COUNTY OF SONOMA - JOB DEMANDS ANALYSIS

JOB CLASSIFICATION: Supervising Planner.

DEPARTMENT: Permit Sonoma

PHYSICAL DEMAND STRENGTH RATING: Sedentary

DATE COMPLETED: March 2020

DIVISION: Planning

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 | | | D. Equipment or | | | Medical Provider Use Only: For |
|--|------|---|--------------------|-------------------------|---|---|
| | Duty | _ | tools used to | | | 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. | | | | i | | • |
| Directly supervises staff engaged in conducting work assignments: | 1 | F | Computer, Phone | | | *************************************** |
| plans, organizes, and assigns work; orients and trains staff; | | | | | | |
| monitors and facilitates staff required continuing education | | | | | | |
| requirements and other training; evaluates, reviews, and | | | | İ | | |
| monitors activity of staff, both formally and informally, in writing | | | | | | |
| and in person; takes appropriate disciplinary action in conjunction | | | | | | |
| with Human Resources staff; participates in hiring interviews and | | | | | | |
| decisions; utilizes appropriate discretion in matters of employee | | | | | | |
| relations, EEO, and ADA circumstances. | | | | | | |

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| A Joh Duty // Constant | D lob | C Free | O Faulament co | C Considered | F F | hardrad Sandalana |
|---|-------|--------|--------------------|-------------------------|-----|----------------------------------|
| A. Job Duty/Function | | | D. Equipment or | | | Medical Provider Use Only: For |
| | Duty | | tools used to | | | 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. |
| Uses good judgment and discretion while directing, performing, | 2 | c i | Computer, Phone | | | |
| or assisting staff in the review and evaluation of new | | | | | | |
| development proposals, applications, and land use issues; ensures | i | | | | | |
| compliance with applicable federal, state, and local laws and | | | | | | |
| regulations; recommends policy updates; analyzes, researches, | | | | | | |
| understands and interprets applicable codes; reviews reports, | | | | | | |
| engineered construction and site development plans and related | 1 | | | | | |
| technical documents; evaluates environmental impacts and | | | | | | |
| recommends mitigation measures; ensures compliance with | | | | | | |
| applicable federal, state, and County codes, regulations, and local | | | | | | |
| ordinances, adopted County Plans and policies, and County | i | | | İ | | |
| design guidelines. | | | | | | |
| , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 3 | F | Computer, Phone | | | |
| identifies opportunities for process improvements; plans, | | | | | | |
| organizes, and directs new initiatives; gathers and analyzes data; | | | | | | |
| establishes and monitors priorities; researches, evaluates, and | | | l | | | |
| recommends potential solutions, both orally and in writing; | | | | | | |
| follows direction Division Manager in implementing new policies | | | | | | |
| and goals; ensures program activities are conducted in | | | | | | |
| accordance with departmental and County policies and | | 1 | | i | | |
| procedures, and with applicable federal and state laws | | | | | | |
| | 4 | F | Computer, Phone | | | |
| owners, fellow regulatory staff/agencies, and the general public, | | | | | | |
| in person, by phone, and email; explains complex codes, policies, | | | | | | |
| and procedures; advises applicants on materials, process and | | | | | | |
| timelines; answers questions regarding project progress requests | | | | | | |
| Information; responds to general questions related to county and | | | | | | |
| state construction codes; occasionally works in adversarial | | - 1 | | | | |
| situations, and in a heavy volume and fast paced environment. | | | | | | |
| Reviews, edits, and prepares complex written documents; | 5 | F (| Computer | | | |
| determines approval or denial of project; specifies any conditions | | | | | | |
| of approval; prepares charts, data visualizations, and supporting | | j | | | | |
| documentation; ensures all documents are complete; issues | | | : | | | |
| permits. | | | | | | |

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| A. Job Duty/Function | | | D. Equipment or | E. Specialized | | 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 |
| | | ı | | | | performing, or is "Permanently |
| | | | | | | Restricted" from performing. |
| Represents the County and speaks before public bodies, | 6 | 0 | Computer | | | |
| organizations, committees, and the public on matters pertaining | | | | | | |
| to department projects, programs, and activities; works in | | i | | | | |
| collaboration with other agencies and departments as community | 4 | | | | | |
| liaison on public and private projects and policy initiatives; | | | | | | |
| prepares and presents instructional presentations to groups; | | | | | | |
| conducts outreach; creates educational materials. | ļ | | | | | |
| Conducts field reviews of projects to ensure adherence to | 7 | o | Vehicle, Camera | CA Driver's License | E | |
| approved project /design plans; evaluates and verifies project | | | | | | |
| impacts on environment; posts notices; determines appropriate | l | l | | | | |
| location based on standards; reaches above and below shoulder | | | | | | |
| to attach notices, using tape and stapler; takes photographs; | | | | | | |
| walks over uneven, steep and slippery terrain; drives to various | | | | | | |
| sites. | 1 | | | | | |
| Actively participates in department advisory groups and teams, | 8 | 0 | Computer, Phone | | E | |
| such as: safety, process Improvement, new program | | | | | | |
| implementation/Initiatives; provides input and makes | | | | | | |
| recommendations; responds to requests for information; | | | | | | |
| provides information to staff and co-workers. | | | | İ | | |
| Participates in continuing education to maintain and enhance | 9 | 0 | Computer | | E | |
| knowledge and skills as necessary. | | | | ļ [| • | |
| | 10 | 0 | Hand cart | | Ē | |
| 15 pounds, from storage areas; carries files and plans; places files | | | | | | |
| and rolled plans in rolling cart; pushes cart; reaches above and | | | | | | |
| below shoulder level to access documents; reaches forward, | | l | | | | |
| above shoulders, and below waist to retrieve and place paper files | | | | | | |
| on hand trucks, shelves and file cabinet drawers. | | ' I | | j | | |
| Performs office support work such as filing, copying, billing, | 11 | 0 | Computer, Files | | E | |
| receipting, file research, and file prep. | | [| | | | |

PART 2: PHYSICAL DEMANDS

| Activity | Examples of Dutles/Functions Requiring Activity | FREQUENCY RATING Never, Occasional; Frequent, or Constant | MEDICAL Can Perform | PROVIDER Temporarily Restricted | USE ONLY: Permanently Restricted |
|--|---|---|---------------------------|---------------------------------------|--|
| 1 Sitting | 1-9,11 | С | | T | |
| 2 Walking | 1-11 | F | | <u> </u> | |
| 3 Running | N/A | N | | | |
| 4 Standing | 1-11 | 0 | <u> </u> | | |
| 5 Bending-Neck | 1-11 | С | | | |
| 6 Bending-Waist | 1-11 | 0 | | | |
| 7 Squatting - pulling files | 10 | 0 | | | |
| 8 Climbing – pulling files, performing field work | 7,10 | 0 | | | |
| 9 Kneeling - pulling files | 10 | 0 | | | |
| 10 Crawling | N/A | N | | | |
| 11 Twisting (neck) | 1-11 | F | | | |
| 12 Twisting (waist) | 1-11 | 0 | | | |
| 13 Repetitive Hand Use | 1-6,8,9,11 | F | | | |
| 14 Simple Grasping-Right Hand | 1-11 | 0 | | | |
| 15 Simple Grasping-Left Hand | 1-11 | 0 | | | |
| 16 Power Grasping-Right Hand | N/A | N | | | |
| 17 Power Grasping-Left Hand | N/A | N | | | |
| 18 Fine Manipulation-Right Hand | 1-11 | 0 | | | |
| 19 Fine Manipulation-Left Hand | 1-11 | 0 | | | |
| 20 Pushing and Pulling (right hand) – carts, doors, drawers | 1-11 | 0 | | | |
| 21 Pushing and Pulling (left hand) - carts, doors, drawers | 1-11 | 0 | | | |
| 22 Reaching (above shoulder level) - carts, doors, drawers | 1-11 | 0 | | | |
| 23 Reaching (below shoulder level) – pulling files, lifting binders | 1-11 | 0 | | | |
| 24 Lifting-up to 10 lbs files, plans, binders | 1-11 | 0 | | | |
| 25 Lifting-11-25 lbs. – rolled plans | 10 | 0 | | | |
| 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. – files, plans, binders | 1-11 | 0 | | | |
| 31 Carrying 11-25 lbs. – rolled plans | 10 | 0 | | | |
| 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

| | 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 | 1-11 | С | | | |
| 2 Functional color vision, normal or corrected — reviewing development plans | 2 | F | | | |
| 3 Functional night vision, normal or corrected | 6 | 0 | | | |
| 4 Functional hearing, normal or corrected | 1-11 | F | | | |
| 5 A sense of smell or taste | N/A | N | | | |

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

PART 6: WORK PACE

| Activity | FREQUENCY RATING Never, Occasional; Frequent, or Constant | Can | PROVIDER Temporarily Restricted | USE ONLY Permanently Restricted |
|--|---|-----|---------------------------------|---------------------------------------|
| 1 Tightly scheduled and rapid pace of work activities at high volume | F | | | |
| 2 Meet time sensitive deadlines | F | | | |
| 3 Long and/or irregular hours | 0 | | | |
| 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 | F | | | |
| task to another | | | | |
| 6 Possible legal ramifications associated with work activities | С | | | |
| 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 | 0 | | | |
| 3 Interactions exceed giving/receiving information (e.g., | F | | | |
| advises, persuades, justifies) | | | | |
| 4 Interactions occur under circumstances of emotional stress | F | | | |
| 5 Risk of confrontation with violent or assaultive clients or | N | | | |
| customers | | | | |

PART 9: ENVIRONMENTAL FACTORS/WORKING CONDITIONS:

| - | FREQUENCY RATING | MEDICAL | PROVIDER | USE ONLY |
|--|---|----------------|--|---------------------------|
| Activity | Never, Occasional; Frequent, or Constant | Can Perform | Temporarily Restricted | Permanently Restricted |
| 1 Work Inside | C | 7 07707111 | 71000110100 | - Noorieted |
| 2 Work Outside | 0 | | | |
| 3 Extreme Heat (above 100 degrees) | 0 | | | |
| 4 Extreme Cold (below 32 degrees) | 0 | | | |
| 5 Excessive Noise (must raise voice to be heard) | N | | | |
| 6 Vibration (e.g., jack hammer, hammer drill, chainsaw, etc.) | N | | <u> </u> | |
| 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 – performing emergency | N | | | |
| assessments during flood conditions | '' | | | |
| 17 Human Wastes – performing emergency assessments during | N | | | |
| flood conditions | | | | |
| 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 i | | | |
| 22 Biomedical Waste | N N | | | |
| 23 Ionizing Radiation | N | | | |
| 24 Non-Ionizing Radiation | N | | , | |
| 25 Electrical Energy | N | | | |
| 26 Walking on uneven, slippery, or rough surfaces | 0 | | | |
| 27 Proximity to moving mechanical parts (e.g., equipment, | 0 | | | |
| machinery)- – construction sites, processing facilities | | | | |
| 28 Proximity to moving vehicles or objects – construction sites, | 0 | ····· | | |
| processing facilities | | | | |
| 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) | 0 | | | |
| 34 Operates commercial vehicles – CDL | N | | | |
| ClassEndorsements |) | | | |
| 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.

| Medical Screening, Surveillance or Vaccination | Pre-Hire | Post-Hire | Frequency (one time, 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.