

TO: Honorable Mayor and City Council

FROM: City Administrator Ron Johnson

SUBJECT: Approve Classification and Compensation Study Proposal

DATE: August 25, 2015

BACKGROUND

At the last regular meeting, Ann Antonsen, Springsted Inc., presented Council with the completed compensation market survey.

Council was informed of several inadequacies/issues with the city's current compensation system- primarily that the system utilizes the State Job Match, a pay system that was created in the 1980's and is often difficult to apply in municipalities.

The scope of the study was limited to conducting a market survey only, and did not include an overall revision/update of position descriptions or work flow analysis or review of internal relationships.

Upon completion of the study, Springsted recommended that the City implement a compensation study (to review internal relationships) and develop a new compensation plan that is internally equitable and competitive with the market.

Ms. Antonsen was asked to prepare a proposal to conduct a full classification and compensation system for Council's consideration at their September 1, 2015 regular meeting. The proposal is attached.

Springsted is proposing to utilize a SAFE Systematic Analysis and Factor System (SAFE) a unique job system designed to measure job factors that apply specifically to local government.

REQUESTED COUNCIL ACTION

Approve a motion accepting the Springsted proposal to conduct a classification and compensation study for \$13,600 plus up to \$1,000 expenses.

Attachment(s): Proposal and Position Analysis Questionnaire



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LETTER OF TRANSMITTAL

August 24, 2015

Mr. Ron Johnson
City Administrator
City of Cannon Falls
918 River Road
Cannon Falls, MN 55009

Re: Proposal to Conduct a Classification and Compensation Study

Dear Mr. Johnson:

Springsted Incorporated is pleased to submit our work plan to conduct a classification and compensation study for the City of Cannon Falls.

Our firm has assisted numerous jurisdictions in the Midwest and throughout the United States in addressing their classification, compensation and human resources issues, and in performing specialized management studies. We have created an extensive management consulting services practice that provides in-depth study and analysis on a variety of topics. Springsted has the staff, facilities and expertise in assisting and advising local governments on critical and important human resources issues. Our vast experience in the areas of human resources administration will be an advantage to your organization.

We look forward to working with the City of Cannon Falls and its employees on this important project.

Respectfully submitted,

Ann S. Antonsen

Ann S. Antonsen, Vice President
Consultant

Work Plan

Classification and Compensation Study

Springsted will assist the City in developing a classification and compensation system which meets the goals established by the City and that can be maintained by the City. The system Springsted will develop will:

- Establish fair and equitable compensation relationships between positions within the City
- Reflect relevant market conditions outside the organization
- Apply to all City positions professionally, consistently and objectively
- Include employee input and participation as an integral part of the study process
- Provide a strategic plan for implementation and provide for ongoing maintenance in accordance with best practices
- Comply with the State of Minnesota Local Government Pay Equity Act

Project Initiation. The Springsted Project Director will meet with the City's designated project manager and/or team for this project, and other appropriate personnel to establish working relationships and to finalize a comprehensive work plan and timetable. At this meeting, we will request that the project manager provide us with the background materials necessary to conduct this study, including current job descriptions, classification and compensation documents, the City's personnel policies and other relevant data. This information will be evaluated to determine the status of existing human resource management programs and to identify apparent issues and opportunities. The purpose of the meeting is to:

- a. Introduce the Project Director and the consulting team
- b. Discuss the background and experience of Springsted and the consulting team
- c. Discuss, in detail, the methodology to be used in conducting the study; the role of the consulting team and management and employees; and the amount and type of employee participation
- d. Ascertain the major issues the City wants the study to address
- e. Review the project schedule and determine significant milestones
- f. Determine the frequency and content of status reports
- g. Discuss methods of communicating the status of the study to employees

In order to assess the existing classification plan, organizational structure and any related compensation issues, Springsted will meet individually with department heads to become familiar with department structure and changes in structure and positions, service provision, department and staffing issues, any concerns with the assignment of positions in the current compensation plan and any other issues that may need to be addressed during the course of the study.

Data Collection. Employees play a major role in providing the data needed for this study, therefore, it is imperative that employees receive information about the study, why it is being conducted, opportunities for employee involvement throughout the process, and expected outcomes.

Springsted will conduct an employee informational meeting to introduce the study, explain study procedures and answer any questions employees may have about the process.

Employees will receive a Position Analysis Questionnaire (PAQ) at this time. The questionnaire provides an opportunity for each employee to describe their job duties, responsibilities and essential functions in detail, the required knowledge, skills and abilities, and provide input on the various job factors that affect the position. Employees will also identify the specific physical requirements and working conditions of their position to assist in the consultant's review for compliance with the Americans with Disabilities Act. Springsted will spend time at the meeting reviewing the PAQ and responding to employee questions. The information gathered from the PAQ's will provide the information to be used in developing new position descriptions. A sample PAQ is attached.

During the informational meeting, we will also explain the supervisors' role in completing and signing off on the PAQ's. The questionnaire is designed to allow supervisors to comment on employee responses without altering employee responses. This allows the consultant to review complete, unedited responses from employees and supervisors. In instances where the employee and supervisor view the position requirements differently, Springsted will conduct job audits to obtain more information. Audits will be scheduled to minimize disruption to City operations. If necessary, meetings can be scheduled at the beginning or end of a shift to facilitate employee attendance.

Upon receipt of the completed PAQ's, Springsted will review the information provided by employees and their supervisors. Based on the information provided Springsted will develop new job descriptions for City positions. At this time we will also review each position's designation under the Federal Fair Labor Standards Act.

Preliminary job descriptions will be submitted to the City for review and comment. Springsted will make modifications to the descriptions as deemed appropriate. Any disputed content in job descriptions will be presented to the City's Project Manager for resolution.

Market Survey. In order to determine appropriate salary levels of positions in the workforce and to address the issue of comparable compensation, Springsted conducted a market survey in early 2015 and will provide an update to that information to ensure that valid, up-to-date information is utilized. By gathering and analyzing information on wages, wage equivalents and benefits, a comparison of the City's total compensation package can be reviewed in comparison to the City's established market area. External market comparisons for positions was based on similar organizational structure, population, geographic location, job responsibilities, scope of authority, financial, socio-economic, growth and other relevant factors.

Job Evaluation. While salary and benefits survey data will assist the City in establishing its position in the competitive market, job evaluation is the mechanism that ensures that internal relationships are equitable. Springsted has developed and copyrighted a job evaluation system known as the Systematic Analysis and Factor Evaluation (SAFE®) System. The SAFE® system is a unique job evaluation method designed to measure job factors that apply specifically to local government. This system has been successfully used for many years throughout the Country, is periodically updated to account for changes in technology, etc., and has been reviewed by the United States Circuit Court, in conjunction with an Equal Employment Opportunity (EEO) suit, and found acceptable to the Court. The system has also been accepted by the State of Minnesota under the Local Government Pay Equity Act.

The system rates and ranks jobs based on various skill levels and work factors. The result is an equitable and consistent method of evaluating jobs and relating positions to the compensation plan. The system facilitates proper and equitable comparisons between and among classes and minimizes the appearance of favoritism in evaluating, rating and ranking jobs.

Each position will be evaluated and placed within the proposed compensation plan based on the job evaluation system and the market rates paid by survey participants.

The elements considered in determining the relative value of classifications are:

- Training and Ability
- Level of Work
- Physical Demands
- Independence of Actions
- Supervision Exercised
- Education and Experience
- Human Relations Skills
- Working Conditions/Hazards
- Impact on End Results

This system can be maintained by the City. Springsted provides training to individuals assigned by the City to this task on utilizing the SAFE System to evaluate newly created positions or re-evaluate revised positions.

Development of Compensation Plan and Implementation Options. Based on the market wage and benefits data analysis and the job evaluation system, Springsted will propose revisions to the City's compensation plan or develop a new plan for the City. The compensation plan will be developed or revised in accordance with information obtained from the City regarding its pay philosophy as well as goals and objectives established for its compensation program, including the option for a performance based component. The proposed plan will incorporate market conditions, recognize the tenure of current employees and coordinate with labor agreements in effect in the City. Springsted will review options with the City to address the spread for pay ranges, the relationship between ranges and adjustments needed to ensure that the City remains competitive with the labor market and that the plan is internally equitable.

Springsted will propose a plan to implement the study recommendations that coincide with the financial and budgetary requirements of the City of Cannon Falls and the needs of employees. Estimates of the cost of implementation will be provided.

Timeline

Springsted takes pride in meeting its time commitments. The schedule to commence this project coincides with Springsted's completion of other studies. This will ensure that the proposed staff members will be available to concentrate on this study for the City of Cannon Falls. Springsted is prepared to initiate the study within three (3) weeks after receiving the official notice to proceed, and will complete the study within four (4) months after project initiation.

There are factors that impact meeting the schedule that are beyond the consulting team's control. The proposed time frame is contingent upon a timely decision, the receipt of the data from the survey participants when requested, the availability of employees to complete position analysis

questionnaires and participate in interviews and the timely receipt of feedback and comments on the submitted preliminary data.

Cost

Springsted Incorporated will perform the tasks as outlined in this work plan for the professional fee of \$13,600. This fee includes 32 positions.

In addition to the professional fees, Springsted would bill the City for out-of-pocket expenses such as travel, copying etc. in an amount not to exceed \$1,000.

Springsted is willing to work with the City to modify the work plan to meet the City's needs and budget. If the City decides to modify the proposed work plan, Springsted will adjust the proposed fee appropriately. For example, if the City wishes to update job descriptions or use current job descriptions, rather than develop new job descriptions.



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MEMORANDUM

TO: Employees of City of Cannon Falls, Minnesota
FROM: Ann Antonsen
DATE: September 2015
SUBJECT: **Instructions for Completing Your Position Analysis Questionnaire**

Please read these instructions before completing your Position Analysis Questionnaire (PAQ). This form is used to obtain information about your position and will be used to develop a class description. The questionnaire consists of multiple-choice and fill-in-the-blank questions; please be clear, accurate and complete. For multiple-choice questions, please check only the appropriate box on the left-hand side of the document; the right-hand box is for your supervisor or department/division head to complete. **Please complete and return the PAQ to your supervisor within five business days.**

We only need one PAQ per position within your organization, although each person is welcome to fill out a PAQ for their given role. Each PAQ should be saved in Microsoft Word format as follows "Name of position_Name of Staff.doc" and emailed to Springsted. The Name of Position and Name of Staff should match #1 and #2 of the saved PAQ.

Tips for Completing Your PAQ

- Spell out acronyms – acronyms may be exclusive to your department and mean something else nationally or to another part of the organization
- Minimum Requirements – Answer the questions based on the minimum requirements needed to perform the duties (you may have 10 years of experience, but would a new hire need that to do the job).
- Priority/Description of Duties – Question number nine (9) is the most important question, which requests the priority and description of your duties. This question provides you the opportunity to explain your day-to-day duties in your words.
 - Give this question extra thought and provide your response as clearly and completely as possible, so that someone who has never met you or performed your duties may understand what your job entails.
 - Think about your day, week, month and even year on the job; some major duties are performed annually.
 - Begin with your most important duty and continue on down to the least important duty.
 - Try to keep the description to one-line or short phrases; begin each statement with a verb. Avoid paragraphs.
 - As a percentage, indicate the amount of time that it takes for you to complete each of the described tasks. Please keep in mind that the most important duty may not take the highest percentage of time.
 - Percentages should total 100%; it is strongly recommended that these percentages should be no smaller than 5%.

If you need more space than what is allotted, please feel free to attach a separate piece of paper.

TO: Supervisors and/or Division/Department Heads
SUBJECT: **Instructions for Completing Position Analysis Questionnaire**

After each employee under your day-to-day supervision has completed a PAQ, they should return them to you for your review and verification. You will want to check the boxes on the right-hand side of every page, either agreeing or disagreeing with the boxes the employee has checked on the left-hand side. There is a section where you can comment on the accuracy and completeness of the employee's response. Please note any comments in this section and do not make any changes to employee responses.

City of Cannon Falls, Minnesota 2015 Position Analysis Questionnaire

1. Name(s) (Last, First)	2. Current Position Title	3. Current Annual Salary
4. Immediate Supervisor's Title	5. Department/Division	6. Date of Hire with Agency
7. How many hours are you scheduled to work in a week? <input type="checkbox"/> 35 <input type="checkbox"/> 37.5 <input type="checkbox"/> 40 <input type="checkbox"/> 43 <input type="checkbox"/> 56 <input type="checkbox"/> Other	Explain shift rotation, stand-by, call back, etc.	8. Date of Hire in Position
9. Priority/Description of Duties - List the duties you perform from most to least important, until you have detailed all the <u>major</u> duties that you perform. These descriptions should be short phrases and should begin with a verb (e.g. analyzes, approves, assigns, checks, codes, composes, files, manages, reviews, routes, repairs, sorts, trains, verifies , etc.). Then in the left column indicate that approximate percentage of your time devoted to each of the duties listed, which should total 100% (it is recommended that the percentages should be no less than 5%). (Supervisor's comments regarding this information may be provide in the Supervisor's Comments section)		
<div><div></div><div></div></div>		

10. **Primary Objectives of Job** - In a few short sentences summarize the major job duties and responsibilities that indicate the primary purpose which your job fulfills in meeting the organizations service goals. *(Supervisor's comments regarding this information may be provided in the Supervisor's Comments section)*

Examples:

- Developing and maintaining financial records and reports, coordinating and supervising administrative functions of the finance office and preparing annual fiscal reports.
- Processing purchase requisitions and providing administrative support.
- Conducting building inspections and making determinations regarding compliance status with building codes, enforcing building and zoning codes and ordinances, providing information to the public and assisting them in achieving compliance with codes and ordinances.
- Maintaining records of grant and special aid programs revenue and expenditure reports for reimbursements and performing various administrative functions associated with grant and special aid programs.

11. **Education and Experience** - Please indicate the minimum education and minimum experience level needed to complete the normal, day-to-day tasks:

Employee (check one)

Supervisor (check one)

- | | |
|--|--------------------------|
| <input type="checkbox"/> Less than High School Diploma or GED..... | <input type="checkbox"/> |
| <input type="checkbox"/> High School Diploma or GED..... | <input type="checkbox"/> |
| <input type="checkbox"/> Associates Degree..... | <input type="checkbox"/> |
| <input type="checkbox"/> Bachelors Degree..... | <input type="checkbox"/> |
| <input type="checkbox"/> Masters Degree..... | <input type="checkbox"/> |
| <input type="checkbox"/> PhD..... | <input type="checkbox"/> |
| <input type="checkbox"/> Other..... | <input type="checkbox"/> |

Major/Coursework: _____

Type of Experience: _____

Years of Experience

- | | |
|---|--------------------------|
| <input type="checkbox"/> No experience..... | <input type="checkbox"/> |
| <input type="checkbox"/> Less than one year (minimal)..... | <input type="checkbox"/> |
| <input type="checkbox"/> One to three years (moderate)..... | <input type="checkbox"/> |
| <input type="checkbox"/> Three through five years (considerable)..... | <input type="checkbox"/> |
| <input type="checkbox"/> Six or more years (extensive)..... | <input type="checkbox"/> |

12. **Licenses, Certificates and Registrations** - Please indicate if there are any licenses, certificates and/or registrations required to perform your job (e.g. driver's license) *(Supervisor's comments regarding this information may be provided in the Supervisor's Comments section)*

Are these required: ☐ Upon Hire ☐ Within 6 months ☐ Within 1 year ☐ Within 2 years*If requirement is specific to the license, certification or registration, please indicate timeframe by each one individually.*

13. **Special Training** - Please indicate if there is any special training required to perform your job. (Supervisor's comments regarding this information may be provided in the Supervisor's Comments section)

_____	_____
_____	_____
_____	_____

Are these required: ☐ Upon Hire ☐ Within 6 months ☐ Within 1 year ☐ Within 2 years
If requirement is specific to the training, please indicate timeframe by each one individually.

14. **Work Level** - Level of work required to complete your normal, day-to-day duties satisfactorily.

- ☐ Handles everyday, reoccurring basic assignments and problems (basic) ☐
☐ Handles a variety of typical assignments and problems independently (intermediate)..... ☐
☐ Senior or supervisory level; handles all advanced assignments and problems except those requiring policy or procedural change (difficult) ☐
☐ Managerial in nature; directs all assignments and deals with all problems (complex)..... ☐

15. **Work Complexity** - Complexity and difficulty level associated with the tasks necessary to complete your work. Consider the level of judgment, analytical ability and creativity required and whether there are standards, policies and procedures that guide your actions.

- ☐ Regular and repetitive tasks, processes or operations requiring the selection and execution of actions based on defined procedures ☐
☐ Fairly standard procedures and tasks where basic analytical ability is required, such as comparison of numbers and facts to select the correct actions. Detailed guidelines and procedures are generally used to make decisions or determine actions. ☐
☐ Requires the application of a variety of procedures, policies and/or precedents and moderate analytic ability in adapting standard methods to fit facts and conditions ☐
☐ Considerable analytical ability is needed to select, evaluate and interpret data from several sources; interpretation of guidelines, policies and procedures is required. ☐
☐ Widely varied and involving many complex and significant variables, requiring analytical ability and inductive thinking in adapting policies, procedures and methods to fit unusual and complex situations. ☐

16. **Working Conditions** - Conditions you are subjected to during your day-to-day duties:

- ☐ Absence of disagreeable conditions (excellent) ☐
☐ Involves occasional exposure to some disagreeable elements (*dust, heat, fumes, cold, noise, vibration or wetness*) and accidents are improbable other than minor injuries (good) ☐
☐ One or more elements above; involves frequent exposure to hazards where lost-time accidents are definitely possible (somewhat disagreeable) ☐
☐ Several elements above are occasionally present to the extent of being objectionable or regular exposure to work situations that could result in incapacitating accidents or, on occasion, loss of life (disagreeable). ☐
☐ One or more of the above elements are regularly present and objectionable, or continuing exposure to work situations that could result in incapacitating accidents or periodic exposure to situations involving hazards that could result in total disability, critical illness or loss of life (hazardous) ☐
☐ Continuous exposure to work situations involving hazards that could result in total disability, critical illness or loss of life, despite the provision and/or implementation of available safety measures (*very hazardous*). ☐

17. **Mental Stress and/or Effort** - Conditions you are subjected to during your day-to-day duties:

- ☐ Limited mental effort and/or stress ☐
☐ Some mental effort and stress involved resulting in inconvenience and frustration. ☐
☐ Considerable mental effort and stress ☐
☐ Serious mental stress involved that could, over a period of time, result in temporary nervous disorder and severe mental anguish. ☐
☐ Severe mental stress involved that could result in permanent nervous disorder/mental instability ☐

18. **Interpersonal Skills and Communication Skills** - Skills required during your day-to-day duties:

- ☐ Little or no contact required except with immediate associates and direct supervisor (limited).....☐
- ☐ Regular contact within the department and periodic contacts with other departments, outside agencies and the general public (general).....☐
- ☐ Regular contact within the department and other departments, outside agencies and general public (supplying or seeking information) on specialized matters (reactive).....☐
- ☐ Outside and inside contacts to carry out organization programs or occasional contacts with officials at higher levels on matters requiring cooperation, explanation and persuasion, or work requiring enforcement of laws, ordinances, policies and procedures (proactive)☐
- ☐ Regular contact with persons of importance and influence involving considerable tact, discretion and persuasion (influential).☐
- ☐ Continuing contact involving difficult negotiations calling for well-developed sense of timing and strategy; representing department or organization in policy settings (managerial).....☐

Please list people or groups with whom you must interact and/or communicate in the performance of your job.

(e.g.: citizens, customers, clients, elected officials, supervisors, subordinates, consultants, engineers, etc.)

_____	_____
_____	_____
_____	_____

19. **Knowledge** - Level of knowledge required to complete your normal, day-to-day duties satisfactorily.

- (S) Some Basic knowledge of principles and terminology
- (G) General Sufficient knowledge to perform and deal effectively with normal and routine situations
- (T) Thorough Sufficient comprehension to deal with and resolve unusual and difficult problems
- (C) Comprehensive Mastery and understanding of the subject; most advanced degree of knowledge

a. **Comprehension Skills**

Please list the type(s) of manuals, texts, drawings, documentation, technical abilities, etc. to which you refer in the performance of your job (e.g.: maintenance manuals, policy and/or procedure manuals, engineering or architectural drawings, electrical or mechanical diagrams, maps, etc.). Please consider the level of knowledge required to comprehend and mark appropriately. (Supervisor's comments regarding this information may be provided in the Supervisor's Comments section)

S	G	T	C	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Related industry, organization and department policies, practices and procedures.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Related industry, organization and departmental legal guides, recommendations, best practices, ordinances and laws.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

b. **Information Processing Skills**

Please list the type(s) of records, reports, charts, graphs, technical abilities, etc. you prepare or process in the performance of your job (e.g.: billing statements, attendance records, time sheets, vehicle maintenance reports, letters, flow charts/diagrams, technical reports, performance appraisals, meter readings, balance sheets, etc.) Please consider the level of knowledge required to prepare the items and mark appropriately. (Supervisor's comments regarding this information may be provided in the Supervisor's Comments section)

S	G	T	C	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

c. Equipment

Please list the type(s) of machinery and/or equipment that you use or service in the performance of your duties. (e.g. standard office, specific law enforcement, specific fire fighting, bulldozer, garbage packer, container truck, lawnmowers, front loader, etc.). Please consider the level of knowledge to operate the items listed and mark appropriately. (Supervisor's comments regarding this information may be provided in the Supervisor's Comments section)

S	G	T	C	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Standard Office (computer, fax, telephone, copier, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

d. Technology Hardware/Software Requirements

Please list the type(s) of hardware and/or software that you use or service in the performance of your duties (e.g. spreadsheets, word processing, presentation, accounting, servers, CPUs, printers, etc.) Please consider the level of knowledge to operate the items listed and mark appropriately. (Supervisor's comments regarding this information may be provided in the Supervisor's Comments section)

S	G	T	C	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Standard Office Software (spreadsheets, word processing, presentations, databases, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Standard Accounting Software
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Are you performing troubleshooting prior to contacting your organizations IT/IS department or vendor? ☐ Yes ☐ No

e. Mathematical Requirements

What mathematical skills are required in order to perform your job?

<input type="checkbox"/>	Ability to make arithmetic computations using whole numbers, fractions and decimals.
<input type="checkbox"/>	Ability to compute rates, ratios and percentages
<input type="checkbox"/>	Ability to understand and apply governmental accounting practices in maintenance of financial records
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

f. Other Required Knowledge, Skills, Abilities or Other Factors

Are there other requirements required to perform your job not referenced in a-e?

20. **Level of Responsibility** - How much freedom or independence is required or allowed in the performance of your normal duties:

☐ Close supervision, or tasks are so routine and standardized that they do not require supervision (prescribed).....☐

☐ Moderate supervision within standard operating procedures; supervisor or senior workers are generally nearby to answer questions, make "judgment calls" and/or prioritize work (standardized).....☐

☐ Limited supervision with general autonomy in determining how objectives are achieved; supervisors generally set operating benchmarks, goals and objectives (directed).....☐

☐ General direction, based on broad goals and policies (broad).....☐

☐ Involves setting policies and goals for the department or organization operation (strategic).....☐

21. **Organizational Impact and Consequences** - How your daily duties impact the organization and the consequences of those duties:

☐ Supportive, informational, recording or other services to assist others in producing correct and effective results; minor consequences (incidental).....☐

☐ Assisting and supporting others or individually providing data or facilitating services for use by others; minor to moderate consequences (advisory).....☐

☐ Daily actions or services affect individual clients/citizens; activity has moderate impact on specific cases in service area (operational).....☐

☐ Participating with others (within and/or outside of community/agency) in program development, service delivery and supervision of subordinate staff; moderate to serious impact (contributory).....☐

☐ Major individual impact on and accountability for end results affecting organizational unit or total community/agency (primary).....☐

22. **Financial** - Please indicate the dollar amount over which you have accountability, approval and/or authority. (*Supervisor's comments regarding this information may be provided in the Supervisor's Comments section*)

<input type="checkbox"/> \$0 (N/A)	<input type="checkbox"/> \$20,000 - \$49,000	<input type="checkbox"/> \$1,000,000 - \$4,999,999
<input type="checkbox"/> \$1 - \$999	<input type="checkbox"/> \$50,000 - \$99,999	<input type="checkbox"/> \$5,000,000 - \$19,999,999
<input type="checkbox"/> \$1,000 - \$4,999	<input type="checkbox"/> \$100,000 - \$499,999	<input type="checkbox"/> \$20,000,000 - 49,999,999
<input type="checkbox"/> \$5,000 - \$19,999	<input type="checkbox"/> \$500,000 - \$999,999	<input type="checkbox"/> \$50,000,000 +

23. **Supervision and/or Oversight** - The scope and type of responsibility that you exercise as a supervisor or lead worker of other employees. (*Supervisor's comments regarding this information may be provided in the Supervisor's Comments section*)

Do you supervise or have oversight of other positions: ☐ Yes, continue in this box ☐ No, continue to next section

Please check all that apply:

☐ N/A ☐ Work Group/Team ☐ Unit/Section ☐ Department ☐ Division ☐ Organization

List the positions by title, along with number of individuals within the position, that you have responsibility for:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

For the positions listed above, do you effectively recommend or take action on the following:

Effectively Recommend	Take Action		Effectively Recommend	Take Action	
<input type="checkbox"/>	<input type="checkbox"/>	Hire	<input type="checkbox"/>	<input type="checkbox"/>	Suspend
<input type="checkbox"/>	<input type="checkbox"/>	Assign Work	<input type="checkbox"/>	<input type="checkbox"/>	Terminate
<input type="checkbox"/>	<input type="checkbox"/>	Direct Work	<input type="checkbox"/>	<input type="checkbox"/>	Discipline (Oral Reprimand)
<input type="checkbox"/>	<input type="checkbox"/>	Reward	<input type="checkbox"/>	<input type="checkbox"/>	Discipline (Written Reprimand)
<input type="checkbox"/>	<input type="checkbox"/>	Transfer	<input type="checkbox"/>	<input type="checkbox"/>	Evaluate Performance
<input type="checkbox"/>	<input type="checkbox"/>	Promote	<input type="checkbox"/>	<input type="checkbox"/>	Demote
<input type="checkbox"/>	<input type="checkbox"/>	Adjust Grievances	<input type="checkbox"/>	<input type="checkbox"/>	Coach and/or Counsel
<input type="checkbox"/>	<input type="checkbox"/>	Train	<input type="checkbox"/>	<input type="checkbox"/>	Develop Staff Schedules
<input type="checkbox"/>	<input type="checkbox"/>	Inspect Work	<input type="checkbox"/>	<input type="checkbox"/>	Other

Supervisor's Comments *(To be completed by immediate supervisor of employee)*

Are the statements provided by the employee accurate and complete? ☐ Yes ☐ No Please indicate any inaccuracies or incomplete items.

[illegible]

I certify that the answers to the above questions are my own and to the best of my knowledge and belief are correct and complete.

Employee(s) E-Signature(s)

Date _____

Supervisor or Dept/Div Head E-Signature

Date _____

Americans with Disabilities Act Supplemental Information Form

In order to assist in developing class descriptions which recognize and accommodate the requirements of the Act, each employee is requested to complete the attached ADA supplemental information form. Please check only those physical requirements or activities and sensory requirements that are **absolutely necessary** to perform the essential functions of your job and those environmental conditions which apply. **If options provided are not applicable, please do not check the corresponding box.**

The employee should check the appropriate box on the left side of the form. Supervisors should review information provided by the employee and verify the requirements of the position by checking the appropriate box on the right side of the form.

1. The physical requirements of this position.

Does this job require that weight be lifted or force be exerted? If so, how much and how often? Check the appropriate boxes below.

	Employee Amount of Time				Supervisor's Input			
	None	up to 1/3	1/3 to 2/3	2/3 & up	None	up to 1/3	1/3 to 2/3	2/3 & up
Up to 10 pounds of force	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Up to 25 pounds of force	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Up to 50 pounds of force	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Up to 100 pounds of force	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In excess of 100 pounds of force	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What is being lifted: _____

2. The physical activity of this position.

How much on-the-job time is spent in the following physical activities? Show the amount of time by checking the appropriate boxes below.

	Employee Amount of Time				Supervisor's Input			
	None	up to 1/3	1/3 to 2/3	2/3 & up	None	up to 1/3	1/3 to 2/3	2/3 & up
Stand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speak or hear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use hands to finger, handle or feel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climb or balance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stoop, kneel, crouch or crawl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reach with hands and arms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taste or smell	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Push or pull	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lifting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Repetitive Motions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. The sensory requirements of the position are:

Visual Acuity

- ☐ Standard vision requirements..... ☐
- ☐ Close vision ☐
- ☐ Distance vision ☐
- ☐ Ability to adjust focus ☐
- ☐ Depth perception..... ☐
- ☐ Color perception ☐
- ☐ Night vision..... ☐
- ☐ Peripheral vision ☐

Vocal Communication

- ☐ Expressing or exchanging ideas by means of the spoken word..... ☐
- ☐ Detailed or loud talking to convey detailed or important spoken instructions to others accurately, loudly or quickly..... ☐

Hearing Perception

- ☐ Ability to recognize information at normal spoken word levels..... ☐
- ☐ Ability to receive detailed information through oral communications and/or to make fine distinctions in sound. ☐

Sensory Utilization

- ☐ Preparing and analyzing written or computer data ☐
☐ Visual inspection involving small defects and/or small parts..... ☐
☐ Use of measuring devices ☐
☐ Assembly or fabrication of parts within arms length ☐
☐ Operating machines..... ☐
☐ Operating motor vehicles or equipment ☐
☐ Observing general surroundings and activities..... ☐

4. The environmental conditions the worker will be subject to in this position.

How much exposure to the following environmental conditions does this job require? Show the amount of time by checking the appropriate boxes below.

	Employee Amount of Time				Supervisor's Input			
	None	up to 1/3	1/3 to 2/3	2/3 & up	None	up to 1/3	1/3 to 2/3	2/3 & up
Wet, humid conditions (non-weather)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work near moving mechanical parts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work in high, precarious places	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fumes or airborne particles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Toxic or caustic chemicals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outdoor weather conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extreme cold (non-weather)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extreme heat (non-weather)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Risk of electrical shock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work with explosives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vibration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Breathing apparatus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exposure to blood borne pathogens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Typical Noise Level

Employee (check only one)

Supervisor (verify job requirement)

- ☐ Very Quiet (e.g. park trail, storage or file room) ☐
☐ Quiet (e.g. library, private offices)..... ☐
☐ Moderate Noise (e.g. business office with typewriters and/or computer printers, light traffic) ☐
☐ Loud Noise (e.g. heavy traffic, large earth-moving equipment) ☐
☐ Very Loud Noise (e.g. jack hammer work, garbage recycle plant) ☐