

EMPLOYEE:

CLAIM #



# Job Analysis Form

ALTERNATE FORMAT AVAILABLE

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**JOB TITLE** Planning Council Administrative Specialist

**JOB CLASSIFICATION** Administrative Specialist II

**DOT TITLE** Administrative Assistant

**DOT NUMBER** 169.167-010

**DEPARTMENT** Public Health

**DIVISION** Prevention/HIV/AIDS

**# OF POSITIONS IN THE DEPARTMENT WITH THIS JOB TITLE** 1

**CONTACT'S NAME & TITLE** Jesse Chipps, HIV/AIDS Planning Council Administrator

**CONTACT'S PHONE** 206-205-5511

## ADDRESS OF WORKSITE

400 Yesler Way

Seattle, WA 98104

And various meeting sites throughout King County.

**VRC NAME** Kyle Pletz

**DATE COMPLETED** 12/9/04

**VRC NAME** Jeff Casem

**DATE REVISED** 8/20/09

## WORK HOURS

40 hours per week, Monday through Friday 8:00am-5:00pm with some evenings and weekends.

**OVERTIME** (Note: Overtime requirements may change at the employer's discretion)

Required, on a rare occasion.

## JOB DESCRIPTION

This position supports the work of the King County Executive appointed HIV/AIDS Planning Council, a diverse forty member volunteer body responsible for prioritizing and allocating millions of dollars of HIV/AIDS prevention and care funding. The Administrative Specialist II also provides support to staff; both the Counsel Administrator and the Assessment and Evaluation Coordinator. The Administrative Specialist II travels to multiple locations to set up for and clean up after events.

## ESSENTIAL ABILITIES FOR ALL KING COUNTY JOB CLASSIFICATIONS

1. Ability to demonstrate predictable, reliable, and timely attendance.
2. Ability to follow written and verbal directions and to complete assigned tasks on schedule.
3. Ability to read, write & communicate in English and understand basic math.
4. Ability to learn from directions, observations, and mistakes, and apply procedures using good judgment.
5. Ability to work independently or part of a team; ability to interact appropriately with others.
6. Ability to work with supervision, receiving instructions/feedback, coaching/counseling and/or action/discipline.

7. Ability to speak and write Spanish, and to translate documents.

### **JOB SPECIFIC REQUIREMENTS**

Must have skills in working independently and as part of a team. Must have strong written and verbal communication skills, including experience with minute-taking (these skills will be tested). Must have Knowledge of HIV/AIDS and the terminology of that field. Must have proficiency with Microsoft Office and Outlook programs (these skills will be tested). Must possess strong organizational skills and have skill in providing excellent customer service with discretion, patience and professionalism in person and over the phone. Must have demonstrated knowledge of good customer service etiquette and concepts. Must have skill in communicating in a pleasant, non-judgmental, respectful, culturally sensitive manner under varying levels of stress (this may include high levels of noise, limited resources, etc.); handling difficult interpersonal interactions with discretion and diplomacy; maintaining confidentiality; using multi-line telephone systems as well as other office equipment including TDD machines, fax machines, copiers, label makers, and printers; prioritizing and completing multiple tasks simultaneously; problem solving; working with a diverse population; adapting to changes in workload demands. Must have the ability to move up to 40 pounds from one location to another and the ability to repeatedly sit and stand throughout the day. Must also have the ability to learn, interpret, and apply complex policies and procedures. Must have the ability to attend meetings at various locations during the day with some evening and weekend hours. Must possess a valid Washington State driver's license and good driving record. The selected candidate will be required to pass a thorough background investigation. Employees are required to protect the privacy and security of protected health information as defined in State and Federal Law

### **ESSENTIAL FUNCTIONS**

1. Interacts with Council members, Council applicants and members of the public in person at public meetings, by phone, by mail and by email in English and Spanish. May deal with sensitive and /or potentially volatile situations. Helps Council volunteers to feel welcome and appreciated.
2. Utilizes Microsoft Office, Outlook and other programs to take minutes and edit them, schedule meetings, create fliers, write letters, fill out billing paperwork, track billing and other tasks. Data entered will include complex text and numbers, and requires knowledge of HIV/AIDS terminology.
3. Procures products and services which regularly require approval from the Director's Office and ensures that bills are paid in a timely and accurate manner.
4. Performs bookkeeping, oversight and distribution of member accommodations (petty cash and taxi vouchers) and other expenses.
5. Performs meeting planning, including surveying members and staff for times, securing appropriate meeting space, obtaining vendors and ordering food, drafting press releases and tracking them through the approval and release process, ensuring that members have the means to attend meetings, set up tables, chairs and audio/visual equipment as well as clean up after meetings and make reminder calls
6. This position will be trained to provide coverage for the HIV/AIDS Program's reception desk, and crossed trained on other tasks. Incumbents may be required to train other staff on the duties performed by this position.

**OTHER TOOLS & EQUIPMENT USED**

Equipment used may include a computer, laptop computer, label maker, multi-line telephone, printer, copy machine, fax machine, folding tables, conference room chairs, conference room tables, projector, television, VCR, audio/video equipment, County vehicle, presentation equipment, hand truck/cart, food and documents.

**PHYSICAL DEMANDS AS JOB IS TYPICALLY PERFORMED**

Continuously = occurs 66-100% of the time  
Frequently = occurs 33-66% of the time  
Occasionally = occurs 1-33% of the time  
Rarely = may occur less than 1% of the time  
Never = does not ever occur (such demands are not listed)

Highly Repetitive = Repeating the same motion every few seconds with little or no variation for more than two hours total per day.

**This job is classified as**

Medium—exerting 20 to 50 pounds of force occasionally, and/or 25-50 pounds of force frequently, and/or 10-20 pounds of force constantly.

**Standing**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally on tile, carpet, linoleum, cement, inclines and uneven surfaces for up to 30 minutes at a time for up to 2.5 hours total in a work shift. Most commonly occurs while setting up presentation rooms, conversing with clients and co-workers, packing up presentation equipment and using the copy machine.

**Walking**

Health Care Provider initials if restricted \_\_\_\_\_

Frequently on tile, carpet, linoleum, cement, inclines and uneven surfaces for distances of up to 200 feet for up to 30 minutes at a time for up to 4 hours total in a work shift. Most commonly occurs while setting up events as well as loading and unloading equipment.

**Sitting**

Health Care Provider initials if restricted \_\_\_\_\_

Frequently to continuously on an automobile seat, office chair or conference room chair (sometimes unpadded plastic) for up to 2.5 hours at a time for up to 7.5 hours total in a work shift. Most commonly occurs while performing phone and computer duties as well as when attending public meetings.

**Climbing stairs**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for up to 1 minute at a time while climbing up to 2 flights for up to 15 minutes total in a work shift. Most commonly occurs while loading and unloading equipment as well as when traversing to and from conference rooms. Not all conference room buildings have elevators.

**Balancing**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally on wet or slippery surfaces (such as wet leaves) for up to 5 minutes at a time for up to 30 minutes total in a work shift. Most commonly occurs while loading and unloading equipment between County vehicle and meeting sites.

**Bending neck up**

Health Care Provider initials if restricted \_\_\_\_\_

Rare for up to 30 seconds at a time for up to 5 minutes total in a work shift. Most commonly occurs while setting up folding tables and audio/video presentation equipment.

**Bending neck down**

Health Care Provider initials if restricted \_\_\_\_\_

Frequently for up to 2 hours at a time for up to 5 hours total in a work shift. Most commonly occurs while setting up audio/video presentation equipment as well as performing computer duties, taking meeting minutes and reviewing documents.

**Bending/Stooping**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for up to 2 minutes at a time for up to 20 minutes total in a work shift. Most commonly occurs while setting up folding tables and audio/video presentation equipment.

**Kneeling**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for up to 2 minutes at a time for up to 20 minutes total in a work shift. Most commonly occurs while setting up folding tables and audio/video presentation equipment.

**Squatting**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for up to 2 minutes at a time for up to 20 minutes total in a work shift. Most commonly occurs while setting up folding tables and audio/video presentation equipment.

**Operating Controls with Feet**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for up to 30 minutes at a time for up to 1.5 hours total in a work shift while traveling to and from the work and meeting sites in a County vehicle.

**Reaching above shoulder height**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for up to 30 seconds at a time for up to 1 hour total in a work shift while organizing council materials up on shelves.

**Reaching at waist to shoulder height**

Health Care Provider initials if restricted \_\_\_\_\_

Frequently and highly repetitive for up to 1 hour at a time for up to 5 hours total in a work shift while manipulating documents, performing computer duties and setting up for meetings.

**Reaching at knee to waist height**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for up to 5 minutes at a time for up to 1 hour total in a work shift while setting up folding tables and audio/video presentation equipment as well as when loading and unloading equipment.

**Reaching at floor to knee height**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for up to 2 minutes at a time for up to 20 minutes total in a work shift. Most commonly occurs while setting up folding tables and audio/video presentation equipment as well as utilizing file drawers.

**Lifting 1-10 pounds**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for up to 30 seconds at a time for up to 1 hour total in a work shift. Most commonly occurs

with weights of 5-10 pounds while setting up meeting rooms, which includes documents, presentation equipment and food.

**Carrying 1-10 pounds**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for distances of up to 50 feet for up to 30 seconds at a time for up to 1 hour total in a work shift. Most commonly occurs with weights of 5-10 pounds while setting up meeting rooms, which includes documents, presentation equipment and food. A cart is available to reduce some carrying.

**Lifting 11-20 pounds**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for up to 30 seconds at a time for up to 1 hour total in a work shift. Most commonly occurs with weights of 13-18 pounds while setting up meeting rooms, which includes stacking and un-stacking chairs as well as loading and unloading presentation materials and equipment.

**Carrying 11-20 pounds**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for distances of up to 50 feet for up to 30 seconds at a time for up to 1 hour total in a work shift. Most commonly occurs with weights of 13-18 pounds while setting up meeting rooms, which includes stacking and un-stacking chairs as well as loading and unloading presentation materials and equipment. The employee also may carry folding tables with the assistance of another person.

**Lifting 21-50 pounds**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for up to 30 seconds at a time for up to 10 minutes total in a work shift. Most commonly occurs with weights of 25-40 pounds while setting up meeting rooms, which includes stacking and un-stacking chairs as well as loading and unloading presentation materials and equipment. The employee also may carry folding tables with the assistance of another person. Folding tables can weigh as much as 80 pounds, requiring a 40 pound lift between two people. Lifting assistance is available at some locations but not others.

**Carrying 21-50 pounds**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for distances of up to 20 feet for up to 30 seconds at a time for up to 10 minutes total in a work shift. Most commonly occurs with weights of 25-40 pounds while setting up meeting rooms, which includes stacking and un-stacking chairs as well as loading and unloading presentation materials and equipment. The employee also may carry folding tables with the assistance of another person. Folding tables can weigh as much as 80 pounds, requiring a 40 pound lift between two people. Lifting assistance is available at some locations but not others.

**Pushing and Pulling**

Health Care Provider initials if restricted \_\_\_\_\_

Occasionally for distances of up to 100 feet for up to 20 minutes at a time with a force of 15-20 pounds for up to 1 hour total in a work shift while moving presentation materials on a cart. The employee also pushes and pulls meeting room tables using up to 80 pounds of force. The tables at one of the facilities have wheels and require 15 pounds of force.

**Handling**

Health Care Provider initials if restricted \_\_\_\_\_

Frequently and highly repetitive for up to 1 hour at a time for up to 3 hours total in a work shift while loading and unloading equipment, setting up presentation materials and equipment as well as when using the computer mouse.

**Operating Controls with Hands**

Health Care Provider initials if restricted

Frequently and highly repetitive for up to 30 minutes at a time for up to 3 hours total in a work shift while traveling to and from the work and meeting sites as well as when operating the computer mouse.

**Fingering**

Health Care Provider initials if restricted

Continuously and highly repetitive for up to 2 hours at a time for up to 7.5 hours total in a work shift while keyboarding, recording meeting minutes, manipulating documents, manipulating presentation equipment and materials as well as using the computer mouse.

**Talking**

Health Care Provider initials if restricted

Frequently for up to 10 minutes at a time for up to 3 hours total in a work shift while conversing with co-workers, supervisors, Council members and volunteers.

**Hearing**

Health Care Provider initials if restricted

Continuously for up to 2 hours at a time for up to 7.5 hours total in a work shift while conversing with co-workers, supervisors, Council members and volunteers as well as when driving a County vehicle.

**Seeing**

Health Care Provider initials if restricted

Frequently for up to 30 minutes at a time for up to 5 hours total in a work shift while driving a County vehicle, organizing presentation materials and reading documents.

**ENVIRONMENTAL FACTORS**

Work is performed in a variety of setting including a Public Health facility with access and exposure to confidential information. This position can interact with the general public which can include potentially hostile persons. This position also has direct contact with food products. Tabling at community events up to 4 hours at a time outside.

**The noise level is**

HCP Initials if Restricted

Approximately 50-70 decibels. The noise is caused by general office sounds and a vacuum cleaner.

**Work environment may include the following exposure(s):**

HCP Initials if Restricted

Outside weather: Occasionally

Odors: Rare

Moving mechanical parts: Occasionally

Vibration: Occasionally


KING COUNTY JOB ANALYSIS COMPLETED ON:  
JOB TITLE: Administrative Assistant  
EMPLOYEE:

DOT #: 169.167-010  
CLAIM #

**POTENTIAL MODIFICATIONS TO JOB**

A cart can be used to help reduce the amount of carrying (some carrying can not be eliminated due to the lack of elevators in some facilities).

KING COUNTY JOB ANALYSIS COMPLETED ON:  
JOB TITLE: Administrative Assistant  
EMPLOYEE:

DOT #: 169.167-010  
CLAIM #

### SIGNATURES

Signatures on this page are obtained before the document becomes available for use and are not required each time the document is reused. Obtained signatures are kept on file at King County Safety & Claims. The Health Care Provider signature section is separate and appears on the following page.

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Printed name & title of VRC evaluator

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Signature of VRC evaluator

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Date

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Printed name & title of contact

---

Signature of contact

---

Date

---

Printed name & title of employee

---

Signature of employee

---

Date

**HEALTH CARE PROVIDER SECTION**  
Check all that apply

- The employee is released to perform the described duties without restrictions on performance or work hours as of \_\_\_\_\_.
  
- The employee is released to perform the described duties on a reduced schedule as of \_\_\_\_\_. The recommended schedule is:  
\_\_\_\_\_  Temporary until \_\_\_\_\_  Permanent as of \_\_\_\_\_
  
- The employee is released to perform the described job with the following modifications:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  Temporary until \_\_\_\_\_  Permanent as of \_\_\_\_\_
  
- The employee is not released to perform the described duties due to the following job functions:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  Temporary until \_\_\_\_\_  Permanent effective \_\_\_\_\_
  
- The employee is unable to work in any capacity.  
A release to work is:  anticipated by \_\_\_\_\_  Not expected

The limitations are due to the following objective medical findings:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Printed or typed name and phone number of Health Care Provider

\_\_\_\_\_  
Signature of Health Care Provider

\_\_\_\_\_  
Date