

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? ☐ Yes ☒ No If yes, please list all employee names.

Division:

Department:

For Individual Questionnaires Only:

Employee Name: Wood Jeffrey L
(Last) (First) (Middle Initial)

Current Classification Title: Public Safety Applications Analyst

Division Services **Department** Police

Total Length of Time with organization 12 Years 10 months

Total Length of Time in Current Position 12 Years 10 months

Assigned Hours/Week;; from 0600 to 1500 **Assigned Days/Week** 5

Email: jeffw@ci.grandjct.co.us **Work Phone:** (970)244-3652

Immediate Supervisor:

Immediate supervisor reports to:

Name: Paula Creasy **Name:** Troy Smith

Title: communications center manager **Title:** Deputy Police Chief

Work Phone (970)244-3640 **Work Phone:** (970)244-3563

E-mail: paulac@ci.grandjct.co.us **E-mail:** troys@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.

This position requires highly advanced technical work involved in analysis and evaluation of existing or proposed 9-1-1 geographic information systems (GIS) data and designing solutions and technical procedures to process 9-1-1 GIS data for all areas of the Mesa County Enhanced 9-1-1 Emergency System. Since modern public safety systems are map-centric, they rely heavily on GIS concepts and data.

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 checked="" type="checkbox"/>	I do not officially supervise other employees (sign performance reviews).	
<input type="checkbox"/>	I evaluate and sign performance reviews of other full-time employees.	
<input type="checkbox"/>	I evaluate and sign performance reviews of part-time, temporary or contract employees.	
<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).	35
<input type="checkbox"/>	I make work assignments for others.	
<input type="checkbox"/>	I make hiring and hiring pay recommendations.	
<input type="checkbox"/>	I make hiring and hiring pay decisions.	
<input type="checkbox"/>	I recommend termination for poor performance.	
<input checked="" type="checkbox"/>	I provide advice to peers that they must consider carefully before making a decision.	30
<input checked="" type="checkbox"/>	I provide information to supervisors/management that they use in making a decision.	10

- 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

Communications Shift Supervisor
911 Telecommunicator
Systems/Network Analyst
Administrative Assistant

YOUR DIRECT REPORTS' JOB TITLES

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

☐ Full Time ☐ Part-Time ☐ Seasonal/Temp ☐ 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		
GJ Police Dept	Daily	GIS functions related to CAD
GJ Fire Dept	Monthly	GIS functions related to CAD
GJ City Planning Dept	Weekly	Addressing issues/ Annexations
GJ City GIS Dept	Weekly	GIS functions
GJ City IS Dept	Daily	CAD and GIS functions

2. Outside your organization:

Title of Person or Organization	How Often	For What Purpose
Ex: Vendors, Gen. Public		
Motorola (CAD Vendor)	weekly	Problem resolution
Intrado	Daily	9-1-1 data functions
Mesa County Planning	weekly	Addressing issues
Mesa County GIS	weekly	GIS functions
3N	Monthly	Database functions
Other Municiple Planning		Addressing issues/ Annexations

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	Plans, develops, coordinates, and modifies systems for implementation to create a comprehensive computerized geographic information system for Grand Junction Regional Communications Center and various local agencies involving the coordination of numerous participating agencies and departments. (Geodatabase & ATM)	appropriate modifications and additions to the Enhanced 9-1-1 system	Daily	38
2	Perform project administration duties, including planning and scheduling GIS projects; set and prioritize goals and objectives related to GIS; coordinate work schedules to ensure projects are completed in a timely manner.	appropriate modifications and additions to the Enhanced 9-1-1 system	Daily	5
3	Ensure integrity, quality and accuracy of the GJRCC GIS system; manage and review data input, conduct field investigations to check for missing or incorrect data features.	appropriate modifications and additions to the Enhanced 9-1-1 system	Daily	5
4	Perform a variety of complex processing functions including writing structured query language programs, avenue scripting, geocoding and visual basic programming.	Methodology to meet goals and needs	Daily	5
5	Perform systems and/or management analysis to define potential GIS applications for department and GJRCC division.	What methods can be implemented to enhance the 9-1-1 system	Monthly	1
6	Provide assistance and training to staff on various software applications related to GIS activities.	Best methods to train staff in application use	Weekly	1
7	Operate a full range of input/output devices; setup devices and troubleshoot problems.	problem solving	Daily	5

8	Plans and sequences processing steps for geographic database creation, application, display and document production; performs complex system modeling activities to ensure appropriate program development and system coordination and application utility; installs and modifies software and software updates ensuring that these conform to system specifications.	appropriate modifications and additions to the Enhanced 9-1-1 system. Methodology to meet goals and needs	Daily	5
9	Provide technical support to City departments and other agencies requesting GIS products; meet with end users to determine needs and product format; design, implement and monitor program to ensure client needs are met; publish and display spatial and relational information in the form of charts, tables, graphs, maps, slides and multimedia presentations.	Best methods to train staff in application use. Methodology to meet goals and needs	Daily	5
10	Oversee and participate in data conversion; translate data.	Methodology to meet goals and needs	Daily	1
11	Prepare system documentation; document and flow chart procedures.	Methodology to meet goals and needs	Daily	1
12	Updates and refines GIS layers and other coverages using digital orthophotos and products from City, County offices, local, state and federal agencies.	appropriate modifications and additions to the Enhanced 9-1-1 system	Daily	5
13	Ensure integrity, quality and accuracy of the Mesa county MSAG; manage and review data input, conduct field investigations to check for missing or incorrect data features.	appropriate modifications and additions to the Enhanced 9-1-1 system	Daily	10
14	Ensure integrity, quality and accuracy of the E9-1-1 telephone database (ANI/ALI); manage and review data input, conduct field investigations to check for missing or incorrect data features.	appropriate modifications and additions to the Enhanced 9-1-1 system	Daily	10
15	Ensure integrity, quality and accuracy of the 3N telephone database (Reverse 9-1-1); manage and review data input, create import files and maintain databases.	Methodology to meet goals and needs	Monthly	1
16	Plans, develops, coordinates, and modifies systems for implementation to create a comprehensive computerized geographic information system for Mesa County Sheriffs Office Spillman records system. involving the coordination of numerous participating agencies and departments. (Geobase)	Methodology to meet goals and needs	Weekly	1
17	Perform data upload and initialization of geofile with Geodatabase to CAD interface process.	appropriate modifications and additions to the Enhanced 9-1-1 system	Weekly	1
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
1,2,3,4,5,8,10,12,13,14,16,17	Advanced knowledge of the current Grand Junction Regional Communications Center GIS system
1,2,3,6,7,8,11,12,13,14,17	knowledge of the current Grand Junction Regional Communications Center Computer Aided Dispatch system
7	Knowledge of computer repair and maintenance procedures and techniques
3,4,7,8,9,10,15,16,17	Knowledge of data conversion and implementation procedures
1,2,3,4,5,7,8,10,11,12,13,14,15,16,17	Knowledge of principles and practices used in the design, implementation and operation of relational database management systems
1,3,4,5,6,8,9,11,	Knowledge of cartographic, demographic and statistical methods and standards
all	Knowledge of current trends in the 9-1-1 industry
1,3,12	Knowledge of surveying principles, procedures and techniques
1,2,3,4,5,8,9,10,11,	Knowledge of advanced mathematical principles
1,2,3,4,5,6,7,8,9,10,11,15,	Knowledge of modern office procedures, methods and programs
1,2,3,5,6,9,11,12,13,14,16,17	Knowledge of emergency services procedures and operating standards
14,14,15	Knowledge of complex telephony systems and wireless operating systems

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 type="checkbox"/>	<input type="checkbox"/>	Up to one year of specialized or technical training beyond high school
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Associate degree (A.S., A.A.) or two-year technical certificate
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Bachelor's degree
<input type="checkbox"/>	<input type="checkbox"/>	Other (explain):

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>
GIS systems experience	14 years	GIS systems experience	3 years
9-1-1 database experience	13 years	9-1-1 database experience	3 years
Computer Aided Dispatch	13 years	Computer Aided Dispatch	1 years

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

Geographic information systems and database 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.

None required, ENP (emergency number professional) certification beneficial

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
all	computer sytems	daily
1,2,3,6,9,13,14,15	telephone	daily
1,7,11	digital camera	monthly
11,15	printers and plotters	daily

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. Content and relevance of data to be used in the enhanced 9-1-1 emergency system. Daily I make decisions as to what content or procedures will enable the 9-1-1 employees to perform their duties to the best of their abilities.

2. User agencies and planning departments look to me as the final word on addressing issues which requires me to make decisions that will impact numerous systems and/or agencies.

3. It is up to me to prioritize my time between numerous activities to ensure that projects are completed and the goals of the agency are met.

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.	5--Daily	Select	6,9,17
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.	0--Never	Select	
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.	4--Weekly	Select	6,7
Kneeling: Bending legs at knee to come to a rest on knee or knees.	4--Weekly	Select	6,7
Crouching: Bending the body downward and forward by bending leg and spine.	2--Quarterly	Select	6,7
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	Select	6,7
Standing: Particularly for sustained periods of time.	1--Annually	Select	6,7
Walking: Moving about on foot to accomplish tasks, particularly for long distances.	0--Never	Select	
Pushing: Using upper extremities to press against something with steady force in order to thrust forward, downward or outward.	0--Never	Select	
Pulling: Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion.	0--Never	Select	
Fingering: Picking, pinching, typing or otherwise working, primarily with fingers rather than with the whole hand or arm as in handling.	5--Daily	Select	all

Grasping: Applying pressure to an object with the fingers or palm.	0--Never	Select	
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.	2--Quarterly	Select	6,7
Feeling: Perceiving attributes of objects, such as size, shape, temperature or texture by touching the skin, particularly that of fingertips.	0--Never	Select	
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	Select	all
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	Select	all
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	Select	all
Repetitive Motions: Substantial repetitive movements (motions) of the wrists, hands, and/or fingers.	5--Daily	Select	all
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.	4--Weekly	Select	6,7
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 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.	0--Never	Select	
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.	0--Never	Select	
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.	0--Never	Select	
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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Atmospheric Conditions (fumes, odors, dusts, gases, poor ventilation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hazardous materials (chemicals, blood and other body fluids, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extreme temperatures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate lighting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work space restricts movement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intense noise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental (disruptive people, imminent danger, threatening environment)	<input 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).

My position is unique in its nature. It is the only position of its kind in Mesa County. To find another position that is similar and encompasses all the duties described, it would require looking at some of the larger Counties and consolidated communications centers in the State.

EMPLOYEE CERTIFICATION

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

Signed:  Date: 12-15-08

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

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: Jeff Wood Date: 12/31/08
Supervisor Signature: Paula Cressy Date: 12/31/08
Department Head Signature: [Signature] Date: 1/12/2009

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.