Child Care Staff
Pay Equity Program

Job Analysis Questionnaire
Introduction

This Job Analysis Questionnaire is intended to collect information towards the pursuit of achieving pay equity for Child Care Staff who work in New Brunswick Government approved child day care facilities.

The information you provide will not be used to assess your individual performance or your workload. The information will be analyzed only for the purpose of the pay equity program. All information gathered will establish the value of the job, to determine if any pay inequity exists in the Child Day Care sector.

While at work, you perform a set of duties that:
- require skills,
- involve various types of responsibilities,
- require efforts (physical and intellectual), and
- require you to operate under certain working conditions.

EMPLOYEE – STEPS TO FOLLOW:

1. Please read the Job Analysis Questionnaire carefully, and complete each section using a pen. (Please print) If you find that some questions do not relate to your job, please write in "not applicable" N/A.
2. The information you provide should relate to the job as it is presently.
3. In completing each section be as specific and concise as you can.
4. Once you have completed the Job Analysis Questionnaire, please complete the signature section and then forward it to your immediate supervisor for review.

IMMEDIATE SUPERVISOR – STEPS TO FOLLOW (IF APPLICABLE):

1. Please review all sections of the completed questionnaire thoroughly and add any additional information or comments in the immediate supervisor's section.
2. DO NOT CHANGE EMPLOYEE’S RESPONSES.

Once your immediate supervisor has signed off on the Job Analysis Questionnaire, please keep a copy and send the original to the Women’s Issues Branch using the enclosed envelope.

If you require assistance, please call our toll free number 1-888-576-4444 or email nbwagegap@gnb.ca.
Please complete the following information:

**Region:**
- Moncton
- Saint John
- Fredericton
- Edmundston
- Restigouche
- Chaleur
- Miramichi
- Acadian Peninsula

**Child Care Staff Job Title:**
- Primary Child Care Staff
  - Lead Educator
  - Assistant Educator
- Child Care Administrator/Primary Child Care Staff
- Support Worker
- Other (please specify) _____________________________

**Language of Work:**
- English
- French
- Both

**Child Day Care Facility Size:**
- 0-20 spaces
- 20-40 spaces
- 40-60 spaces

**Type of Child Day Care Facility:**
- For-profit
- Not-for-profit

**Location of Work:**
- Urban (City or town)
- Rural (Outside city or town)
**Description of Key Work Activities:**

The following section lists key work activities that are performed in a child day care facility. Please identify by placing a checkmark in the appropriate boxes, the activities that apply to your job:

**Direct Child Care**

- ☐ Guide or assist children with everyday living activities; diet, infant feeding, hygiene, dress, and personal care, by fostering autonomy and healthy habits
- ☐ Encourage and support children to participate in daily routines and activities
- ☐ Create and maintain an environment that protects the health and physical safety of children
- ☐ Supervise children according to their developmental level, to ensure their safety (i.e. taking attendance, head counts, First-Aid kit, emergency records, etc.)
- ☐ Recognize, document, and report signs of neglect and/or physical, emotional or sexual abuse
- ☐ Maintain an environment that conveys a sense of calm, order, consistency and continuity without being overly regimented
- ☐ Administer and record medication as per parental consent and physician instructions
- ☐ Monitor children who have chronic medical conditions and/or allergies that require special precautions or care and to ensure that such precautions are taken and/or the required care is provided (i.e. EpiPens, insulin, etc.)
- ☐ Develop and maintain a warm, comforting, caring and responsive relationship with each child and with the group of children
- ☐ Provide positive child guidance (i.e. behavior management, active listening, interacting, reorientation, positive reinforcement, etc.)
- ☐ Recognize and record signs and symptoms of emotional/developmental delays or challenges (i.e. speech delays, potential vision and/or hearing impairments, and motor skills)
- ☐ Complete a wide range of required paperwork (i.e. children’s learning, daily logs, attendance records, management of illnesses, incident reports, administration of medication, etc.)
- ☐ Arrange rooms and furniture for daily activities, meal and rest periods
Food and Nutrition

☐ Planning menus that take into account the children’s ages, recommended serving sizes and nutritional needs according to Canada's Food Guide, cultural and religious practices, and any allergies and/or medical conditions a child might have (i.e. tube feeding)

☐ Prepare nutritious, appealing and balanced meals

☐ Prepare nutritious, appealing and balanced snacks

Program Planning

☐ Plan daily experiences and activities that support and encourage each child’s physical, emotional, social, communicative, cognitive, ethical and creative development (i.e. reading, music, art, physical activities, outings)

☐ Prepare daily experiences and activities that support and promote each child's physical, emotional, social, communication, cognitive, ethical and creative development (i.e. reading, music, art, physical activities, outings)

☐ Observe and record children’s interests, passions and strengths to guide the planning process

☐ Adapt daily experiences and activities to support the individualized intervention plan for children with special needs

☐ Create an environment that provides a variety of opportunities for play and exploration, problem solving, creativity, and interaction

Facility Maintenance

Check all those that apply to your work environment:

☐ Perform daily cleaning and maintenance tasks
  o Dishes, utensils and food preparation area
  o Equipment and working area
  o Sweep and clean floors; vacuuming
  o Wash and disinfect toilets, wash basins, etc.
  o Fill containers and dispensers
  o Empty and take out garbage and recycling boxes
Check all those that apply to your work environment:

☐ Perform weekly cleaning and maintenance tasks
  - Disinfect and store toys and materials
  - Washing bedding
  - Cleaning lockers

☐ Perform monthly cleaning and maintenance tasks
  - Indoor and outdoor maintenance checklists

☐ Identify when furnishings, toys, equipment or vehicles are unsafe or in need of repair and to take appropriate action

☐ Outdoor and seasonal chores
  - Raking
  - Shoveling
  - Mowing the lawn
  - Painting
  - Ground maintenance

☐ Identify potential or actual health hazards in a child day care setting

☐ Implement and maintain effective procedures and protocols for completing fire and emergency exit drills and handling emergency situations, for example, an injury.

Relationship with Parents

☐ Establish and maintain an open and cooperative relationship with each child’s family

☐ Make suggestions concerning observations of children’s developmental or behavioral issues

Administration

☐ Ensure that policies, standards and regulations are adhered to

☐ Develop, implement and revise, as needed, facility/operational policies and guidelines

☐ Human resource management (i.e. job evaluation, disciplinary action, guidance and support, recruitment)

☐ Financial management (i.e. budgeting, revenues and expenditures, purchasing, payroll)
☐ Conduct staff meetings

☐ Monitor implementation of programs and curriculum

☐ Record(s) management (i.e. personnel files, child files)

☐ Daily management (i.e. parent complaints, staff complaints, staff:child ratios, replacements)

☐ Crisis management (i.e. power outages, communicable diseases, floods, fires, serious illnesses and/or injuries)

Please specify any other key work activities that you may perform:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Required Qualifications

Education

What is the level of education or formal training required?

Please note that this question is not referring to the education that you have, but what is required for the job.

(Please check one box only.)

☐ Less than High School

☐ Less than High School with related training

☐ High School or equivalent

☐ High School or equivalent with related training

☐ High School plus one-year post-secondary program (i.e. Certificate)

☐ High School plus two-year post-secondary program (i.e. Diploma)

☐ Undergraduate Degree in related field

Other courses/training required, please specify:

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
Experience

What do you think is the **minimum** amount of experience required for a new person to acquire the skills needed to carry out the requirements of this job? Please do not include the practicum component of an educational program.

(Experience may be acquired in any related work or in any pertinent life experience.)

- ☐ Less than 3 months.
- ☐ From 3 months to less than 6 months.
- ☐ From 6 months to less than 12 months.
- ☐ From one (1) year to less than two (2) years.
- ☐ From two (2) years to less than three (3) years.
- ☐ From three (3) years to less than five (5) years.
- ☐ Five (5) years or more.
Dexterity and Coordination

Does your work require accurate hand/eye or hand/foot coordination? This can be:

- **Fine motor skills**: using small muscles, i.e. keyboard/writing skills, dressing children, repairing small toys/equipment, dispensing oral medications, assembling objects, changing diapers, picking up small objects

- **Gross motor skills**: using large muscles, i.e. using long-handled tools such as mops and brooms, stocking shelves, folding laundry, sorting mail, playing ball, lifting/carrying children, climbing/bending, running

Using the chart below:

- Please provide examples of activities that require dexterity and coordination, that are applicable to your job.
- Please check off fine motor skills and/or gross motor skills where they apply.
- Place a checkmark in the chart below indicating the frequency of the activity.

**Frequency Table:**
- **Occasional** – Once in a while, when necessary
- **Frequent** – Several times a day or at least five days per week

<table>
<thead>
<tr>
<th>ACTIVITY EXAMPLES (please specify equipment where applicable)</th>
<th>DEXTERITY/COORDINATION</th>
<th>FREQUENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Fine</td>
<td>Gross</td>
</tr>
<tr>
<td></td>
<td>☐</td>
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</tr>
</tbody>
</table>
Is **speed** a factor when performing the activities of your job?

Yes ☐  No ☐

If yes, please provide detailed examples:

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Responsibilities

Accountability / Decision Making

For each situation, please indicate the response that most appropriately describes your job.

<table>
<thead>
<tr>
<th>When there is a situation you have not come across before, do you (check all responses that apply)</th>
<th>Never</th>
<th>Sometimes</th>
<th>Often</th>
<th>Most of the time</th>
<th>Not applicable (N/A)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ask your immediate supervisor what to do</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Ask co-workers for help in deciding what to do</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Read manuals and figure out what to do</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Decide with your immediate supervisor what to do</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Check guidelines and past practices</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Decide what to do based on your related experience</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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</tr>
</tbody>
</table>

To what extent is the decision making of this job guided by others (check all responses that apply and provide examples)

<table>
<thead>
<tr>
<th>Immediate supervisor</th>
<th>Never</th>
<th>Sometimes</th>
<th>Often</th>
<th>Most of the time</th>
<th>Not applicable (N/A)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example__________________________________________</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Co-workers</th>
<th>Never</th>
<th>Sometimes</th>
<th>Often</th>
<th>Most of the time</th>
<th>Not applicable (N/A)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example__________________________________________</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Health and Other Professionals (i.e. Extramural, Social Workers)</th>
<th>Never</th>
<th>Sometimes</th>
<th>Often</th>
<th>Most of the time</th>
<th>Not applicable (N/A)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example__________________________________________</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other, please specify:</th>
<th>Never</th>
<th>Sometimes</th>
<th>Often</th>
<th>Most of the time</th>
<th>Not applicable (N/A)</th>
</tr>
</thead>
<tbody>
<tr>
<td>________________________________________________</td>
<td>☐</td>
<td>☐</td>
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<td>☐</td>
</tr>
</tbody>
</table>
Communication / Interpersonal Relations

Referring to the table below please specify the level of Communication/Interpersonal Relations required in performing your job. (Consider verbal or written communications or sign language)

<table>
<thead>
<tr>
<th>Level of communication</th>
<th>CHECK OFF ALL THAT APPLY (more than one, if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. No Exchange.</strong></td>
<td>A B C D E F</td>
</tr>
<tr>
<td><strong>B. Exchanging</strong> factual or work-related information.</td>
<td></td>
</tr>
<tr>
<td><strong>C. Explanation and interpretation</strong> of information or ideas.</td>
<td></td>
</tr>
<tr>
<td><strong>D. Discussions</strong> of problems with a view of obtaining consent, cooperation and/or coordination of activities.</td>
<td></td>
</tr>
<tr>
<td><strong>E. Collaborating and advising:</strong> Collaborating with individuals in order to guide them by drawing on one’s professional experience and specialized knowledge.</td>
<td></td>
</tr>
<tr>
<td><strong>F. Persuading and negotiating:</strong> Presenting arguments to convince people to take certain measures or make decisions for the purpose of coming to an agreement or a solution.</td>
<td></td>
</tr>
</tbody>
</table>

**CONTACT**

- Co-workers
- Students
- Supervisors
- Children
- Parents/Guardians
- Suppliers
- Community (i.e. Schools, Municipality, Early Intervention)
- Early Childhood Services Coordinator
- Health and Other Professionals (i.e. Extramural, Social Workers, etc.)
- Administration (Board of Directors)
- Inspectors (i.e. Public Health, Fire Prevention)
- Emergency Personnel (Police, Fire Department and Ambulance)
- Others (please specify):
**Supervision**

Do your job duties involve one or more of the following activities on a regular basis? If so, please provide an example.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide orientation to others</td>
<td></td>
</tr>
<tr>
<td>Provide advice to others on how to carry out job duties</td>
<td></td>
</tr>
<tr>
<td>Assign and/or check work of others</td>
<td></td>
</tr>
<tr>
<td>Supervise a work group</td>
<td></td>
</tr>
<tr>
<td>Coach/mentor work of others</td>
<td></td>
</tr>
<tr>
<td>Ensure that work complies with standards and procedures</td>
<td></td>
</tr>
<tr>
<td>Schedule staff/coordinate replacements</td>
<td></td>
</tr>
<tr>
<td>Evaluate staff performance</td>
<td></td>
</tr>
<tr>
<td>Establish staff’s workplan</td>
<td></td>
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<tr>
<td>Responsible for taking disciplinary measures</td>
<td></td>
</tr>
</tbody>
</table>

Which statement best describes your responsibility for supervising the work of others?

- [ ] No responsibility for supervision of other staff
- [ ] Supervise other staff who do essentially the same work
- [ ] Supervise other staff who hold different positions within the same area of activity
- [ ] Other, please specify: ________________________________

How many employees do you supervise? ________________
Required Effort

Intellectual Effort

Please check **one** statement that best describes your job. You must consider the amount of judgment and thought required to do your job, as well as the complexity of the duties. Also consider whether procedures and standards are available to guide you in making decisions.

- Job duties are very routine with little or no choice as to the procedures used in achieving results

- Job duties are semi-routine with few choices as to what procedures should be followed. Requires some judgment in making minor decisions.

- Job duties are somewhat complex with some choices as to what procedures should be followed. Requires a moderate level of judgment in selecting appropriate procedures and standards.

- Job duties are complex with several choices as to what procedures should be followed. Requires the use of considerable judgment in adapting procedures and standards to fit facts and conditions.

- Job duties are difficult and complex. Requires a high level of judgment where answers and solutions can only be found after careful thought and analysis.
Please provide examples to support/describe the choice made on the previous page:

Example 1
_________________________________________________________________________________________________
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Example 2
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Example 3
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What is the most difficult aspect of your job?
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
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_________________________________________________________________________________________________
Concentration and Sensory Attention

Referring to the table below, please indicate the activities which you perform in your job that requires concentration and sensory attention (seeing, tasting, smelling, touching, hearing).

For each activity that pertains to your job, place a checkmark in the chart below indicating the duration and frequency.

- **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 – Once in a while, most days
  - Frequent – Several times a day
  - Almost Continuous – Most working hours

<table>
<thead>
<tr>
<th>ACTIVITIES REQUIRING CONCENTRATION &amp; SENSORY ATTENTION</th>
<th>DURATION (cumulative)</th>
<th>FREQUENCY</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Up to and including 1 hr</td>
<td>Over 1 hr up to 2 hrs</td>
<td>More than 2 hrs</td>
</tr>
<tr>
<td>Preparation of written/electronic materials</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Dealing with requests for attention i.e. children</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Driving</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Concentration on precise work</td>
<td>□</td>
<td>□</td>
<td>□</td>
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<tr>
<td>Report writing</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Making presentations</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Facilitating/guiding</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Interviewing</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Observing children</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Observing staff</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Data entry</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Constant supervision</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Active listening/interpretation</td>
<td>□</td>
<td>□</td>
<td>□</td>
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<tr>
<td>Reading</td>
<td>□</td>
<td>□</td>
<td>□</td>
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<tr>
<td>Meal and snack preparation</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Meal and snack distribution</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Oral communication</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Answering the telephone</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Other (please specify):</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>
Concentration and Sensory Attention

In performing your job duties, please provide examples where you perform **two or more activities at once** (i.e. keyboarding and answering the telephone; listening and reading, observing and speaking, observing and writing) and/or where your attention must be shifted from one job duty to another.

Example 1:

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Example 2:

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Example 3:

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Physical Effort

For each physical activity that pertains to your job, please specify the frequency, and corresponding duration using the levels indicated below. Also, for each physical activity selected, please specify the working situation.

Frequency Level
- **Occasionally**: 2-3 times per week
- **Frequently**: Everyday

**Duration Level** = Cumulative time for each physical activity

<table>
<thead>
<tr>
<th>Physical Activity</th>
<th>Frequency</th>
<th>Duration (cumulative)</th>
<th>Working Situations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Occasional</td>
<td>Frequent</td>
<td>Up to &amp; including 1 hr</td>
</tr>
<tr>
<td>Lifting, pushing, pulling, holding or moving light weights/objects (less than 10kg/22lbs)</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
<tr>
<td>Lifting, pushing, pulling, holding or moving medium weights/objects (from 10kg/22lbs up to 25kg/55lbs)</td>
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<td>☑</td>
<td>☐</td>
</tr>
<tr>
<td>Lifting, pushing, pulling, holding or moving heavy weights/objects (more than 25kg/55lbs)</td>
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<td>☑</td>
<td>☐</td>
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<tr>
<td>Climbing, running, jumping</td>
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<td>☑</td>
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<tr>
<td>Bending over, hunching, squatting, kneeling, climbing over, crawling, reaching, etc.</td>
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<td>☑</td>
<td>☑</td>
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<tr>
<td>Working while seated (can get up from time to time)</td>
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<td>☑</td>
<td>☑</td>
</tr>
<tr>
<td>Working while standing (including walking)</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
<tr>
<td>Performing repetitive motions</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
<tr>
<td>Maintaining one position</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
<tr>
<td>Bringing a person who is agitated or experiencing a crisis under control</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
<tr>
<td>Working in confined spaces and/or awkward positions</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
<tr>
<td>Mopping/sweeping</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
<tr>
<td>Other</td>
<td>☐</td>
<td>☑</td>
<td>☑</td>
</tr>
</tbody>
</table>
## Working Conditions

Please check the Unpleasant or Hazardous Environmental Conditions that you are exposed to and specify the frequency using the table below.

**Frequency table:**
- 1 – Rare (Condition seldom occurs)
- 2 – Sometimes (Condition occurs weekly, monthly, etc)
- 3 – Often (Condition occurs several times daily)
- 4 – Continuous (Condition occurs almost all of the time)
- N/A – Not applicable

<table>
<thead>
<tr>
<th></th>
<th>Unpleasant or Hazardous Environmental Conditions</th>
<th>Frequency (1, 2, 3 or 4) or N/A</th>
</tr>
</thead>
</table>
| ✓ | Noisy environment  
Noise level such as that in a daycare, cafeteria, or common open air space with or without dividers. |  |
| ✓ | Repulsive matter and odors  
Vomit, waste matter, blood, etc. |  |
| ✓ | Confidentiality of information  
Stress caused by the confidential nature of information. |  |
| ✓ | Time constraints  
Tight, numerous, simultaneous, peak period, unforeseen deadlines. |  |
| ✓ | Unpleasant or demanding verbal interactions  
Interactions that are difficult, conflictual, hostile that require patience, comfort, tact, diplomacy. |  |
| ✓ | Situations involving violent physical interactions  
Blows, bites, kicks, spits etc. |  |
| ✓ | Unpredictable schedule and tasks  
Multiple unpredictable tasks and hours of work. |  |
| ✓ | Dust, vapours, and chemical odors  
Requires ventilation or wearing of protective equipment or a protective apparatus. |  |
| ✓ | Hazardous materials, contaminants, contagious tissues  
Close contact with, near work, or handled, such as cleaning products, blood, etc. |  |
## Working Conditions

**Frequency table:**
1. Rare (Condition seldom occurs)
2. Sometimes (Condition occurs weekly, monthly, etc)
3. Often (Condition occurs several times daily)
4. Continuous (Condition occurs almost all of the time)
N/A – Not applicable

<table>
<thead>
<tr>
<th>✓</th>
<th>Unpleasant or Hazardous Environmental Conditions</th>
<th>Frequency (1, 2, 3 or 4) or N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Significant temperature variations or bad weather</strong>&lt;br&gt;Going from warm inside to cold outside.</td>
<td></td>
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<tr>
<td></td>
<td><strong>High or low temperatures</strong>&lt;br&gt;Which make the situation uncomfortable or unpleasant.</td>
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<tr>
<td></td>
<td><strong>Difficult visual conditions (lighting, darkness, glare)</strong>&lt;br&gt;Which strain the eyes.</td>
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<td></td>
<td><strong>Driving motor vehicles</strong>&lt;br&gt;Exposure to traffic, accidents.</td>
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<tr>
<td></td>
<td><strong>Confined areas</strong>&lt;br&gt;Where air circulation makes it difficult to be there a long time.</td>
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<tr>
<td></td>
<td><strong>Limited space</strong>&lt;br&gt;Which restricts actions/motions.</td>
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<tr>
<td></td>
<td><strong>Dirt, grease</strong>&lt;br&gt;On skin or clothing.</td>
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<tr>
<td></td>
<td><strong>Shift work</strong></td>
<td></td>
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<tr>
<td></td>
<td><strong>On-call</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Other (specify):</strong></td>
<td></td>
</tr>
</tbody>
</table>
Immediate Supervisor’s Comments (IF APPLICABLE)

Please review all sections of the completed questionnaire thoroughly. It is important that the information provided serve as a fair representation of the job data.

DO NOT CHANGE EMPLOYEE’S RESPONSES.

Please add any additional information or comments and reference the specific section and question as appropriate.

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Name: ____________________________
Signature: ____________________________
Date: ____________________________

PLEASE RETURN JOB ANALYSIS QUESTIONNAIRE TO EMPLOYEE
Respondent Identification

Respondent’s Name (First and Last): _______________________________________

I hereby confirm that the information I have supplied in this questionnaire accurately reflects my job to the best of my knowledge.

____________________________    ________________________________________
Date           Respondent’s signature

Note

We may have to contact you to get further information on your job. Please indicate:

Phone number (work): _______________________________________
Fax number: _______________________________________
E-mail address: _______________________________________

This identification sheet will be detached from the questionnaire prior to evaluation.

**Please mail Job Analysis Questionnaire to:

Women's Issues Branch
Executive Council Office
P.O. Box 6000, 551 King Street
Fredericton, NB
E3B 5H1