

COUNTY OF SONOMA - JOB DEMANDS ANALYSIS -

JOB CLASSIFICATION: PRINCIPAL EMERGENCY SERVICES COORDINATOR
DEPARTMENT: EMERGENCY MANAGEMENT
PHYSICAL DEMAND STRENGTH RATING: SEDENTARY/LIGHT

DATE COMPLETED: September 15,2022
DIVISION: EMERGENCY COORDINATION

INSTRUCTIONS TO MEDICAL PROVIDERS COMPLETING THIS FORM:

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

FREQUENCY RATING:

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

PART 1 - JOB DUTIES/FUNCTIONS:

| A. Job Duty/Function | B. Job Duty # | C. Freq Rating | D. Equipment or tools used to perform (Describe) | E. Specialized Expertise, License, Certification Required? (Describe) | F. Essential or Non- Essential | Medical Provider Use Only: For each job duty/function, indicate in this column “Can Perform”, is “Temporarily Restricted” from performing, or is “Permanently Restricted” from performing. |
|---|---------------|----------------|--|---|--------------------------------|--|
| 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. Employees in this class may be called to work out in the field at the site of an emergency or remote incident command post, and can sometimes work long and irregular hours, including nights, weekends, and occasionally holidays. | | | | | | |
| Works independently and with good judgment to coordinate emergency planning and response efforts with officials of local incorporated cities, county departments, and other agencies; analyzes and makes recommendations on which projects to undertake. | 1 | C | Computer/phone | Y (ICS) | E | |
| Communicates by phone, in person, or by email or other written format with departmental staff, members of the public, and local, state, and federal agencies to coordinate activities and provide detailed information regarding the status of emergency incidents. | 2 | F | Computer/phone | Y (ICS) | E | |

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|---|---------------|----------------|--|---|--------------------------------|--|
| Enters data into computer software; maintains electronic and paper records and files in accordance with established procedures. | 3 | F | Computer | N | E | |
| Serves as an on-call rotation Staff Duty Officer and may work long or irregular hours, including nights, weekends and holidays. | 4 | O | Computer/ Phone/Car | Y (ICS; CA Class C Driver's License) | E | |
| Works long and irregular hours, including nights, weekends, and holidays during preparedness, response and recovery phases of emergency situations (e.g., floods, fires, earthquakes, public health incidents); may assist with moving supplies and resources at storage locations or the emergency operations center. | 5 | O | Computer/ Phone/Vehicle | Y (ICS; CA Class C Driver's License) | E | |
| Conducts high priority and complex work assignments; drafts and presents reports and recommendations; analyzes programs and services to continually seek program and process improvements; conducts presentations and trainings. | 6 | F | Computer/ Phone | Y (ICS) | E | |
| Coordinates preparedness and incident activations at the Emergency Operations Center. | 7 | F | Computer/ Phone | Y (ICS) | E | |
| Participates in advisory committees or other related working groups; works collaboratively with and represents the County before local, state, and federal agencies, and governing bodies. | 8 | O | Computer/ Phone | Y (ICS) | E | |
| Represents the County and speaks before public bodies, organizations, committees, and the public on matters pertaining to agency initiatives, projects, programs, and activities; drives vehicle to off-site meetings. | 9 | F | Computer/ Phone/Vehicle | Y (ICS; CA Class C Driver's License) | E | |
| Writes and edits written materials for publication; compiles concise reports, letters, newsletters and other written materials; ensures Department and County messages are consistent. | 10 | F | Computer/Phone | N | E | |
| Works with other County departments to advance the needs of the department and the County; serves on committees to represent the Department's needs; represents the Department to external stakeholders, including community based organizations, schools, and the public; and acts as a liaison with department heads, employees, the media, and the public. | 11 | F | Computer/Phone | N | E | |
| Travels to various locations to attend meetings, seminars, and training classes. | 12 | O | Phone/ Vehicle; GPS; Maps | Y (CA Class C Driver's License) | E | |
| Participates in continuous training to maintain required licenses/certifications and to maintain and enhance knowledge and skills required for this position. | 13 | O | Computer/Phone | Y (ICS) | E | |

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|---|---------------|----------------|--|---|--------------------------------|--|
| Drives county vehicle/pick-up truck throughout the county, including to rugged and remote locations during site visits for post-disaster damage assessments with local, state and federal agencies. | 14 | O | Vehicle | Y (CA Class C Driver's License) | E | |
| May be required to use Personal Protective Equipment (PPE) during site/field visits during or after a disaster, which may include: wet, muddy or slippery ground, post-fire burn scars with smoldering debris, downed trees, vegetation debris, rubble or building debris. | 15 | O | Hard hat, work gloves, N95 mask, safety boots, reflective jacket/vest, rain coat, protective goggles | N | E | |
| May serve as Director of the County Emergency Operations Center and be subjected to varying-length rotating standby (on-call) coverage and work long and irregular hours, including nights, weekends, and holidays to respond to after hour calls and during response and recovery phases of emergency situations (earthquakes, floods, fires, etc.). | 16 | O | Computer/Phone/ Vehicle | Y (ICS; CA Class C Driver's License) | E | |

PART 2: PHYSICAL DEMANDS

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

PART 3: SENSORY REQUIREMENTS

| Activity | Examples of Duties/Functions Requiring Activity | FREQUENCY RATING Never, Occasional; Frequent, or Constant | MEDICAL Can Perform | PROVIDER Temporarily Restricted | USE ONLY Permanently Restricted |
|--|---|--|------------------------|------------------------------------|------------------------------------|
| 1 Functional vision, normal or corrected | 1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16 | C | | | |
| 2 Functional color vision, normal or corrected | N/A | N | | | |
| 3 Functional night vision, normal or corrected | 4,5,7 | O | | | |
| 4 Functional hearing, normal or corrected | 1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16 | C | | | |
| 5 A sense of smell or taste | N/A | N | | | |

PART 4: COMPREHENSION LEVEL

| Activity | FREQUENCY RATING Never, Occasional; Frequent, or Constant | MEDICAL Can Perform | PROVIDER Temporarily Restricted | 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

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

PART 6: WORK PACE

| Activity | FREQUENCY RATING Never, Occasional; Frequent, or Constant | MEDICAL Can Perform | 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 | O | | | |
| 4 Limited/unpredictable opportunity for breaks | O | | | |
| 5 Required to perform on-call or emergency work | F | | | |

PART 7: COMPLEXITY/VARIABILITY

| Activity | FREQUENCY RATING Never, Occasional; Frequent, or Constant | MEDICAL Can Perform | PROVIDER Temporarily Restricted | USE ONLY Permanently Restricted |
|--|--|------------------------|------------------------------------|------------------------------------|
| 1 Variable and unpredictable workflow | O | | | |
| 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 task to another | F | | | |
| 6 Possible legal ramifications associated with work activities or work product | F | | | |

PART 8: INTERACTIONS WITH OTHERS

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

PART 9: ENVIRONMENTAL FACTORS/WORKING CONDITIONS:

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