

# Provider Group – Joint Job Evaluation Job Fact Sheet <u>Job #343 – Parent Mentoring Program Worker</u>

PLEASE PRINT

#### Section 1 - INTRODUCTION

Purpose: This section provides general direction for completing the Job Fact Sheet and is further supplemented by the additional instructions set out

in the remaining sections of this Job Fact Sheet.

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

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

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

#### SUPERVISOR – STEPS TO FOLLOW:

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

#### **EMPLOYEE - STEPS TO FOLLOW:**

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

Purpose: This section gathers information regarding the organization	on in which your job functions.	
Complete the Chart below:		
Be sure to write in the <b>Provincial JE Job Title of the position – not</b> the name of	of the person currently in the job.	
Title of your immediate Out-of-Scope Supervisor	SUPERVISOR'S COMMENTS – ORGANIZATION CHART	AL WORK
	Are the responses to this question:   Complete	☐ Incomplete
	Do you agree with the responses: $\square$ Yes	□ No
	COMMENTS (must be completed if "Incomplete" or "I	No" is selected):
Title of your immediate Supervisor (if different than above)		
		<del> </del>
		<del> </del>
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)		
2 To 1210 and 2 Con 211100 and 2 Oper on 2 Con (22 approximate)		

Section	on 3 – JOB IDEN	TIFICATION						
	Purpose:	This section g	athers basic identify	ing material so we can keep t	rack of comp	leted Job Fact Sh	eets.	
Provid	de your name and	l work telephone n	umber(s) for contact p	ourposes. For group JFS subm	is sions, pleas	e note the name and	d telephone number(s) of the co	ontact person.
			single employee, or c	ontact person for group JFS su	ıbmis sion (Ol	NLY COMPLETE A	A GROUP SUBMISSION IF A	ALL EMPLOYEES
Name	( <b>Print</b> ):						Employee No.:	
Work	Telephone:			E-Mail Address:			· · · · · · · · · · · · · · · · · · ·	
Saskt	chewan Health A	uthority/Affiliate:		· · · · · · · · · · · · · · · · · · ·				
Facilit	ty/Site:				Departr	nent:		
See Se	ection 18 on page	e 28 for signatures.						
Provi	ncial JE Job Title:	:					Date:	<del></del>
Provi	ncial JE Number:			Office use of	nly:	JEMC No.	M	
Section	on 4 – JOB SUM	MARY						
	Purpose:	This section d	escribes why the job	exists.				
Briefly	y describethe ge	neral purpose of th	mentors.	Plans and facilitates educati	onal and sup	port groups for pro		
This you	nk about what yo 1 about your job.	ou would say if son gin with:" <i>The</i> ( <u>Job</u>	d" <i>What is this job re</i> . eone approached you	sponsible for?" and asked	-			
SUPE	RVISOR'S CO	pose: This section gathers basic identifying material so we can keep track of completed Job Fact Sheets.  rname and work telephone number(s) for contact purposes. For group JFS submis sions, please note the name and telephone number(s) of the contact person.  son completing the JFS for a single employee, or contact person for group JFS submis sions (ONLY COMPLETE A GROUP SUBMISSION IF ALL EMPLOYEES 6 THE SAME JOB):  (b):						
Are tl	ne responses to t	his question:	☐ Complete	☐ Incomplete		EN1S ( <u>must</u> be co	ompleted 11 "Incomplete" or " 	
Do yo	u agree with the	responses:	☐ Yes	□ No				
							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: 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: Volunteer Development and Coordination

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

- Recruits, screens, trains and evaluates volunteer mentors.
- ♦ Provides guidance and support to volunteers.
- ♦ Performs home visits for participants to facilitate development of mentors.
- Assists the Mentoring Program Coordinator in maintaining a current training manual.

SUI ERVISOR S COMMENTS - REI WORK	ACHVIIIIS
Are the responses to this question: $\square$ Complete	☐ Incomplete
Do you agree with the responses: $\square$ Yes	□ No
COMMENTS (must be completed if "Incomplete" o	r "No" is selected):
Supervisor's In	nitials:

CLIDEDVICAD'S COMMENTS - KEV WADE ACTIVITIES

Section 5 – KEY WORK ACTIVITIES (cont'd)						
Key Work Activity B: <u>Program Delivery</u>	SUPERVISOR'S COMMENTS - KEY WORK ACTIVITIES					
Duties/Responsibilities:	Are the responses to this question: $\Box$ Complete $\Box$ Incomplete					
<ul> <li>Assesses programparticipant eligibility and needs.</li> <li>Matches clients with parent mentors.</li> <li>Maintains contact with the client and mentor to evaluate match and ensure identified needs are met.</li> </ul>	Do you agree with the responses: $\square$ Yes $\square$ No					
<ul> <li>Partners/liaises with other programs and agencies to provide appropriate services.</li> <li>Plans and facilitates educational and support groups for participants.</li> <li>Links mentors and clients with other community resources.</li> <li>Delivers public presentations about the program.</li> <li>Supports clients in locating housing, childcare and medical care.</li> </ul> Key Work Activity C: <u>Related Key Work Activities</u>	COMMENTS (must be completed if "Incomplete" or "No" is selected)					
	Supervisor's Initials:					
Key Work Activity C: Related Key Work Acitivities	SUPERVISOR'S COMMENTS - KEY WORK ACTIVITIES					
Duties/Responsibilities:  A dants program materials to suit low literacy levels	Are the responses to this question: $\square$ Complete $\square$ Incomplete					
	Do you agree with the responses: $\square$ Yes $\square$ No					
	COMMENTS (must be completed if "Incomplete" or "No" is selected):					
	Supervisor's Initials:					

	1	
Key Work Activity D:	( %)	SUPERVISOR'S COMMENTS – KEY WORK ACTIVITIES
Duties/Responsibilities:		Are the responses to this question: $\square$ Complete $\square$ Incomplete
		Do you agree with the responses: $\square$ Yes $\square$ No
		COMMENTS (must be completed if "Incomplete" or "No" is selected)
		Supervisor's Initials:
Key Work Activity E:	( %)	SUPERVISOR'S COMMENTS - KEY WORK ACTIVITIES
Duties/Responsibilities:		Are the responses to this question: $\square$ Complete $\square$ Incomplete
		Do you agree with the responses: $\square$ Yes $\square$ No
		COMMENTS (must be completed if "Incomplete" or "No" is selected)
		Supervisor's Initials:
		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 theres ponse 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>Intake</i> , <i>screening</i> , <i>training procedures for clients and mentors</i> .				X
	Modify or change established department methods and procedures, but stay within program or legislative boundaries. Example: Recruitment of volunteers. Methods of presenting information and facilitating groups.		X		
	Develop new solutions to diverse and complex problems with conflicting requirements because there are no guidelines. Example: <b>Develops creative outreach solutions for hard-to-engage clientele.</b>			X	

<b>(b)</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 whatto 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)				

To what extent are the dec and provide examples)	ision-making requ	irements of this job gu	nided by others (check all responses that apply	Almost never	Sometimes	Often	Most of the time		
Immediate supervisor									
Example:					Λ				
						V			
Example:						71			
Others within the SHA									
Example:									
							X		
Example:							A		
				Λ					
Senior Management				V					
				А					
Other									
Example:									
	CISION-MAKING			omplete" (	or "No" is s	elected)	:		
	-	-							
ree with the responses:	☐ Yes	□ No							
				Supervisor's Initials:					
	and provide examples)  Immediate supervisor Example:  Others in own program/dep Example:  Others within the SHA Example:  Departmental Management Example:  Specialists / Clinical Expert Example:  Senior Management Example:  Other Example:	Immediate supervisor Example:  Others in own program/department Example:  Others within the SHA Example:  Departmental Management Example:  Specialists / Clinical Experts Example:  Senior Management Example:  Other Example:  Other Example:  Other Example:  Other  Example:   Example:  Other  Example:   Other  Example:   Other  Example:   Other  Example:	and provide examples)  Immediate supervisor Example:  Others in own program/department Example:  Others within the SHA Example:  Departmental Management Example:  Specialists / Clinical Experts Example:  Senior Management Example:  Other Example:  Other Example:  Other Example:  ***********************************	Immediate supervisor Example:  Others in own program/department Example:  Others within the SHA Example:  Departmental Management Example:  Specialists / Clinical Experts Example:  Senior Management Example:  Other Example:  Other Example:  Other Example:  COMMENTS - DECISION-MAKING Sponses to the question:   COMMENTS (must be completed if "Incomplete")	Immediate supervisor Example:  Others in own program/department Example:  Others within the SHA Example:  Departmental Management Example:  Specialists / Clinical Experts Example:  Senior Management Example:  Other  Senior Management Example:  Complete  Other  Example:  Complete  Incomplete  Complete  Incomplete  Complete  C	Immediate supervisor Example:  Others in own program/department Example:  Others within the SHA Example:  Departmental Management Example:  Specialists / Clinical Experts Example:  Senior Management Example:  Other  Senior Management Example:  Other Example:  Complete  Complete  Senior Management Example:  Other Exam	Inmediate supervisor Example:  Others in own program/department Example:  Others within the SHA Example:  Departmental Management Example:  Specialists / Clinical Experts Example:  Senior Management Example:  Cother E		

	Purp	oose: This section g	athers information	on the minimum level	of completed form	al education required for the job.
		at minimum level of comple you have, but what is the			ecessary for a <b>new</b> p	person being hired into this job? This does not reflect the education
•		total <b>minimum</b> level of cor r to graduation or certificati		r formal training should	include all class roor	m, laboratory, practicum, clinical, or apprentices hip, etc., time req
	<b>(i)</b>	High School:	Grade 10 □	Grade 11 ☐ Gra	de 12 ⊠	
	(ii)	Technical/Vocational/Co Specify (Do not use abbr	·	· ·	ars 🗆 3 year	rs 🗆
	(iii)	Licensed Trades: 1 year Specify (Do not use abb	ar □ 2 years	s □ 3 years □	4 years □	5 years □
	(iv)	•	ars 4 years reviations):			
	Is an	ny Provincial, National or pr	rofessional certifica	tion mandatory?	Yes 🛛 No	o
	If ye	es, please specify and provide	le the name of the li	censing/certification/r	egistration body (do	onot use abbreviations):
	Wha	at additional special skills, to	raining, or licenses	are needed to perform th	e job? Indicate the l	length of the course/program:
	Snac	'C (D) ( 11 '.'	ine).			
	* * * * * * * * * * * * * * * * * * *	cify (Do not use abbreviatio Basic computer skills Interpersonal, organizat Group facilitation skills Ability to work independ Ability to communicate to Valid driver's license, w	tional and commun dently in a cross-cultural s	setting		
PEI	* * * * * * * *	Basic computer skills Interpersonal, organizate Group facilitation skills Ability to work independ Ability to communicate	tional and commun dently in a cross-culturals here required by th	setting e job	COMMENTS	(must be completed if "Incomplete" or "No" is selected):
	RVISO	Basic computer skills Interpersonal, organizate Group facilitation skills Ability to work independ Ability to communicate to Valid driver's license, w	tional and commun dently in a cross-culturals here required by th	setting e job		( <u>must</u> be completed if "Incomplete" or "No" is selected):
e th	RVISO	Basic computer skills Interpersonal, organizate Group facilitation skills Ability to work independ Ability to communicate to Valid driver's license, w	tional and commun dently in a cross-cultural s here required by th ICATION AND SI	setting e job PECIFIC TRAINING		

ion 8 – EXPERIENO	CE CE			
Purpose:		mation on the minimum rel on-the-job learning or adju		redfor a job. Relevant experience may include previous job-
	elevant experience gained: (a equirements of this job.	) prior to and/or ( <b>b</b> ) on-the-j	ob, that is required for a n	ew person with the education recorded in Section 7 to acquire the
For part (b), ask		required to learn new tasks o	and responsibilities or to	adjust to the job? If so, how much?" n 7, Education and Specific Training.
Required previo	ous related job experience (do	not include practicum or a	pprentices hip if covered	l in Section 7 – Education and Specific Training)
☐ None	☐ 6 months	☐ 1 year	☐ 3 years	5 years
☐ Up to 3 mon	ths	☐ 2 years	☐ 4 years	Other(specify)
Describe the ex	periencerequirements gained	on previous jobs here or else	where needed to prepare	for this job:
◆ Twelve (12	) months previous experienc	e working with volunteers ar	nd in the human services	s field.
Averagetime re	quired on the job to learn and	l/or adjust to this job:		
☐ 1 month or f	ewer	☑ 1 year	☐ 3 years	
$\square$ 3 months	9 months	☐ 2 years	☐ Other (specify	)
Describe the tas	sks and responsibilities that ne	eed to be learned in order to s	atis fy the requirements of	fthis job:
	) months on the job experient tpolicies and procedures.	ce to complete program-spe	cific on-the-job training,	consolidate knowledge and skills, and become familiar with
FDVISOD'S COM	****** MENTS – EXPERIENCE	********	********	**********
the responses to the	_	lete 🗆 Incomplete	COMMENTS (m	ust be completed if "Incomplete" or "No" is selected):
ou agree with the r	es pons es:	□ No		
				Supervisor's Initials:

	Purpose:	This section a	gathers information	n on the extent to whic	ch the job exercises independent action.				
ll jol king	os require some ir actions that have	dependent actio	n, butto varying deg serve as a guide.	grees. Some jobs are hi	ighly structured and have many formal procedures, while others require exercising judgement of				
onsi anda	der the type and learths, precedents, le	evel of guidance eadership from o	provided to this job thers and direct sup	. Guidance can come fi ervision.	romrules, instructions, established procedures, defined methods, manuals, policies, profession				
)	To what extent directing actio		ntrol its own work a	s opposed to being gui	ded by influences such as rules, procedures, policies, supervisory presence or instructions				
	Please check t	he ans wer that i	nost closely repres	sents expected job requ	uirements.				
	☐ Most job re	quirements (to tl	ne extent possible) a	re set out within struct	ure and rules and/or readily understood schedules to guide job tasks/duties required.				
	⊠ Some restri	ctions apply, but	the control over set	tting work priorities and	d pace of work is contained within the job.				
	☐ There are n	inimal restrictio	ns, leaving significa	ant control over the wor	k being carried out within the scope of the job.				
	☐ Other(plea	se explain):							
)	To what extent does this job exercise judgement to determine how the work is to be done?								
	Please check t	he ans wer that 1	nost closely repres	sents expected job requ	uirements.				
	☐ Work is mo	ostly repetitive a	nd predictable with	little need for judgeme	nt. Example:				
					ntorchoices to be made. Example: sating success of mentor/client matches.				
	☐ Workpres	ents difficult cho	ices or unique situa	tions that require judge	ement. Example:				
			****	*******	**************				
UPE	RVISOR'S CON	IMENTS - IND	EPENDENT JUDO	GEMENT	COMMENTS (must be completed if "Incomplete" or "No" is selected):				
re th	e responses to th	e question:	☐ Complete	☐ Incomplete					
o you	agree with the	responses:	☐ Yes	□ No					

#### Section 10 – WORKING RELATIONSHIPS

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

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

#### **Purpose of Contact:**

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

		PURPOSE OF CONTACT Check off all that apply (more than one, if applicable)					
	A	В	C	D	E	F	G
Employees in the same department		X	X	X		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						
Business representatives							
Suppliers / contractors	X						
Volunteers		X	X	X		X	
General Public		X	X			X	
Other health care organizations or agencies		X	X	X		X	
Professional organizations / agencies		X	X	X			
Government departments		X	X	X			
Social Service establishments		X	X	X			
Community Agencies		X	X	X			
Police and Ambulance		X	X	X			
Foundations		X	X	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?				
	<ul> <li>Other employees</li> </ul>	X			
	Client / patients / residents / families		X		
	■ The general public	X			
	<ul><li>Other(specify): Agencies</li></ul>		X		
(C)	Have contact with very upset or very angry:  Clients / patients / residents / families (not other workers)	X			
	<ul><li>Outside groups (not other workers)</li></ul>	X			
	■ General public	X			
	■ Otheremployees	X			
	<ul> <li>Management</li> </ul>	X			
	■ Physicians	X			
(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
	■ Counselthem				
	■ Devise mutual goals / objectives with them				X
	<ul> <li>Check on their progress</li> </ul>				X
<b>(f)</b>	Talk with families to:				
	Get information from them				X
	■ Inform them				X
	<ul> <li>Counselthem</li> </ul>				
	■ Devise mutual goals / objectives with them				X
	<ul> <li>Check on their progress</li> </ul>				X
( <b>g</b> )	Talk with physicians to:				
	Get information from them	X			
	■ Inform them	X			
	■ Devise mutual goals / objectives with them	X			

HOV	W OFTEN DOES YOUR JOB REQUIRE YOU TO:	Almost never	Sometimes	Often	Most of the time
(h)	Talk with general public to:				
	<ul> <li>Provide information</li> </ul>		X		
	<ul> <li>Respond to questions</li> </ul>		X		
	Make presentations		X		
(i)	Talk with other employees to:				
	<ul> <li>Get information from them</li> </ul>			X	
	<ul><li>Inform them</li></ul>			X	
	Counsel/persuade them		X		
	<ul> <li>Give them advice on work procedures</li> </ul>		X		
	<ul> <li>Get advice fromthemon work procedures</li> </ul>		X		
	<ul> <li>Get cooperation from other parts of the organization on projects and prog</li> </ul>	grams		X	
	<ul><li>Other(specify)</li></ul>				
	<ul> <li>Confer with peer professionals</li> <li>Inform them</li> <li>Arrange for services</li> <li>Devise mutual goals / objectives with them</li> <li>Lead meetings</li> <li>Check on their progress</li> <li>Other (specify)</li> </ul>	X X	X	X X	
(k)	Other (specify):	·			
	**************************************	***********			
ne re	responses to the question:   Complete Incomplete	MMENTS (must be completed if "Incomplete"	or "No" is s	elected)	:
	gree with the responses:	C C	ervisor's Ini	4:-1	

_	_		mpact of action occurring when carry the extent of the losses.	ying out the duties of the job. Consider th	ie	
When carrying out your job du and not considered as careless				an outcome on the following? Such effects	are typic	
Injury or discomfort of others If yes, please provide an examp	ple(s):			Is an impact likely? Yes □	No ∑	
Embarrassment in public, clier If yes, please provide an exam  Inapproriate mentor/clie	ple(s):			Is an impact likely? Yes ⊠	No [	
Delays in processing or handli If yes, please provide an examp		in the delivery of servi	ces	Is an impact likely? Yes □	No 🛭	
Actions which impact on departmental/site/agency/Sasktchewan Health Authority operations if yes, please provide an example(s):				Is an impact likely? Yes □		
Damage to equipment / instrument / instrumen				Is an impact likely? Yes □	No 🗵	
Loss of or inaccurate informat If yes, please provide an exam  Failure to ensure the acc	ole(s):	nentor and client infor	ma tion may result in inacccuracies in t	Is an impact likely? Yes  reports and poor mentor/client matches.	No C	
Financial losses including with If yes, please provide an example.		ent or withholding of fu	nds	Is an impact likely? Yes □	No 🗵	
Other— If yes, please provide an exam				Is an impact likely? Yes □	No [	
VISOR'S COMMENTS – IM			**** **** **** **** **** ****	*****		
responses to the question:	□ Complete	☐ Incomplete	COMMENTS (must be comple	ted if "Incomplete" or "No" is selected):		
agree with the responses:	☐ Yes	□ No		Supervisor's Initials:		

- '	gathers information on able them to carry o	-	pervise others, lead others and / or provide functional guidance or technical
Leadership refers to the requ carry out their job. <b>Do not in</b>			s, provide functional guidance or provide technical direction to enable other employees
Specify any jobs or work gro	up as appropriate, und	ler one or more of these cate	egories. Check all that apply and provide examples.
☐ Familiarize new employed	es with the work area a	and processes	Staff, volunteers Examples
☐ Assign and/or check work	of others doing work	similar to yours	
Lead a project team, prior achieve planned outcome		k, monitor progress to	
□ Provide functional advice tasks	/ instruction to others	in how to carry out work	Staff, volunteers
Provide technical direction carry out their primary joint		d in order for others to	
☐ Provide input to appraisal	, hiring and/or replace	ement of personnel	
□ Coordinate replacement a	nd/orscheduling of en	nployees	Volunteers
<ul><li>✓ Supervise a work group; a take responsibility for all</li><li>✓ Supervise the work, pract</li></ul>	the group		Volunteer mentors Volunteers
☐ Supervise the work, pract	ices and procedures of	f a department	
☑ Provide counseling and/o	r coaching to others		Volunteer mentors
☑ Provide health promotion	/outreach (teaching/	instruction)	Presentations to public; input for newsletters; facilitation of mentor/client groups
☐ Other(specify)			
CRVISOR'S COMMENTS – LI			*********************
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 **howoften** 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)
Walking, standing, sitting	10-75%		X		
Computer operation	10%		X		
Driving	15%		X		
Lifting, pushing, pulling	5 – 10%	X			L/M
Crouching	5 – 10%	X			

(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	Y
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent
Computer Operation	10%		X	
Doing crafts, stuffing envelopes, taking hand-written notes	5 – 10%	X		
Driving	15%		X	
Texting/phoning	10%			X

SUPERVISOR'S COMMENTS - PHY	YSICAL DEMAND	os	COMMINITS (most be completed if "Incomplete" on "Ne" and calcuted).
Are the responses to the question:  Do you agree with the responses:	☐ Complete ☐ Yes	☐ Incomplete	COMMENTS (must be completed if "Incomplete" or "No" are selected):
			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 **howoften** 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

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

	DURATION		FREQUENCY	Y
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent
Computer operation	10%		X	
Driving	15%		X	
Interviewing	10-15%	X		
Presentations/reportwriting/preparing written/electronic materials	5 – 10%	X		
Observing clients/patients/residents	10%	X		
Provide training, instruction	25%	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 mes sages; operating a switchboard; alarms ystems; 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

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

	DURATION		FREQUENCY	Y
ACTIVITY EXAMPLES	Approximate % of time/day	Occasional	Regular	Frequent
Taking meeting minutes and notes	10-15%	X		
Taking phone messages	5-10%		X	
Listening to and interviewing clients and volunteers	20%			X

(c) Must attention be shifted frequ	ently fromone job d	letail to another?							
Examples: keyboarding and a	Examples: keyboarding and answering the telephone; dictatyping; repairing and listening to equipment								
Yes ⊠ No									
If yes, please give <b>examples</b> :									
• There are frequent intern	ruptions where incun	mbants must switch tasi	ks from keyboarding to telephone to client interaction.						
SUPERVISOR'S COMMENTS – SE			********						
			**************************************						
SUPERVISOR'S COMMENTS – SE  Are the responses to the question:  Do you agree with the responses:	NS ORY DEMANDS	S							
Are the responses to the question:	NSORY DEMANDS	S ☐ Incomplete							

#### Section 15 – WORKING CONDITIONS

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

out.

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

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

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

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

CONDITION (specify if applicable)	Occasional	Regular	Frequent
Blood/body fluids Chemical substances (specify) <i>Cleaning solutions</i>	X		
Chemical substances (specify) Cleaning solutions		X	
Cold	X		
Congested workplace			
Dust			
Extreme temperature			
Foullanguage			
Grease			
Head lice	X		
Heat Inadequate lighting			
Inadequate lighting			
Inadequate ventilation			
Insects, rodents, etc.			
Interruptions			X
Isolation			
Latex			
Moisture			
Mold			
Multiple deadlines	X		
Noise			
Odor Oil			
Oil			
Radiation exposure (specify)			
Second-handsmoke	X		
Soiled linens			
Stoom			
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	X		
Blood / body fluids Chemical substances (specify) <i>Cleaning solutions</i> Trougling in in plament weather	X		
Chemical substances (specify) Cleaning solutions	X		
Traveling in inclement weather Excessive / unpredictable weights	X		
Excessive / unpredictable weights			
Exposure to infectious disease (specify)		X	
Extreme noise			
Faulty / inadequate equipment			
Personaliniury			
Personal safety at risk due to isolation	X		
Radiation exposure (specify)			
Sharp objects			
Small aircraft			
Steam			
Verbal and/or physical abuse	X		
Violence	X		
Working fromheights			
Other(specify)			

	precaution(s) normally taken	.)	wear protective clothi	ng to avoid a work injury? (Check one and provide an explanation or example of the typ				
	Yes 🛛 No		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 precaution(s) normally taken.)					
	Please explain your answer:							
	◆ PPE, TLR, WHMIS, Cr	isis Intervention Trai	ning.					
	***********			************************				
SUPERV	VISOR'S COMMENTS - W	ORKING CONDITI	ONS	COMMENTS (must be completed if "Incomplete" or "No" are selected:				
Are the	responses to the question:	☐ Complete	☐ Incomplete	(must be completed if incomplete of No are selected).				
Do you a	agree with the responses:	☐ Yes	□ No					
				Supervisor's Initials:				
Are the	responses to the question:	☐ Complete	☐ Incomplete	COMMENTS (must be completed if "Incomplete" or "No" are selecte				
				Supervisor's Initials:				

add any additional information or comments and reference the specific J		
n 17 – SIGNATURES		
SIGNATURE:	DATE:	
SIGNATURE:  Group submission (NAMES OF EMPLOYEES DOING THE SAME.		
Group submission (NAMES OF EMPLOYEES DOING THE SAME.	OB). Please print your name, then sign:	
	OB). Please print your name, then sign: SIGNATURE:	
Group submission (NAMES OF EMPLOYEES DOING THE SAME.  NAME:	OB). Please print your name, then sign:  SIGNATURE:  SIGNATURE:	
Group submission (NAMES OF EMPLOYEES DOING THE SAME.  NAME:	OB). Please print your name, then sign:  SIGNATURE:  SIGNATURE:  SIGNATURE:	
Group submission (NAMES OF EMPLOYEES DOING THE SAME.  NAME:  NAME:  NAME:	IOB). Please print your name, then sign:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:	
Group submission (NAMES OF EMPLOYEES DOING THE SAME.  NAME:  NAME:  NAME:	OB). Please print your name, then sign:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:	
Croup submission (NAMES OF EMPLOYEES DOING THE SAME.  NAME:  NAME:  NAME:  NAME:	SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:  SIGNATURE:	

Section 18 – OUT-OF-SCOPE SUPERVISOR'S COMMENTS						
Please add any additional information or comments and reference the specific JFS section and question as appropriate.						
T 11 . O						
Immediate Out-of-Scope Super	√ISOr					
Name: (Please print le	egibly)					
Signature:						
Job Title:						
000 11110						
Department:						
W 151 X 1						
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

# 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

#### 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

JE: Revised Dec 19/06

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

# Q

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

#### R

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

# S

- Scheduling and coordination activities
- Scheduling and processing

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

#### T

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

#### U

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

# W

• Word processing and typing function

JE: Revised Dec 19/06