

CITY OF GRAND JUNCTION

JOB ANALYSIS QUESTIONNAIRE

I. EMPLOYEE BACKGROUND: In this section you will provide information regarding your name, current job title, your immediate supervisor, etc. This will help us make sure we refer to the correct job throughout the study.

Is this a group questionnaire? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, please list all employee names.
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Division: Utilities and Streets Systems

Department: Persigo

For Individual Questionnaires Only:

Employee Name:	Brown	Larry	D
	(Last)	(First)	(Middle Initial)

Current Classification Title: Wastewater Maintenance Supervisor

Division Utilities and Streets Systems

Department Persigo

Total Length of Time with organization 24 Years months

Total Length of Time in Current Position 20 Years months

Assigned Hours/Week; from 7:00 to 3:30 **Assigned Days/Week** 5

Email: Larryb@GJcity.org

Work Phone: (970) 256-4168

Immediate Supervisor:

Immediate supervisor reports to:

Name: Dan Tonello

Name: Terry Franklin

Title: Wastewater Services Manager

Title: Deputy Director Util & Street

Work Phone (970) 256-4171

Work Phone: (970) 244-1495

E-mail: dant@ci.grandjct.co.us

E-mail: terryf@ci.grandjct.co.us

II. POSITION INFORMATION

1. POSITION SUMMARY: This section asks for a short paragraph, one to three sentences, regarding the purpose of your position and/or your primary responsibilities. This summary helps us to quickly understand the essence of your job. Usually it is better to write this after you have completed the remainder of the questionnaire. Briefly describe what you consider to be the major purpose or objective of the job. Simply stated, what are you attempting to accomplish in your position?

Example: Computer Support Technician

Summary: To operate, maintain and repair computer equipment and to provide technical assistance to users.

Wastewater Maintenance Supervisor

In responsible charge of 12.5 million gallons per day wastewater plant maintenance and the 500 miles of collections sanitary sewer system including 30 lift stations and the cleaning of the storm sewer system for Streets Division; monitor and stay within budgeted amounts, to establish policies and procedures, to supervise, assign, review and participate in the work of staff responsible for performing maintenance, repair, and reconstruction duties in the City's wastewater treatment plant and sewer collection systems; to establish and implement maintenance and repair programs; to ensure work quality and adherence to established policies and procedures and project management in oversight of outside contractors working on the wastewater system.

2. SUPERVISION & ORGANIZATIONAL RELATIONSHIPS.

- a. The chart below asks for your specific supervisory responsibilities. If a duty statement applies to you, please check the box under the "Yes" column and then indicate the number of employees for which you are responsible to the right of the statement.

Yes	Duty	Number of Employees
<input type="checkbox"/>	I do not officially supervise other employees (sign performance reviews).	
<input checked="" type="checkbox"/>	I evaluate and sign performance reviews of other full-time employees.	16
<input checked="" type="checkbox"/>	I evaluate and sign performance reviews of part-time, temporary or contract employees.	.5
<input checked="" type="checkbox"/>	I instruct other employees in methods or procedures needed to carry out their job (how to carry-out their assigned duties).	16.5
<input checked="" type="checkbox"/>	I make work assignments for others.	16.5
<input checked="" type="checkbox"/>	I make hiring and hiring pay recommendations.	16.5
<input checked="" type="checkbox"/>	I make hiring and hiring pay decisions.	16.5
<input checked="" type="checkbox"/>	I recommend termination for poor performance.	16.5
<input checked="" type="checkbox"/>	I provide advice to peers that they must consider carefully before making a decision.	10
<input checked="" type="checkbox"/>	I provide information to supervisors/management that they use in making a decision.	9

- b. Complete the organization chart below. This chart will help us to understand your job in relation to others in your department. Please use titles and not names. Fill in the applicable position titles: (1) your coworkers, employees you work with and who also report directly to your supervisor; and, (2) your subordinates, any employees you supervise directly. List only those jobs over which you have full managerial/supervisory authority (i.e. complete and sign performance evaluation.) Do not list employees supervised by your subordinate supervisors.

YOUR COWORKERS' JOB TITLES

Wastewater Operations Supervisor
Industrial Pretreatment Supervisor

YOUR DIRECT REPORTS' JOB TITLES

Lead Plant Mechanic (2)
Electrician (1) Assistant Plant Mechanic (1)
Plant Mechanic (2)
Plant Safety Coordinator (1)
TV Equipment Operator (1)
Specialty Equipment Operator Persigo (3)
Equipment Operator Persigo (5)
Seasonal Maintenance Worker (1)

Please indicate the nature of the group supervised and the number supervised

☒ Full Time 16 ☐ Part-Time ☒ Seasonal/Temp 1 ☐ Volunteer ☐ Contract

c. Describe with whom, or with what departments/organizations, you have regular contact.

1. Inside your organization (other City Departments):

Title of Person or Department	How Often	For What Purpose
Ex: Peers, Subordinates	daily	Job assignments and supervision.
Engineering	weekly	Sewer project engineering and construction inspection of new additions to sewer plant and collections system.
Pipeline Maintenance	weekly	Repairs to be made on collections system or assigning crews and equipment to assist
Streets Division	weekly	Assigning crews for storm cleaning and irrigation
Purchasing	monthly	Procurement and specifications of equipment
Fleet Maintenance	monthly	Repair of vehicles
Information Systems	weekly	Corrections to mapping or addition of sewer lines.

2. Outside your organization:

Title of Person or Organization	How Often	For What Purpose
Ex: Vendors, Gen. Public	daily	replacement and new equipment procurement, Sewer questions, backups, odors and locations mostly.
Outside Engineering	weekly	review of plans and specifications
Contractors	weekly	questions about sewer system or contract work for the City of Grand Junction.

3. ESSENTIAL DUTIES.

The list of essential duties helps us to understand those duties which are the primary reasons why your position exists. For clarification, please refer to the examples provided below.

Essential Duties: Those duties that make up at least 5% of your time. Please provide enough detail so that someone who may not be familiar with your job will have a clear understanding of what it is that you do. For example, do not simply state "prepares reports", but state "prepares reports such as status reports, staff reports", or other type of report(s) you may prepare. Also, please use action verbs such as prepares, calculates, operates, etc., to start off each statement. Do not use acronyms in your description. Examples are shown below. Use additional sheets, if needed.

Decisions Required: List the decisions you make to carry out the essential duties.

Frequency: Indicate how often you perform each duty – D = daily, W = weekly, M = monthly, Q = quarterly, A = annually, or O = occasionally.

Percent of Time: Indicate how much of your time you spend on each task. The total of these percentages **should not be more than 100%**. Example: Sally conducts property value estimates 20% of the time, it may mean she spends one day out of five on that task, or that she spends around two hours each day. These need only be estimates so do not spend a great deal of time trying to come up with an exact percentage. The percentages of **all** duties should equal 100% over a one year period of time.

Attach additional sheets if necessary.

E X A M P L E (LIST ACTUAL ESSENTIAL DUTIES BELOW EXAMPLE)

Essential Duties	Decisions Required	Frequency	% of Time
EXAMPLES:			
<i>Prepares monthly newsletters by gathering information, writing copy, editing, preparing for publication and overseeing distribution.</i>	<i>Articles to include, editorial changes, graphics, layouts</i>	<i>M</i>	<i>25%</i>
<i>Performs inventory spot checks and monthly counts of supplies in warehouse.</i>	<i>When to check supplies</i>	<i>M</i>	<i>10%</i>

	List of Essential Duties	Decisions Required	Frequency: D = Daily W = Weekly M = Monthly Q = Quarterly A = Annually O = Occasionally	% of Time Spent (Not to exceed 100%)
1	Prioritize, assign, supervise and review the work of staff responsible for providing of maintenance, repair and reconstruction support to the City's wastewater treatment facility, sewer collection system, lift stations and safty program.	budget, desired end results, improving induvisual knowledge and performance, inspect the work of crews in progress, provide advice and assistance to crew members, ensure maintenance and construction procedures are completed in a satisfactory and thorough manner and in compliance with City, departmental and safety policies and procedures.	Daily	50
2	Coordinate work crew activities with other crews, divisions, and departments as well as outside agencies and contractors; establish and maintain cooperative working relationships with regulatory agencies and customers.	Establish schedules and methods for providing assigned services; identify resource, material, and equipment needs; review needs with appropriate management staff; allocate resources accordingly	Weekly	10
3	Setting and implementation of goals and objectives; implement approved policies and procedures.	The methods used to Successfully improve production and policie conformanty.	Weekly	5

4	Customer service both internal and external	Decide how best to handle customer sewer backups and complaints, preventative maintenance for all aspects of collections, lift stations and plant. Keeping a prioritized and balanced work load for (plant, collections, lift stations and the lab).	Weekly	15
5	Employee development and continues production improvements.	The best method to train and develop each person, types of training needed and goals for them and the improvement of work output including quality and quantity. Passing on and sharing of my knowledge as well as knowledge of others in a team effort for a common goal.	Daily	10
6	Keep upper management up-to-date and pass on direction and decisions we have discussed to subordinates.	How best to communicate our goals and decisions for a positive response while maintaining a high producing positive work environment.	Weekly	10
7			Select	
8			Select	
9			Select	
10			Select	
11			Select	
12			Select	
13			Select	
14			Select	
15			Select	
16			Select	
17			Select	
18			Select	
19			Select	

4. REQUIRED KNOWLEDGE AND SKILLS.

This section helps us to understand the types of knowledge and skill you would need to perform your job at the entry level. Those items you list are those required and not what you might necessarily know or are able to do after being in the position for a number of years.

Knowledge: refers to the possession of concepts and information gained through experience, training and/or education and can be measured through testing.

Skills: refers to the proficiency which can be demonstrated and are typically manual in nature and/or can be measured through testing.

The knowledge and skills that you list in the following section must refer to the Essential Duties you listed in Section 3.

Duty #	Knowledge - Skills
1,2,3,4,5,6	Knowledge: Class IV Collections certification
1,2,3,4,5,6	Knowledge: Wastewater Class A
1,2,3,4,5,6	Knowledge: Complex principles and practices used in wastewater treatment and maintenance and the collections system.
1,2,3,4,5,6	Repair and construction; types and levels of maintenance and repair activities performed in wastewater treatment and collection system
1,3,4,5,6	Knowledge: Complex SCADA (Supervisor Control and Data Acquisition) systems, equipment control systems (electrical and mechanical) and pumping equipment and repairs.
2,3,4,5,6	Skill in dealing with all types of personalities and situations

III. EDUCATION, EXPERIENCE, AND EQUIPMENT

1. EDUCATION: What level of education do you have and what minimum level of education do you believe is needed to satisfactorily perform your job at entry level? Check the level that applies to your job:

You Have	You Need	
<input type="checkbox"/>	<input type="checkbox"/>	Less than High School Diploma or equivalent (G.E.D.) (ability to read, write, and follow directions)
<input type="checkbox"/>	<input type="checkbox"/>	High School Diploma or equivalent (G.E.D.)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Up to one year of specialized or technical training beyond high school
<input type="checkbox"/>	<input type="checkbox"/>	Associate degree (A.S., A.A.) or two-year technical certificate
<input type="checkbox"/>	<input type="checkbox"/>	Bachelor's degree
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Other (explain): Collections Class IV certification and Wastewater Operator class A

2. EXPERIENCE: What kinds of experience do you have, and what minimum kinds of experience are needed to enter your job at entry level?

Type of Experience

<u>You Have</u>	<u>Your Time</u>	<u>You Need</u>	<u>Minimum Time Required</u>
Mechanical	36 years	Mechanical	10 years
Electrical	32 years	Electrical	10 years
Wastewater / Collections	24 years	Wastewater / Collections	2 years

a. What field (s) should training or degree be in?

Electronics, Mechanical, Wastewater and Management

3. SPECIAL REQUIREMENTS: List any registrations, certifications or licenses that are **required** for you to hold your position. Be specific and do not abbreviate words or use acronyms.

Collections Class IV certification

Colorado Driver's license

4. MACHINES, TOOLS AND EQUIPMENT. List any machines, tools or equipment used in your work and indicate the frequency and time spent using each. The machines, tools and equipment must refer to the Essential Duties you listed in Section 3.

Duty #	Machines, Tools, Equipment	Frequency/Time
1,2,3,4,5,6	Computer, copier, printer, fax and phone	Daily/ 50%
1,2,4,6	SUV 4x4	Daily/ 20%
5	Volt ohm meter, amp meter, lathe, milling machine, welding equipment and hand tools.	Monthly/ 1%

5. DECISION-MAKING & JUDGMENTS.

- a. Describe three types of important decisions and judgments you make regularly and independently in the performance of your duties.
 - 1. The approval to purchase equipment, supplies and tool necessary for day to day work , while staying within budget and scope of the needed work performed.
 - 2. The resources manpower and equipment needed to efficiently complete tasks (assigning jobs and setting priorities) and decide if the quality and quantity of my staff's work is appropriate.
 - 3. Investigate complaints and take corrective action as necessary to resolve complaints.

IV: AMERICANS WITH DISABILITIES ACT REQUIREMENTS

1. PHYSICAL ACTIVITIES/REQUIREMENTS.

This section helps us understand the physical activities and requirements that are absolutely necessary for you to be able to do in order to perform your job. Please list the frequency and the importance of each of the physical requirements listed in this section. These physical activities/requirements will help in ensuring the City of Grand Junction remains in compliance with the Americans with Disabilities Act.

The City of Grand Junction is required to document any physical requirements in order to legally defend restrictions that are imposed. The definitions for the physical activities/requirements are taken directly from the guidelines established by the federal government. Your answers in this section will not affect how your job is classified.

Frequency

How frequently is the activity performed?

- 0 – Never
- 1 – Annually
- 2 – Quarterly (at least 3 per year)
- 3 – Monthly (at least 8 per year)
- 4 – Weekly (at least 3 per month)
- 5 – Daily (at least 3 per week)

Importance

How important is the activity in accomplishing the job's purpose?

- 0 – Not Important
- 1 – Somewhat Important
- 2 – Very Important
- 3 – Extremely Important

Physical Activity	Frequency	Importance	Duties
Climbing: Ascending or descending ladders, stairs, scaffolding, ramps, poles and the like, using feet and legs and/or hands and arms. Body agility is emphasized. This factor is important if the amount and kind of climbing required exceeds that required for ordinary locomotion.	3--Monthly	1--Somewhat Important	1
Balancing: Maintaining body equilibrium to prevent falling when walking, standing or crouching on narrow, slippery or erratically moving surfaces. This factor is important if the amount and kind of balancing exceeds that needed for ordinary locomotion and maintenance of body equilibrium.	1--Annually	1--Somewhat Important	1
Stooping: Bending body downward and forward by bending spine at the waist. This factor is important if it occurs to a considerable degree and requires full use of the lower extremities and back muscles.	2--Quarterly	0--Not Important	1
Kneeling: Bending legs at knee to come to a rest on knee or knees.	2--Quarterly	0--Not Important	1
Crouching: Bending the body downward and forward by bending leg and spine.	0--Never	Select	
Crawling: Moving about on hands and knees or hands and feet.	0--Never	Select	
Reaching: Extending hand(s) and arm(s) in any direction.	4--Weekly	1--Somewhat Important	1
Standing: Particularly for sustained periods of time.	5--Daily	2--Very Important	1,2,4,5
Walking: Moving about on foot to accomplish tasks, particularly for long distances.	5--Daily	2--Very Important	1,2,4,5
Pushing: Using upper extremities to press against something with steady force in order to thrust	1--Annually	0--Not Important	1,5

forward, downward or outward.			
Pulling: Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion.	1--Annually	0--Not Important	1,5
Fingering: Picking, pinching, typing or otherwise working, primarily with fingers rather than with the whole hand or arm as in handling.	5--Daily	2--Very Important	1-6
Grasping: Applying pressure to an object with the fingers or palm.	4--Weekly	1--Somewhat Important	1,5
Lifting: Raising objects from a lower to a higher position or moving objects horizontally from position-to-position. This factor is important if it occurs to be a considerable degree and requires the substantial use of the upper extremities and back muscles.	4--Weekly	1--Somewhat Important	1,5
Feeling: Perceiving attributes of objects, such as size, shape, temperature or texture by touching the skin, particularly that of fingertips.	3--Monthly	1--Somewhat Important	5
Talking: Expressing or exchanging ideas by means of the spoken word. Those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.	5--Daily	2--Very Important	1-6
Hearing: Perceiving the nature of sounds with no less than a 4db loss @ 500 Hz, 1,000 Hz and 2,000 Hz with or without correction. Ability to receive detailed information through oral communication, and to make fine discriminations in sound, such as when making fine adjustments on machined parts.	5--Daily	2--Very Important	1-6
Seeing: The ability to perceive the nature of objects by the eye. Seeing is important for hazardous jobs where defective seeing would result in injury and also jobs where special and minute accuracy, inspecting and sorting exist. A high degree of visual efficiency, placing intense and continuous demands on the eyes by moving machinery and other objects are also considered important. Other important factors of seeing are acuity (near and far), depth perception (three dimensional vision), accommodation (adjustment of lens of eye to bring an object into sharp focus), field of vision (area that can be seen up and down or to the right or left while eyes are fixed on a given point) and color vision (ability to identify and distinguish colors).	5--Daily	2--Very Important	1-6
Repetitive Motions: Substantial repetitive movements (motions) of the wrists, hands, and/or fingers.	5--Daily	1--Somewhat Important	1-6
Sedentary Work: Exerting up to 10 pounds of force occasionally and/or a negligible amount of force frequently or constantly to lift, carry, push, pull or otherwise move objects, including the human body. Sedentary work involves sitting most of the time. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met.	5--Daily	1--Somewhat Important	1-6
Light Work: Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or a negligible amount of force constantly to move objects. If the use of arm	4--Weekly	1--Somewhat Important	5

and/or leg controls requires exertion of forces greater than that for Sedentary Work and the worker sits most of the time, the job is rated for Light Work.			
Medium Work: Exerting up to 50 pounds of force occasionally, and/or up to 20 pounds of force frequently, and/or up to 10 pounds of force constantly to move objects.	3--Monthly	1--Somewhat Important	5
Heavy Work: Exerting up to 100 pounds of force occasionally, and/or up to 50 pounds of force frequently, and/or up to 20 pounds of force constantly to move objects.	1--Annually	0--Not Important	5
Very Heavy Work: Exerting in excess of 100 pounds of force occasionally, and/or in excess of 50 pounds of force frequently, and/or in excess of 20 pounds of force constantly to move objects.	0--Never	Select	

2. WORKING CONDITIONS.

The working conditions section helps us to understand the physical environment you are subjected to while performing your job duties. This section does not apply to conditions like an old office building but only those factors that have to do with the job itself. In this section, please place an X by the condition that applies and one under the frequency that is most appropriate. The condition should be unique to your job and not generally applicable to all employees with the organization. **Please note, there is a choice for "Does Not Apply," if most of your work is in an office setting.**

☐ Does Not Apply

Condition	Less than 25% of the time	25-50% of the time	More than 50% of the time
Hazardous physical conditions (mechanical parts, electrical currents, vibration, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Atmospheric Conditions (fumes, odors, dusts, gases, poor ventilation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hazardous materials (chemicals, blood and other body fluids, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extreme temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate lighting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work space restricts movement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intense noise	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Environmental (disruptive people, imminent danger, threatening environment)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

V: EMPLOYEE, SUPERVISOR, AND DEPARTMENT HEAD SIGNATURES

ADDITIONAL COMMENTS

Are there any additional comments you would like to make to be sure you have described your job adequately? (Use additional sheets if necessary).

EMPLOYEE CERTIFICATION

I certify that the above statements and responses are accurate and complete to the best of my knowledge.

Signed: _____

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Date: _____

Fox Lawson & Associates, LLC

TO BE COMPLETED BY THE IMMEDIATE SUPERVISOR AND DEPT. HEAD

This section is to be used by the Supervisor to note any additional comments, additional duties or disagreements with any section of the questionnaire. The Supervisor should not change anything written by the individual filling out the questionnaire nor should they address any performance issues. Please remember that this questionnaire is intended solely for the purpose of accurately describing the job in question. Supervisors, please review the entire JAQ for completeness and accuracy. If there are sections that are not complete or are incorrect, please fill in the blanks when you review the questionnaire with the incumbent. If you disagree with any information provided or believe some information is missing, indicate below the question number and your comments. **Please note the form should have all three signatures to ensure all have read the questionnaire.**

Question No.	Comments
III (1)	"Education" - I do Not believe that a Class "A" Wastewater Certification should be required. I believe Entry level should state "Ability to obtain a Class "C" Certification within two years
III (2)	"Minimum time Required" IN my opinion should Read: Mechanical - 5 years
	Electrical - 5 years
	Collections - 5 years

Please check the appropriate statement:

☐ I agree with the incumbents' position questionnaire as written.

☐ The above modifications have been discussed with the incumbent, and the incumbent agrees with these modifications.

☒ The above modifications have been discussed with the incumbent, and the incumbent disagrees with these modifications.

I have noted the modifications made by my supervisor in the Comments Section above.

Employee Signature:

Larry Brown

Date:

12/23/08

Supervisor
Signature:

Dan Tondello

Date:

12/23/08

Department Head
Signature:

[Signature]

Date:

1/8/09

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE. AFTER YOU OR YOUR GROUP HAS COMPLETED YOUR PORTION OF THE QUESTIONNAIRE, PLEASE SUBMIT THE QUESTIONNAIRE TO YOUR SUPERVISOR FOR REVIEW, SIGNATURE, AND COMMENT. YOUR SUPERVISOR WILL SUBMIT THE COMPLETED QUESTIONNAIRE TO YOUR DEPARTMENT HEAD.

