#### COUNTY OF SONOMA - JOB DEMANDS ANALYSIS

**JOB CLASSIFICATION: Department Analyst** 

**DEPARTMENT: Permit Sonoma** 

**PHYSICAL DEMAND STRENGTH RATING: Sedentary** 

DATE COMPLETED: March 2020

**DIVISION: Administration** 

#### INSTRUCTIONS TO MEDICAL PROVIDERS COMPLETING THIS FORM:

Please use the "Medical Provider Use Only" columns to the right of each section and the "Medical Provider's Comments & Signature" Section on the signature page to provide work restrictions by indicating whether there is some portion of each function that the employee can perform; designating whether each restriction is temporary or permanent; and, if restriction is temporary, stipulating the expected duration of work restriction(s). To finalize the form, please provide the name of the employee evaluated and additional comments, as appropriate, then sign and date where indicated.

#### **FREQUENCY RATING:**

Frequency	Percentage of time per shift	Repetition (# times per shift)	8 Hr Shift	9 Hr Shift	10 Hr Shift	12 Hr Shift
Never/Not Required (N)	n/a	n/a	n/a	n/a	n/a	n/a
Occasionally (O)	1 - 33%	1 – 100	0 - 2.5	0 - 3	0 - 3.5	0 – 4
Frequently (F)	34 - 66%	100 – 500	2.5 - 5.5	3 - 6	3.5 - 7	4 – 8
Continuously (C)	67 - 100%	500+	5.5 – 8	6 - 9	7 - 10	8 - 12

#### **PART 1 - JOB DUTIES/FUNCTIONS:**

A. Job Duty/Function	B. Job	C. Freq	D. Equipment or	E. Specialized	F. Essential or	Medical Provider Use Only: For
	Duty	Rating	tools used to	Expertise, License,	Non- Essential	each job duty/function, indicate
	#		perform (Describe)	Certification Required?		in this column "Can Perform", is
				(Describe)		"Temporarily Restricted" from
						performing, or is "Permanently
						Restricted" from performing.
While performing the following duties, employees in this position						
work in a typical office setting, sitting for long periods of time and						
routinely using office equipment such as computers, phones,						
photocopiers, fax machines, etc.						
Performs financial and statistical data analysis; collects,	1	F	Computer, phone		E	
assembles, analyzes, and interprets data; assists with financial						
reporting, forecasting, the preparation of the recommended						
budget and other financial reports; utilizes spreadsheets and						
financial databases; performs rate calculations and revenue						
projections; ensures the accuracy of information; periodically						
reviews actual expenditures against budget; prepares supportive						
documentation, including written narratives, graphs, etc.;						
understands and follows County policies and procedures.						

A. Job Duty/Function		Rating	D. Equipment or tools used to perform (Describe)	E. Specialized Expertise, License, Certification Required? (Describe)		Medical Provider Use Only: For each job duty/function, indicate in this column "Can Perform", is "Temporarily Restricted" from performing, or is "Permanently Restricted" from performing.
Facilitates the preparation and submission of contracts and grants; develops contract agreements, grant submissions, and Requests for Proposals (RFPs); analyzes needs of the department; writes technical statements; manages competitive procurement processes to include the negotiation and execution of contracts; coordinates and tracks agreements and RFPs; ensures agreement/grant terms, conditions, and insurance requirements have been met; coordinates the review and processing of Board Items, ensuring formatting is correct, and timelines are met.	2	О	Computer, phone		E	
Implements, coordinates, and facilitates department safety programs; serves as a source of safety information for the department; reviews injury and accident reports; ensures cause is identified and corrective action taken; recommends safety procedure and program updates; prepares periodic reports for management on safety issues and trends; attends county-wide safety meetings.	3	O	Computer, phone		E	
Identifies need for new policies, procedures, and plans, or receives request from supervisor; researches and analyzes issue; reviews relevant laws, regulations, and policies; writes policy using approved format and professional level writing; ensures policy is reviewed by other County departments as appropriate, such as Human Resources and County Counsel; identifies need for, and meets and confers with Union as appropriate; ensures implementation.	4	F	Computer, phone		E	
Communicates in person, by phone, or email with co-workers, supervisors, HR liaisons, and the general public to explain detailed and complex information, ask for advice and guidance, and to advises and educates staff on County policies, MOUs, and legal requirements, etc.; asks questions of caller to ensure accurate information is provided; assists in the proper completion of forms; advises staff on training and other administrative requirements.	5	F	Computer, phone		E	
Prepares electronic files; receives documents; removes staples and paperclips; assembles files in established format; places documents in scanner; uploads documents to computer system; names files appropriately; navigates to correct file location	6	0	Computer, phone, scanner		E	

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A. Job Duty/Function		Rating	D. Equipment or tools used to perform (Describe)	 Non- Essential	Medical Provider Use Only: For each job duty/function, indicate in this column "Can Perform", is "Temporarily Restricted" from performing, or is "Permanently Restricted" from performing.
Actively participates in department advisory groups and teams, such as: safety, process improvement, new program implementation/initiatives; provides input and makes recommendations; responds to requests for information; provides information to co-workers.	7	Ο	Computer, phone	E	
Participates in continuous training to maintain to maintain and enhance knowledge and skills required for this position.	8		Computer	E	

**PART 2: PHYSICAL DEMANDS** 

	Examples of	FREQUENCY RATING	MEDICAL	PROVIDER	USE ONLY:
Activity	Duties/Functions	Never, Occasional;	Can	Temporarily	
1 Citting	Requiring Activity	Frequent, or Constant	Perform	Restricted	Restricted
1 Sitting	1-8	C			
2 Walking	1-8	0			
3 Running	N/A	N			
4 Standing	1-8	0			
5 Bending-Neck	1-8	С			
6 Bending-Waist	1-8	0			
7 Squatting	N/A	N			
8 Climbing	N/A	N			
9 Kneeling	N/A	N			
10 Crawling	N/A	N			
11 Twisting (neck)	1-8	F			
12 Twisting (waist)	1-8	0			
13 Repetitive Hand Use	1-8	F			
14 Simple Grasping-Right Hand	1-8	F			
15 Simple Grasping-Left Hand	1-8	F			
16 Power Grasping-Right Hand	N/A	N			
17 Power Grasping-Left Hand	N/A	N			
18 Fine Manipulation-Right Hand	6	0			
19 Fine Manipulation-Left Hand	6	0			
20 Pushing and Pulling (right hand)	1-8	0			
21 Pushing and Pulling (left hand)	1-8	0			
22 Reaching (above shoulder level)	1-8	0			
23 Reaching (below shoulder level)	1-8	0			
24 Lifting-up to 10 lbs.	1-8	0			
25 Lifting-11-25 lbs.	N/A	N			
26 Lifting-26-50 lbs.	N/A	N			
27 Lifting 51-75 lbs.	N/A	N			
28 Lifting 76-100 lbs.	N/A	N			
29 Lifting 100 + lbs.	N/A	N			
30 Carrying 0-10 lbs.	1-8	0			
31 Carrying 11-25 lbs.	N/A	N			
32 Carrying 26-50 lbs.	N/A	N			
33 Carrying 51-75 lbs.	N/A	N			
34 Carrying 76-100 lbs.	N/A	N			

## **PART 3: SENSORY REQUIREMENTS**

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	Examples of	FREQUENCY RATING	MEDICAL	PROVIDER	USE ONLY
	Duties/Functions	Never, Occasional;	Can	Temporarily	Permanently
Activity	Requiring Activity	Frequent, or Constant	Perform	Restricted	Restricted
1 Functional vision, normal or corrected	1-8	С			
2 Functional color vision, normal or corrected	N/A	N			
3 Functional night vision, normal or corrected	N/A	N			
4 Functional hearing, normal or corrected	1-8	С			
5 A sense of smell or taste	N/A	N			

#### **PART 4: COMPREHENSION LEVEL**

	FREQUENCY RATING	MEDICAL	PROVIDER	USE ONLY
	Never, Occasional;	Can	Temporarily	Permanently
Activity	Frequent, or Constant	Perform	Restricted	Restricted
1 Follow Oral Instructions	F			
2 Follow Written Instructions	F			
3 Required to sustain concentration	F			

## **PART 5: NATURE OF TASKS**

	FREQUENCY RATING	MEDICAL	PROVIDER	USE ONLY
	Never, Occasional;	Can	Temporarily	Permanently
Activity	Frequent, or Constant	Perform	Restricted	Restricted
1 Follow set procedures	F			
2 Organize own work	0			
3 Able to ask questions or request assistance when needed	С			
4 Required to make decisions independently	0			
5 Required to train and/or lead other staff	0			
6 Required to direct other staff (e.g. planning, goal setting,	N			
performance)				

## **PART 6: WORK PACE**

	FREQUENCY RATING	MEDICAL	PROVIDER	USE ONLY
	Never, Occasional;	Can	Temporarily	Permanently
Activity	Frequent, or Constant	Perform	Restricted	Restricted
1 Tightly scheduled and rapid pace of work activities at	F			
high volume				
2 Meet time sensitive deadlines	F			
3 Long and/or irregular hours	N			
4 Limited/unpredictable opportunity for breaks	N			
5 Required to perform on-call or emergency work	N			

## **PART 7: COMPLEXITY/VARIABILITY**

	FREQUENCY RATING	MEDICAL	PROVIDER	USE ONLY
	Never, Occasional;	Can	Temporarily	Permanently
Activity	Frequent, or Constant	Perform	Restricted	Restricted
1 Variable and unpredictable workflow	F			
2 Attention divided by issues requiring multi-tasking	F			
3 Work requires precise attention to detail	F			
4 Use of judgment in routine matters	F			
5 Requires use of judgment in adapting procedures from one	0			
task to another				
6 Possible legal ramifications associated with work activities	F			
or work product				

#### **PART 8: INTERACTIONS WITH OTHERS**

	FREQUENCY RATING	MEDICAL	PROVIDER	USE ONLY
	Never, Occasional;	Can	Temporarily	Permanently
Activity	Frequent, or Constant	Perform	Restricted	Restricted
1 Works with others (e.g., co-workers, other	С			
departments/agencies, public)				
2 Interactions limited to giving/receiving information	F			
3 Interactions exceed giving/receiving information (e.g.,	0			
advises, persuades, justifies)				
4 Interactions occur under circumstances of emotional stress	0			
5 Risk of confrontation with violent or assaultive clients or	N			
customers				

## PART 9: ENVIRONMENTAL FACTORS/WORKING CONDITIONS:

RT 9: ENVIRONMENTAL FACTORS/ WORKING CONDITIONS:	FREQUENCY RATING	MEDICAL	PROVIDER	USE ONLY
	Never, Occasional;	Can	Temporarily	Permanently
Activity	Frequent, or Constant	Perform	Restricted	Restricted
1 Work Inside	С			
2 Work Outside	0			
3 Extreme Heat (above 100 degrees)	N			
4 Extreme Cold (below 32 degrees)	N			
5 Excessive Noise (must raise voice to be heard)	N			
6 Vibration (e.g., jack hammer, hammer drill, chainsaw, etc.)	N			
7 Dust, Vapors, Fumes, Smoke	0			
8 Silica, asbestos, etc.	N			
9 Solvents (e.g., gas, turpentine, etc.)	N			
10 Grease, oils	N			
11 Acidic, Caustic Solutions	N			
12 Pesticides	N			
13 Explosives (e.g., dynamite, bomb, etc.)	N			
14 Cleaning supplies, abrasives	N			
15 Other Chemicals (e.g. drugs and other contraband)	N			
16 Human Blood, Body Tissues, or Fluids	N			
17 Human Wastes	N			
18 Animal Blood, Body Tissues, or Fluids	N			
19 Animal Wastes	N			
20 Biological Toxins (e.g., poison ivy, poison oak, anthrax, etc.)	N			
21 Insect Bites (e.g., ticks, mosquitos, spiders, etc.)	N			
22 Biomedical Waste	N			
23 Ionizing Radiation	N			
24 Non-Ionizing Radiation	N			
25 Electrical Energy	N			
26 Walking on uneven, slippery, or rough surfaces	N			
27 Proximity to moving mechanical parts (e.g., equipment,	N			
machinery)				
28 Proximity to moving vehicles or objects	N			
29 Heights (e.g., rooftop, ladders, scaffolding, etc.)	N			
30 Contact with water, other liquids, humid conditions - not	N			
weather related				
31 Work Below Ground: (e.g., excavation, trench, etc.)	N			
32 Potential exposure to airborne infectious diseases (e.g. clinics,	N			
labs, corrections)				
33 Operates non-commercial motor vehicles (cars, trucks)	N			
34 Operates commercial vehicles – CDL	N			
Class Endorsements	.,			
35 Operates passenger van to transport clients, inmates, etc.	N			
36 Pulls non-commercial trailers or equipment	N			
37 Operates heavy equipment	N			
38 Other:				

## PART 10: MEDICAL SCREENING, SURVEILLANCE AND VACCINATION REQUIREMENTS: Not Applicable

Please check each of the medical screening, surveillance, and vaccination requirements that apply to the position, and indicate if the requirement applies pre-employment/pre-placement only, or whether there are additional requirements after hire.

			Frequency (one time,
Medical Screening, Surveillance or Vaccination	Pre-Hire	Post-Hire	annual, etc.)
1 Audiometric Testing			
2 DOT Commercial Driver Drug and Alcohol Screening			
3 DOT Commercial Driver Physical Exam			
4 Respirator Physical Exam			
5 Respirator Questionnaire – Short			
6 Respirator Questionnaire – Standard			
7 Blood lead level			
8 Hazardous Waste/Emergency Worker physical			
9 Heavy metal screen (mercury, lead, arsenic)			
10 HINT Hearing Noise Sensitivity Testing			
11 Tuberculosis skin test			
12 Vaccine: MMR			
13 Vaccine: Hepatitis B			
14 Vaccine: Influenza			
15 Vaccine: Meningococcal			
16 Vaccine: Pneumococcal			
17 Vaccine: Rabies			
18 Vaccine: Rabies Titer			
19 Vaccine: Tdap			
20 Vaccine: Chickenpox			

PART 11: ADDITIONAL INFORMATION, PICTURES, ETC.

#### **PART 12 – FORM REVIEW AND SIGNATURES**

# SUPERVISOR/SECTION MANAGER Name:\_\_\_\_\_\_ Title: \_\_\_\_\_ Signature:\_\_\_\_\_ Date:\_\_\_\_\_ **HUMAN RESOURCES RECRUITMENT AND CLASSIFICATION** Name: Title: Signature: Date: **HUMAN RESOURCES SAFETY UNIT** Name:\_\_\_\_\_\_\_Title: \_\_\_\_\_\_ Signature:\_\_\_\_\_ Date: \_\_\_\_\_ **HUMAN RESOURCES DISABILITY MANAGEMENT** Name:\_\_\_\_\_\_\_Title: \_\_\_\_\_\_ Signature:\_\_\_\_\_ Date: \_\_\_\_\_ PART 13 - MEDICAL PROVIDER REVIEW AND COMMENTS Employee Name: \_\_\_\_\_\_Date of Evaluation: \_\_\_\_\_ COMMENTS:

Provider Signature:\_\_\_\_\_\_Date:\_\_\_\_\_