

ADA Essential Functions Worksheet

Date: August 14, 2023

Department: DPW Highway Operations

Classification Title: Patrol Superintendent

I verify that the following information accurately describes the essential functions of the job listed.

Hans Guderyon	(signature on file)	Highway Operations Manager
Supervisor Name:	Print and Sign	Title: Print

1. **General Purpose of the Work:**
Plans, directs, coordinates, evaluates and verifies daily duties of Patrol Workers and Highway operations staff
2. **Major tasks that are performed as part of the position:**
Daily Duties: Plans daily staff duties, verifies timecard, investigates and responds to public inquiries, visits and inspects Waukesha County and WISDOT roads and Right of Ways to ensure safety, reconciles invoices for billing

Regular Periodic Duties: Same as above

Occasional or Infrequent Duties: Move equipment, assist/train Patrol workers in daily duties
3. **Machines or equipment used in performing the essential functions of the job:**
Computer, phone, car occasional heavy equipment when staff is unavailable
4. **Does the position require the ability to work any shifts and/or day? Specify.**
The position is required to be On-Call 24 hours a day for seven days once every four weeks, during which week they are available to respond to emergencies day or night.
5. **Physical Demands and Work Conditions:**
Complete the following activities list identifying the physical demands of the job and the work conditions under which the work is performed.

Assess the amount of time required to perform those activities or work under the conditions identified.

Use the criteria listed below to determine the amount of time each day.

ACTIVITIES	Is the Activity Performed? Place an "X" in the appropriate column		Frequency If the activity is performed, place an "X" in the appropriate frequency of performance column		
	No	Yes	Occasional 0 – 33% of the workday	Frequent 34 – 66% of the workday	Continuous 67 – 100% of the workday

SITTING		X		X	
STANDING		X	X		
LIFTING		X	X		
0 – 20 lbs. (light)		X	X		
21 – 50 lbs. (moderate)		X	X		
51 – 100 lbs. (heavy)		X	X		
100 lbs. (very heavy)	X				
Maximum Lift: 200 lbs.	X				
Lifting from Arm Level	X				
Lifting from Floor Level		X	X		
PUSHING		X	X		
Light objects		X	X		
Medium objects		X	X		
Heavy objects	X				
On/off elevator	X				
Up/down incline	X				
REPETITIVE MOTIONS					
PULLING		X	X		
Light objects		X	X		
Medium objects		X	X		
Heavy objects	X				
On/off elevator	X				
Up/down incline	X				
WALKING		X		X	
On smooth surface		X		X	
On uneven surface		X	X		
Up/Down Stairs		X	X		
RUNNING	X				
On smooth surface	X				
On uneven surface	X				
Up/Down stairs	X				

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REPETITIVE MOTIONS Continued

CLIMBING		X	X		
Stairs					
Ladders		X	X		
Inclines		X	X		
Scaffolds	X				
AGILITY					
BALANCE		X		X	
REACHING		X	X		
Below shoulder					
Above shoulder		X	X		
TRUNK MOVEMENT		X	X		
Rotation					
Bending forward		X	X		
Bending back					
Bending to side					
Bending down		X	X		
LOW LEVEL WORK	X				
Crawling		X	X		
Kneeling		X	X		
Squatting		X	X		
HAND/FINGER DEXTERITY:		X			
Fine Finger Movements		X			
Unilateral		X			
Bilateral		X			
Speed is vital	X				
Hold/manipulate small objects		X			
CARRYING OBJECTS		X	X		
On smooth surface		X	X		
On uneven surface		X	X		
Up/down stairs		X	X		

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AGILITY Continued					
CARRYING OBJECTS Up ladders or stools	X				
DRIVING Class "D" driver's license needed (i.e., regular driver's licence)		X			X
Commercial Driver's License Needed (specify class _____)	X				
VISION Near vision acuity		X		X	
Far vision acuity		X		X	
Vision – Color Identification					
Vision – Depth Identification		X		X	
Talking in Person		X		X	
Talking via Phone or On Radio		X		X	
Hearing in Person		X		X	
Hearing via Phone or On Radio		X		X	
WORKING CONDITIONS					
Inside		X			X
Outside		X	X		
Work with others		X			X
Work alone		X	X		
Work near others		X			X
Cramped workspace (limits motion)		X	X		
Toxic Chemicals	X				
Dusts		X	X		
Vapors / Fumes		X	X		

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WORKING CONDITIONS Continued					
Heat		X	X		
Cold		X	X		
Noise		X	X		
Vibration	X				
Radiation	X				
Computer Work		X			X
Pathogens/blood and body fluids	X				
Respirator Use – Specify (SCBA)	X				
Gas Mask –if on CERT Team	NA				
WORK HOURS					
Regular Overtime Required		X		X	