

KITSAP COUNTY 614 Division St. Port Orchard WA 98366

Employee Name: _____

DEPARTMENT: EMERGENCY MANAGEMENT PHYSICAL REQUIREMENTS: DISASTER RESERVIST/INCIDENT MANAGEMENT TEAM MEMBER

Positions in this class typically require:

- Work is performed in the office, on-site at incidents, and at meetings throughout the County and State.
- The incumbent must be able to meet the travel requirements of this position.
- Attendance at meetings and working with volunteers will require evening and other non-standard work hours.
- Performance as 24-hour duty officer is required.
- This position requires regular lifting of boxes of manuals and brochures weighing up to 40 pounds.
- Substantial telephone and in-person contact with the public, special interest groups, County, City response organizations and tribal officials, appointed police and fire chiefs, other government agencies and County departments require that the incumbent have the ability to communicate effectively.
- Requires the ability to operate a personal computer, radio, and other emergency equipment. Must be able to collect, assimilate and analyze data and information related to operations, equipment and functions and prepare appropriate recommendations.
- Must be able to demonstrate various emergency preparedness techniques such as "drop, cover and hold."

Activity	Never 0%	Inter. 1–10%	Occas. 11-33%	Freq. 34-66%	Cont. 67+%	Further Description
1. Walking			x			Alternates standing and walking when completing job tasks
2. Balance					x	
3. Lifting	-	-	-	-	-	
0-10 lbs.			x			Office supplies, paperwork, and files
11-20 lbs.		x				
21-35 lbs.		x				
36-50 lbs.			x			Boxes of brochures and materials
50 + lbs.	x					

PHYSICAL AND MENTAL DEMANDS



Employee Name: _____

	Never	Inter.	Occas.	Freq.	Cont.	Further
Activity	0%	1–10%	11-33%	34-66%	67+%	Description
4. Carry	-	-	-	-	-	
0-10 lbs.			x			Office supplies, paperwork, and files
			~			
11-20 lbs.		x				
21-35 lbs.		x				
36-50 lbs.	x					
5. Pushing/ Pulling	-	-	-	-	-	
0-10 lbs.		x				File drawers, office equipment, files
11-20 lbs.		x				
21-35 lbs.	x					
36-50 lbs.	x					
6. Climbing		x				May periodically climb stairs
7. Twisting		x				Accessing files, office supplies and equipment
8. Reaching		x				ű
9. Grasping		x				Office supplies, equipment, phone, radio
10.Stooping/ Bending		x				To access low filing cabints/shelves
11. Sitting					x	
12.See/Hear/ Speak	-	-	-	-	-	
Sees					x	Documents, computer screen
Color Discrim.					x	Files may ber color coded
Visual						Computer screen
Displays Audible Signals					x	Supervisor's directions & phones if applicable



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Oral Direction					x	Supervisor's directions and interaction with co-workers
Activity	Never 0%	Inter. 1–10%	Occas. 11-33%	Freq. 34-66%	Cont. 67+%	Further Description
13. Working Cond/Exp.	-	-	-	-	-	
Uneven Ground		x				On site visits out of the office
Work Outside		x				
Work Inside					x	Office environment
High Elevations	x					
Moving Objects	x					
Slippery Surface		x				May be exposed when visiting incident sites outside of office
Wetness		x				"
Temp. Extremes		x				
Confined Spaces	x					
Special Clothing					x	semi-professional attire, PPE when necessary
Vibration	x					
Use of Solvents	x					
Use of Detergent	x					
Chemical Contact	x					
Chemical Vapors	x					
Dust or Particles		x				Nuisance dust

PHYSICIAN TO COMPLETE

SUMMARY DETERMINATION (Please check appropriate item)

Worker can fully perform the job with no restrictions as of the date below



Employee Name: _____

Worker requires restrictions to perform the job. The restrictions are described on the Physician's Estimate of Physical Capacities.

Physician Signature

Date

ADDITIONAL COMMENTS: