbreviations):					
		Certified by the Canadian Registered by the College (			chewan – Diagnostic Cytology					
	What	t additional special skills, t	raining, or licenses a	are needed to perform the jo	b? Indicate the length of the course/program:					
	<ul><li>.</li><li>.</li><li>.</li><li>.</li><li>.</li><li>.</li></ul>	ify (Do not use abbreviation Basic computer skills Analytical skills Ability to work independen Communication skills Organizational skills Interpersonal skills Valid driver's license, who	ntly ere required by the j		******					
PEF	RVISO	R'S COMMENTS – EDU								
the	e respo	onses to the question:	☐ Complete	☐ Incomplete	<b>COMMENTS</b> ( <u>must</u> be completed if "Incomplete" or "No" is selected):					
	_	with the responses:	☐ Yes							
•	0	•	_		Supervisor's Initials:					

Purpo				on the minimum relo e-job learning or adju		for a job. Relevant experience may include previous job-
		evant experience nirements of this		to and/or (b) on-the-jo	b, that is required for a new	person with the education recorded in Section 7 to acquire the s
For p	art (b), ask yo	ourself, "Is time	on the job requir		nd responsibilities or to adji	ust to the job? If so, how much?"  Education and Specific Training.
Requi	red previous	related job expe	erience (do not in	clude practicum or a	pprenticeship if covered in	Section 7 – Education and Specific Training)
$\square$ N	one	☐ 6 m	onths	1 year	3 years	5 years
$\square$ U <sub>1</sub>	p to 3 months	s	onths	2 years	4 years	Other (specify)
Descr	ibe the exper	rience requireme	ents gained on pre	vious jobs here or else	where needed to prepare for	this job:
<b>•</b> 1	wenty-four (	(24) months pre	vious experience	as a Cytotechnologist	I.	
Avera	nge time requ	ired on the job t	o learn and/or ad	just to this job:		
1	month or few	ver	onths	⊠ 1 year	3 years	
□ 3	months	☐ 9 m	onths	2 years	Other (specify)	
Descr	ribe the tasks	and responsibili	ties that need to l	pe learned in order to sa	atisfy the requirements of thi	s job:
<b>•</b> 7	welve (12) m	onths on the jo	b to develop Qua	lity Control procedure	s/documentation and to bec	ome familiar with department policies and procedures.
			*****	*******	*********	************
ERVISO	R'S COMM	ENTS – EXPE	RIENCE		COMMENTS (must	be completed if "Incomplete" or "No" is selected):
he respo	nses to the q	uestion:	☐ Complete	☐ Incomplete	COMMENTS ( <u>must</u>	be completed if "Incomplete" of "No" is selected):
ou agree	with the resp	ponses:	☐ Yes	□ No		

Section	on 9 – INDEPEN	DENT JUDGEM	ENT								
	Purpose:	This section ga	thers information	on the extent to which	the job exercises independent action.						
		ndependent action, e no precedents to s		rees. Some jobs are hig	hly structured and have many formal procedures, while others require exercising judgement or						
		level of guidance pr leadership from oth			om rules, instructions, established procedures, defined methods, manuals, policies, professiona						
(a)	To what exter directing action		rol its own work as	s opposed to being guide	ed by influences such as rules, procedures, policies, supervisory presence or instructions						
	Please check	the answer that m	ost closely repres	ents expected job requi	irements.						
	Most job r	equirements (to the	extent possible) a	re set out within structur	re and rules and/or readily understood schedules to guide job tasks/duties required.						
	Some rest	rictions apply, but t	he control over set	ting 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	To what extent does this job exercise judgement to determine how the work is to be done?									
	Please check	the answer that m	ost closely repres	ents expected job requi	irements.						
(b)					Example:						
	<del></del>										
	☐ Work ma	y present some unu	sual circumstances	that require judgement	or choices to be made. Example:						
	─────────────────────────────────────	sents difficult choic	ees or unique situat	ions that require judgem	nent. Example:						
		<ul> <li>✓ Work presents difficult choices or unique situations that require judgement. Example:</li> <li>◆ Assess the quality of staining and initiate the corrective action as required.</li> </ul>									
		4	<b>3</b>	4							
					****************						
SUPI	ERVISOR'S CO	MMENTS – INDI	EPENDENT JUDO	GEMENT	COMMENTS (must be completed if "Incomplete" or "No" is selected):						
Are t	he responses to t	the question:	☐ Complete	☐ Incomplete	( <u>must</u> be completed if the information is selected).						
Do yo	ou agree with the	e responses:	☐ Yes	□ No							
					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.

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

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

### Section 10 – WORKING RELATIONSHIPS (cont'd)

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

HOV	V OFTEN DOES YOUR JOB REQUIRE YOU TO:	Almost never	Sometimes	Often	Most of the time
<b>(b)</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:				
	<ul> <li>Clients / patients / residents / families (not other workers)</li> </ul>	X			
	<ul> <li>Outside groups (not other workers)</li> </ul>	X			
	<ul> <li>General public</li> </ul>	X			
	Other employees	X			
	<ul> <li>Management</li> </ul>	X			
	<ul><li>Physicians</li></ul>		X		
	<ul><li>Other (specify)</li></ul>				
(d)	Have contact with extreme / special needs clients / patients / residents?  Specify:				
(e)	Talk with clients / patients / residents to:				
	Get information from them		X		
	■ Inform them		X		
	Counsel them				
	<ul> <li>Devise mutual goals / objectives with them</li> </ul>	X			
	<ul> <li>Check on their progress</li> </ul>	X			
<b>(f)</b>	Talk with families to:				
	<ul> <li>Get information from them</li> </ul>		X		
	■ Inform them		X		
	<ul> <li>Counsel them</li> </ul>				
	<ul> <li>Devise mutual goals / objectives with them</li> </ul>	X			
	<ul> <li>Check on their progress</li> </ul>	X			
(g)	Talk with physicians to:				
	<ul> <li>Get information from them</li> </ul>			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			
	<ul> <li>Respond to questions</li> </ul>	X			
	<ul> <li>Make presentations</li> </ul>	X			
(i)	Talk with other employees to:				
	■ Get information from them			X	
	■ Inform them			X	
	■ Counsel / <i>persuade</i> them	X			
	■ Give them advice on work procedures			X	
	Get advice from them on work procedures			X	
	<ul> <li>Get cooperation from other parts of the organization on projects and programs</li> </ul>		X		
	■ Other (specify)				
<b>(j</b> )	Talk to vendors, contractors, consultants, government agencies and other external groups or organizations to:				
	<ul> <li>Get information from them</li> </ul>		X		
	<ul> <li>Confer with peer professionals</li> </ul>		X		
	■ Inform them		X		
	Arrange for services		X		
	Devise mutual goals / objectives with them	X			
	<ul> <li>Lead meetings</li> </ul>	X			
	Check on their progress	X			
	Other (specify)				
(k)	Other (specify):				
` /					
DTI	**************************************	*			
LKVI	SOR'S COMMENTS – WORKING RELATIONSHIPS  COMMENTS (must be completed if "In	ncomplete'	or "No" is s	elected):	
he re	sponses to the question: Complete Incomplete	icompiete (	OI 140 19 9	ciccicu).	•
u ag	ree with the responses:				
		Supe	rvisor's Init	tials:	

Purpose: This section gathers information on the likelihood of impact of action occurring whe responsibility for actions, resources and services, and the extent of the losses.	n carrying out the duties of the job. Consider the	
When carrying out your job duties and responsibilities, what is the likelihood of your actions having an impand not considered as carelessness, willful neglect or extreme circumstances.	pact or an outcome on the following? Such effects ar	e typic
Injury or discomfort of others  If yes, please provide an example(s):  ◆ Improper disposal of biohazardous materials may lead to serious discomfort to others.	Is an impact likely? Yes 🖂	No [
Embarrassment in public, client / patient / resident, families, business or employee relations  If yes, please provide an example(s):  Mislabeling specimens may impact patient diagnosis which may cause substantial delays in treatment	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):  Mislabeling specimens may impact patient diagnosis which may cause substantial delays in treatment	Is an impact likely? Yes	No [
Actions which impact on departmental / site / agency / SHA / Affiliate operations If yes, please provide an example(s):  Improper scheduling of workflow may impact timely care of patients.	Is an impact likely? Yes	No [
Damage to equipment / instruments  If yes, please provide an example(s):  Improper servicing of equipment may lead to delays in service.	Is an impact likely? Yes 🖂	No [
Loss of or inaccurate information  If yes, please provide an example(s):  ◆ Incorrect patient information may lead to lack of or unnecessary treatment.	Is an impact likely? Yes 🖂	No [
Financial losses including withdrawal of commitment or withholding of funds  If yes, please provide an example(s):  Improperly handled specimens may require re-testing which increases costs.	Is an impact likely? Yes	No [
Other –  If yes, please provide an example(s):	Is an impact likely? Yes	No [
**************************************	**************************************	
agree with the responses:	Supervisor's Initials:	

#### Section 12 – LEADERSHIP/SUPERVISION

	-	out their job.	s, provide functional guidance or provide technical direction to enable other employees
carry out their job. <b>Do not inclu</b>			s, provide functional guidance of provide technical direction to enable other employees
Specify any jobs or work group	as appropriate, und	er one or more of these cate	egories. Check all that apply and provide examples.
☐ Familiarize new employees v	with the work area	and processes	Examples Staff, students
Assign and/or check work of	others doing work	similar to yours	Staff
Lead a project team, prioritiz achieve planned outcome(s)	e tasks, assign wor	k, monitor progress to	
Provide functional advice / in tasks	nstruction to others	in how to carry out work	Staff, students
Provide technical direction a carry out their primary job re		d in order for others to	Staff, students
Provide input to appraisal, hi	ring and/or replace	ement of personnel	Staff
Coordinate replacement and	or scheduling of er	nployees	
Supervise a work group; assi take responsibility for all the		e, methods to be used, and	
☐ Supervise the work, practice	s and procedures of	f a defined program	·
☐ Supervise the work, practice	s and procedures of	f a department	<del></del>
Provide counseling and/or co	eaching to others		
Provide health promotion / o	utreach (teaching /	instruction)	
Other (specify)			
ERVISOR'S COMMENTS – LEA			***********************
he responses to the question:	☐ Complete	☐ Incomplete	COMMENTS ( <u>must</u> be completed 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)
Sitting	75 – 90%			X	
Computer operation	25 – 40%			X	
Standing	10 – 25%			X	
Preparation of reagents, transport of slides, waste disposal and recycling	15%	X			<i>M</i> – <i>H</i>
Working in awkward positions	10%		X		
Filing	5 – 10%	X			L
Driving	0 – 10%	X			
		1	l	1	

Section	13_	PHV	SICAI	DEM A	NDS	(cont'd)
Section	13 -	. 1 11 1	JICAL		מעוו	(COIIL U)

(b) 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 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 timeRegular– means the activity occurs often – between 50% - 75% of the timeFrequent– means the activity occurs every day – over 75% of the time

	DURATION		FREQUENCY	REQUENCY		
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent		
Repetitive hand/eye motions	75 – 90%			X		
Computer operation	25 – 40%			X		
Staining/processing	25%			X		
Slide preparation from fine needle aspirations	15%	X				
Measuring reagents/stains	5 – 10%	X				
Driving	0 – 10%	X				

	******	*******	********************
SUPERVISOR'S COMMENTS – PH	YSICAL DEMAND	S	
Are the responses to the question:	☐ Complete	☐ Incomplete	COMMENTS ( <u>must</u> be completed if "Incomplete" or "No" are selected):
Do you agree with the responses:	☐ Yes	□ 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

- 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	
Concentration on precision work (e.g. microscope)	75 – 90%			X	
Computer operation	25 – 40%			X	
Staining/processing	25%			X	
Monitoring equipment	15 – 25%			X	
Slide preparation from fine needle aspiration	15%	X			
Measuring reagents/stains	5 – 10%	X			
Filing	5 – 10%	X			
Driving	0 – 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		FREQUENC	Y
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent
Equipment sounds	50%			X
Communication	10 – 50%		X	
Instruction at fine needle aspirations	0 – 10%	X		
Case discussion and consults	10%		X	

Section	14 – SENSORY DEMANDS	(cont'd)								
(c)	Must attention be shifted free	quently from one job de	etail to another?							
•	Examples: keyboarding and answering the telephone; dictatyping; repairing and listening to equipment									
	Yes 🖂 No	о								
	If yes, please give <b>examples</b> :									
	♦ Microscope work, telephone, consultations, computer operation.									
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):						
	agree with the responses:	☐ Yes	□ No							
				Supervisor's Initials:						

#### **Section 15 – WORKING CONDITIONS**

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

out.

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

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

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

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

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

Sectio	on 15 – WORKING CONDITIO	NS (cont'd)			
(c)	Do you have to take certain training, precautions or wear protective clothing to avoid a work injury? (Check one and provide an explanation or example of the type of precaution(s) normally taken.)				
	Yes 🖂 No				
	Please explain your answer:				
	<ul> <li>Transportation of Dange</li> <li>Personal Protective Equilibrium</li> <li>Transfer, Lifting, Reposition</li> <li>Workplace Hazardous Management</li> </ul>	pment (PPE) tioning (TLR)	System (WHMIS)		
G-1-1-1				********	
SUPERVISOR'S COMMENTS – WORKING CONDITIONS			COMMENTS ( <u>must</u> be completed if "Incomplete" or "No" are selected):		
	ne responses to the question:	Complete	☐ Incomplete		
Do yo	u agree with the responses:	☐ Yes	□ No		

CUI	on 16 – OTHER COMMENTS	Super	rvisor's Initials:			
ease	e add any additional information or comments and reference the specific JF	S section and question as appropriate				
	on 17 – SIGNATURES					
)	Single job submission: NAME: (Please Print Legibly):					
	SIGNATURE:	DATE:				
o)	Group submission (NAMES OF EMPLOYEES DOING THE SAME JOB). Please print your name, then sign:					
	NAME:					
		SIGNATURE:				
	NAME:					
		SIGNATURE:				
	NAME:	SIGNATURE:SIGNATURE:				
	NAME:	SIGNATURE:  SIGNATURE:  SIGNATURE:				
	NAME:NAME:	SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:				
	NAME:	SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:				

Section 18 – OUT-OF-SCOPE SUPER	/ISOR'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:		
Signature.		
Job Title:	<del></del>	
D		
Department:		
Work Phone Number:		
E-Mail Address:		
Date:		
Date.	<del></del>	

# 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

# 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 auditNursing 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

# $\mathbf{W}$

• Word processing and typing function

JE: Revised Dec 19/06