

Brooke Weston Trust – Job Families

Job Evaluation Questionnaire

Job title

Cleaner

General Questions

Please describe in one or two sentences the purpose of your job?

To undertake cleaning duties to maintain a high standard of cleanliness within the school, as directed.

What are the main tasks/duties/responsibilities of your job?

1. Light cleaning duties (e.g. dusting, polishing, vacuuming)
2. Deep cleaning duties (involving chemicals and more challenging duties)
3. Cleaning using large machinery (e.g. carpet cleaners)

% of time

Roughly, what percentage of time do you spend on each?

	Main tasks/duties/responsibilities	% of time
1	Light cleaning duties (e.g. dusting, polishing, vacuuming)	80%
2	Deep cleaning duties (involving chemicals and more challenging duties)	15%
3	Cleaning using large machinery (e.g. carpet cleaners)	5%
4		
5		

Are there any tasks/duties which you do occasionally, or at a certain time of the year? If yes, please list and state how often you do them.

	Occasional tasks	How often you do them
1	Deep clean (involving additional moving of furniture, high level cleaning etc)	2 days per term
2	Carpet shampoo / wet clean	2 days per term
3	Litter picking (external)	1 per year
4		

1. What knowledge is needed to be able to do your job properly under the listed headings and how is the knowledge normally acquired?		
Type of knowledge	What knowledge needed and for what purpose	How normally acquired
E.g. Procedural	Processing an order for stationery	On the job instruction and experience – minimum 1 year
(1) Literacy and numeracy	Functional literacy and numeracy skills are required for reading instructions of materials and chemicals for safe use	No formal qualification needed but tested at interview
(2) Procedural (e.g. procedures instructions for carrying out tasks)	Basic knowledge required of safe procedures for storage, handling and mixing of cleaning products. Ability to follow daily routines / procedures	On job training
(3) Equipment (e.g. machines, tools, instruments)	Basic knowledge required of how to operate a limited range of cleaning equipment	On job training
(4) Administrative systems	Not required beyond signing in/out and reporting absences	On job training
(5) Organisational (e.g. own and other sections/departments), including arrangements and policies	Basic knowledge of the structure of the school day required to ensure appropriate movements around the building so as not to impact teaching and learning	On job training
(6) Specialist (e.g. finance, IT, social work), including practical, theoretical and conceptual knowledge	Not required	
(7) Other languages and cultures	No specific knowledge required, but a general awareness and appreciation of other cultures and languages important in order to positively promote diversity and equality	On job training
(8) Other, please specify	Not required	

Mental Skills

This measures what analytical, problem solving and judgement skills you need to do the job. It also looks at creativity and development skills, design, handling people, developing policies and procedures and planning and strategy.

1. In the boxes below, give 2 examples of decisions or recommendations you make, or problems you solve, on a day to day, or regular, basis.

Example 1

Prioritising time spent on specific cleaning duties to ensure that entire area for which you are responsible is cleaned to an acceptable standard.

Example 2

Cleaning different areas or changing routine in response to a particular requirement.

2. In the box below, give an example of the most difficult or important decisions or recommendations you make or problems you solve.

Replacing worn out cleaning tools with new equipment to ensure standard of cleanliness is maintained to appropriate level.

How often do you expect to take a decision or solve a problem of this type (e.g. once a month, twice a year?)

1	times per	term
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3. Do you ever have to interpret or analyse information or situations in order to make a decision or recommendation, or to solve a problem?

No	<input checked="" type="checkbox"/>	Go to the next question	Yes	<input type="checkbox"/>	Give an example in the box below:
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Example of decision / recommendation / problem:

Indicate nature and complexity of information / situation:

How do you interpret or analyse the information / situation?

4.	What are the requirements of your job for creative or developmental skills (in the broadest sense e.g. designing a page layout, working out how to deal with a difficult client, drawing up a new policy or procedure?)		
Please rank the following statements according to how typically they apply to the job (1 = most typical, 2 = next most typical etc.) Leave blank any statements which do not apply.			
1	The work is designed in such a way that creative and developmental skills are not necessary		
	The work requires creative skills for solving straightforward problems		
	The work requires creative and developmental skills for solving varied problems		
	The work requires creative and developmental skills for solving difficult problems		
	The work requires creative and developmental skills for producing innovative solutions to major problems.		
Give an example for the option you have marked 1, as being most typical			
In the main the role involves following instructions and set procedures			
5.	Does your work require you to plan ahead or organise for the future?		
No <input checked="" type="checkbox"/>	Go to the next question		
Yes <input type="checkbox"/>	What period do these planning/organising activities mainly cover? (NB: please note the period over which planning activities take place, not the time-scale for what is planned)	Short term (days, up to weeks)	<input type="checkbox"/>
		Medium term (months, up to a year)	<input type="checkbox"/>
		Long term (more than a year)	<input type="checkbox"/>
	Please give a typical example below:		
6.	Are any other forms of mental skill required for your job? If so, please list them below and explain what purposes you require them for.		
Mental Skill		Purpose required for	

Interpersonal and communication skills

This factor looks at the context, complexity and nature of the subject matter to be communicated; and the context, form, process and potential difficulty of the actual interaction with the recipient(s).

1.		
Tick the boxes below to show which forms of interpersonal and communication skills are needed for your job. Say what each is used for and with whom they are used.		
Form of skill		Used for and with whom
<i>Example: Caring Skills</i>	<input checked="" type="checkbox"/>	Providing personal services to clients in their homes
<i>Example: Caring Skills</i>	<input checked="" type="checkbox"/>	Assessing client's care needs
<i>Example: Negotiating Skills</i>	<input checked="" type="checkbox"/>	Negotiating tender contract details
Caring skills	<input type="checkbox"/>	
Training skills	<input type="checkbox"/>	
Team working skills	<input checked="" type="checkbox"/>	To ensure that all tasks are completed, including those of your peers
Motivational/team leading skills – includes own staff	<input type="checkbox"/>	
Advising, guiding skills	<input type="checkbox"/>	
Persuading, influencing skills	<input type="checkbox"/>	
Counselling skills	<input type="checkbox"/>	
Conciliating skills	<input type="checkbox"/>	
Advocacy skills	<input type="checkbox"/>	
Negotiating skills	<input type="checkbox"/>	
Oral (spoken) communication skills	<input checked="" type="checkbox"/>	To establish good working relationships with colleague and users of space being cleaned
Written communication skills	<input type="checkbox"/>	
Oral presentation skills	<input type="checkbox"/>	
Other interpersonal or communication skills	<input type="checkbox"/>	
2.		
Are you required to use a language (oral or written) other than English?		
No	<input checked="" type="checkbox"/>	Go to the next question
Yes	<input type="checkbox"/>	Complete the table below
Language	Used to communicate with.	Used for.

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3. Are you required to use any form of recognised sign language?

No Go to the next section – Physical Skills

Yes Complete the table below

Form of sign language	Used to communicate with	Used for

Physical skills

This measures the physical skills required to do the job, including finger dexterity, hand-eye co-ordination of limbs and sensory co-ordination.

1.			Tick 1 box to indicate the keyboard skills needed for your job:		
Required			Used for.		
Not required, or 2-finger operation with no time constraints	<input checked="" type="checkbox"/>		Occasional completion of computer based training		
Precision required, keyboard used for some aspects of work	<input type="checkbox"/>				
Precision and speed, keyboard skills integral to main duties	<input type="checkbox"/>				
Considerable precision and speed, keyboard skills e.g. for data input	<input type="checkbox"/>				
2.			Tick 1 box to indicate whether driving skills are needed for your job, and state the nature and complexity of the vehicle driven.		
Required			Nature of Vehicle	Purpose of driving	
Not required (other than for driving to and from work)	<input checked="" type="checkbox"/>				
Normal driving skills e.g. for travel between work locations	<input type="checkbox"/>				
Other driving skills e.g. for specialist vehicles/plant	<input type="checkbox"/>				
3.			Are there any other forms of physical skill (dexterity, co-ordination or sensory skills) required for your job (e.g. for operating equipment, machinery or tools for preparing food)?		
No	<input type="checkbox"/>	Go to the next section – Initiative and Independence			
Yes	<input checked="" type="checkbox"/>	Complete the table below			
Skill	Used for		Precision / Speed		
E.g. Dexterity	Peeling, chopping vegetables		Economical use, portion control, restricted time		
Coordination	Safe use of cleaning machinery, avoiding harm and damage whilst cleaning effectively		Efficient use		

Initiative and Independence

This factor looks at how independent you have to be within your job. This takes into account the nature and level of supervision of the jobholder, the level and degree of direction and guidance provided by policies, precedents, procedures and regulations, and whether the jobholder works on their own or with others.

1.	How do you know what you should be doing each day? Explain briefly below:		
As directed by supervisor and through established cleaning rotas			
2.	What instructions, procedures, policies, legislation, govern you work? Explain briefly below:		
Internal school policies regarding professionalism and conduct COSHH – storage and use of chemicals Manual handling and general health and safety procedures to minimise risk and hazards			
3.	Give 2 examples of problems or decision you would deal with yourself, without reference to a supervisor or manager.		
Example 1			
Deciding what product is most suitable/appropriate to clean an identified spill or stain			
Example 2			
Prioritising time spent on the tasks delegated for that day taking account of any particular issues that are apparent.			
4.	Give 2 examples of problems or decisions you would refer to your supervisor or manager:		
Example 1			
Reporting an identified hazard relating to health and safety where it cannot be easily and swiftly dealt with.			
Example 2			
Any safeguarding issue or concern relating to the welfare of a child.			
5.	What form(s) of direction, management or supervision do you receive, from whom and how often?		
	Form of direction etc.	From whom (job title)	How often (times per week)
	E.g. Regular team meetings	Supervisor – Senior Social Worker	Every 2 weeks

Daily review of work completed with feedback as necessary	Supervisor	Daily
Team Briefings/discussions	Supervisor	3 per year

Physical Demands

This question establishes the normal physical demands which are placed on anyone doing the job.

1.	Does your job require you to sit in a fixed or constrained position (e.g. sitting at a computer keyboard or in a vehicle driving seat, standing at a drawing board)?			
No	<input checked="" type="checkbox"/>	Go to the next question		
Yes	<input type="checkbox"/>	For what purposes?		
		How long do you have to maintain this position at any one time?		
		And how often?		times per
2.	Does your job involve any other physical demands?			
No	<input type="checkbox"/>	Go to the next section – Mental Demands		
Yes	<input checked="" type="checkbox"/>	Go to the next question		
3.	Does your job require periods of standing and walking beyond normal movement between indoor working area?			
No	<input type="checkbox"/>	Go to the next question		
Yes	<input checked="" type="checkbox"/>	For what purposes?	Completion of general cleaning duties	
		How long are these periods of standing and walking?	3 hours (LONGER IF EXTENDED SHIFT)	
		And how often do they occur?	1	times per
4.	Does your job require lifting and/or carrying of items or equipment (beyond light office materials, such as pens, pencils and limited quantities of paper)?			
No	Go to the next question			
Yes	<input checked="" type="checkbox"/>	Complete the table below:		
What and why	How heavy	How far	For how long	How often % working time
E.g. bucket of water, for floor washing	5 kg?	50m (up flight of stairs)	5 mins	1 per day – 2%
Buckets of water for floor mopping	5kg	50m	5 min	2 per day
5.	Does your job require pushing and/or pulling of items or equipment?			

No	<input type="checkbox"/>	Go to the next question		
Yes	<input checked="" type="checkbox"/>	Complete the table below:		
What and why	How heavy	How far	For how long	How often % working time
Buckets	10kg	100m	5 mins	1% / 2 per day
Cleaning machinery (e.g vacuum)	5-10kg	100m	30 mins	20%
6.	Does your job require rubbing, scrubbing, digging or similar form of physical effort?			
No	<input type="checkbox"/>	Go to the next question		
Yes	<input checked="" type="checkbox"/>	Which of these, and for what purposes?	Scrubbing surfaces and floors	
		How long at any one time do you rub and/or scrub, dig or similar?	20 minutes at a time	
		And how often?	Up to 2 times per day	
7.	Does your job require working in an awkward position (e.g. crouching, kneeling)?			
No	<input type="checkbox"/>	Go to the next question		
Yes	<input checked="" type="checkbox"/>	Complete the table below:		
Position	Why	For how long	How often % working time	
E.g. Kneeling	To scrub kitchen floor	20-30 mins	1 per day – 10%	
Kneeling	Cleaning floors and inside cupboards	20 mins	10%	
Stretching	Dusting and glass cleaning (high and low level)	15 mins	10%	
8.	Does your job involve any other form of physical demand?			
Physical demand	Why	For how long	How often % working time	

Mental Demands

This looks at the degree and frequency of your concentration, alertness and attention to detail required by your job.

1.	Does your job require more than general awareness and sensory (i.e. using eyes, ears, touch or smell) attention, (e.g. more than general attention for watching children at play, word processing text or inputting data)?		
No	<input type="checkbox"/>	Go to the next question	
Yes	<input checked="" type="checkbox"/>	Complete the table below:	
Form of sensory attention	Needed for	For how long	How often % working time
E.g. Visual & listening attention	Watching children at play	Average 2 hours	Once a week – 5%
Visual attention	Maintaining safe working environment	3 hours (or longer if extended shift)	Daily
2.	Does your job require more than general mental attention or concentration (e.g. more than general mental attention for repeated manual calculations, drafting a complex report)?		
No	<input checked="" type="checkbox"/>	Go to the next question	
Yes	<input type="checkbox"/>	Complete the table below:	
Form of mental concentration	Needed for	For how long	How often % working time
E.g. Totalling and tallying receipts	Balancing cash office accounts	30 mins (if tallies) to 1 hour	Twice per day – 20%
3.	Is your job subject to work-related pressures e.g. regular deadlines, frequent interruptions, conflicting demands?		
No	<input type="checkbox"/>	Go to the next question	

Yes <input checked="" type="checkbox"/>	Complete the table below:		
Form of work related pressure	Source	For how long	How often % working time
E.g. Telephone interruptions (e.g. to clerical tasks)	Suppliers, other staff	2-20 mins per call	10-20 times per day
Deadlines	Completing all delegated tasks, taking account on unexpected issues	Variable	Occasional
4.	Does your job involve any other form of mental demand?		
No <input checked="" type="checkbox"/>	Go to the next section – Emotional Demands		
Yes <input type="checkbox"/>	Complete the table below:		
Mental Demand	Source	For how long	How often % working time

Emotional Demands

Emotional demands are those arising from contacts or work with other people. For instance, those who are angry, difficult, upset or unwell; or in circumstances such as to cause stress to the jobholder.

1. Does your job involve contact (in person or by telephone) with people who by their circumstances or behaviour (for example homelessness, mentally ill, terminally ill) cause you emotional stress or upset? People can include the public, service users (including pupils) or other employees of the organisation, but not your immediate work colleagues.

Yes

Please give examples.

No

2. These people – who are they?

Cause of emotional stress or upset

Frequency of stress (daily/monthly/etc.)

3.	Does your job involve any other form of emotional demand?		
No	<input checked="" type="checkbox"/>	Go to the next section – Responsibility for People	
Yes	<input type="checkbox"/>	Compete the table below:	
Emotional Demand	Why	For how long	How often

Responsibility for People – Wellbeing

This factor measures any job responsibilities which have a DIRECT (hands on) impact on the well-being of individual, or groups of, people.

1.	Do you undertake any tasks or duties which have a direct impact on people?		
No	<input type="checkbox"/>	Go to the next section – Responsibility for Supervision/Direction/Co-ordination of Employees	
Yes	<input checked="" type="checkbox"/>	Complete the table below:	
Task / Duty		Who benefits	How people benefit
E.g. Preparing and serving meals		Pupils and staff	Regular nutritious meals maintaining health of pupils and staff
Ensuring environment is safe, tidy and hygienic		Pupils, staff and visitors	Safe, pleasant and appropriate environment to occupy
2.	Are any people reliant, i.e. personally dependent, on you for their care and welfare?		
No	<input checked="" type="checkbox"/>	Go to the next question	Yes <input type="checkbox"/> Complete the table below:
Reliant people (who benefit)		Needs of reliant people (how people benefit)	What done for reliant people (task/duty)
E.g. SEN students		Physical and social support	Food preparation, bathing, and talking to students including assessing their needs and state of health.
3.	Do you implement, or enforce (i.e. have formal responsibility for initiating prosecution against failures to comply) any Statutory Regulations which have a direct impact on the health, safety or wellbeing of people?		
No	<input checked="" type="checkbox"/>	Go to the next question	Yes <input type="checkbox"/> Complete the table below:
(A) Implement		Who direct impact on	Nature of impact

E.g. Implement food regulations	People eating in public places	Ensuring health of people through maintenance of food hygiene standards
(B) Enforce	Who direct impact on	Nature of impact
4.	Do you have other responsibilities, not listed above, which impact on the wellbeing of people? For example development of policies or providing advice, guidance or interpretation of procedures or regulations which impact on the wellbeing of people. (Only include within this answer any responsibility that has as its main focus the wellbeing of people.)	
Responsibility	Nature of Impact	Who impact on
5.	Do you have any other responsibilities for people, including health and safety?	
Other responsibilities	Who benefits	How benefit
Use of signage to protect other building users (e.g. wet floor warning)	Building users	Risk to building users is minimised (slips, trips etc)

Responsibility for Supervision/Direction/Coordination of Employees

This factor measures the DIRECT (hands on) responsibility of the job holder for the supervision, co-ordination or management of employees, or others in an equivalent position.

1. Does your job involve demonstrating your own duties, giving advice and guidance or training other employees?			
No <input type="checkbox"/>	Go to the next question		Yes <input checked="" type="checkbox"/> Complete the table below:
Whom (Job Groups)		What (i.e. demonstrating, guiding, training)	How often
Peers and new colleagues		Demonstrating, buddying and/or shadowing to teach technique or routines	1 per term
2. Does your job directly involve the supervision, co-ordination or management of employees or others in an equivalent position?			
No <input checked="" type="checkbox"/>	Go to the next section – Responsibility for Financial Resources		
Yes <input type="checkbox"/>	List below the employees/supervised/co-ordinated/managed, their job group and types of work and enter appropriate responsibility and location codes.		
Responsibility Codes:	1 = Regular instructions 2 = Regular checking work 3 = Regular allocation of work 4 = Organisation of work 5 = Evaluation and appraisal of work	6 = Evaluation of working methods 7 = Employee development 8 = Recruitment 9 = Discipline 10 = Co-ordination and management (the work of staff may be co-ordinated or managed through others' direct supervision)	
Location Codes:	S = Same workplace as self Number = number of other workplaces e.g. 1 = 1x other, 10 = 10x others.		
Employees supervised etc., No's, Job Groups	Type of work	Type of Responsibility Code	Location Code
E.g. 4 Finance Assistants 1 Secretary/Clerical	Order processing Typing and WP operating	1,2,3,4,5,6,8,9 2,5	S S

3.	Do you have other responsibilities not listed above, which impact on staff even though there is no direct managerial or supervisory relationship?	
Responsibility	Nature of Impact	Employees affected – give numbers and job group where relevant
E.g. Giving legal advice on employee discipline and employment tribunal cases	Effects individual managers and overall management	Staff and managers throughout Trust

Responsibility for Financial Resources

This factor measures the DIRECT (hands on) responsibility of the jobholder for financial resources, including budgets, accounting for expenditure or the administration of invoices etc.

1. Are you directly responsible for financial resources?			
No <input checked="" type="checkbox"/>	Go to the next question	Yes <input type="checkbox"/>	Complete the table below:
Financial responsibility	Value	Nature of impact	How often
Handling cash			
Security of cash and other financial resource			
Handling of cheques, invoices, other financial transaction documents			
Accounting for receipts or expenditures			
Authorising expenditures			
Budget setting			
Budget monitoring			
Long term financial planning			
Income collection or generation			
Other, please specify			
2. Do you have any other responsibilities that focus on the organisation's financial policies or well-being? For example, for developing financial policies and procedures or for providing advice, guidance or interpretation of policies or procedures. (Only include within this answer a responsibility which has as its main focus the organisation's financial policies or wellbeing)			
No <input checked="" type="checkbox"/>	Go to the next section – Responsibility for Physical Resources	Yes <input type="checkbox"/>	Please specify below:
Responsibility	Nature of Impact		

Responsibility for Physical and Information Resources

This factor measures the DIRECT (hands on) responsibility of the jobholder for physical resources, including information systems, equipment or tools, buildings, supplies or stocks, and personal possessions of others.

1.	Are you responsible for any manual or computer information?		
No	<input checked="" type="checkbox"/>	Go to the next question	
Yes	<input type="checkbox"/>	Complete the table below	
Information for which responsible		Nature of responsibility	How often
E.g. Computerised personnel (50 fields) and sickness absence records for 1000 employees		Input accurately data on computer, undertake pre-set analyses, maintain confidentiality and security	Daily
2.	Do you adapt, design or develop any information systems?		
No	<input checked="" type="checkbox"/>	Go to the next question	
Yes	<input type="checkbox"/>	Complete the table below:	
Information system (type & size)		How adapt/design	How often
E.g. Departmental accounts system with 500 cost centres and 100 cost codes		Draw up specification for information to be held and analysis requirements for programmer to execute	Once a year
3.	Do you use any office or other equipment, tools or instruments, or vehicles, plant and machinery?		
No	<input type="checkbox"/>	Go to the next question	
Yes	<input checked="" type="checkbox"/>	Complete the table below:	
Equipment etc. used		Nature of use and responsibility	How often
E.g. Mower, rotovator and hedgecutter (£1500) Garden tools and wheelbarrow (£500)		Use and general cleaning and greasing as necessary Use and general cleaning	Daily
Floor cleaners (inc. buffer, carpet shampoo cleaner)		For intended cleaning use	daily
4.	Are you responsible for the cleaning, maintenance or repair of buildings, external creations or equivalent?		
No	<input type="checkbox"/>	Go to the next question	Yes <input checked="" type="checkbox"/>
			Complete the table below:

Building / Location	Nature of responsibility	How often
E.g. School site	Inspection of cleaning	Daily
Allocated part of the school (e.g. faculty, communal area, offices)	Cleaning to an agreed standard / specification	Daily
5.	Are you responsible for the adaptation, development or design of land, buildings, other construction works or equivalent?	
No <input checked="" type="checkbox"/>	Go to the next question	Yes <input type="checkbox"/>
Compete the table below:		
Land / Building etc.	Nature of responsibility	How often
E.g. Gardens – 1 acre	Landscaping of borders	Twice per year
6.	Are you responsible for the security of any buildings, external locations or equivalent?	
No <input checked="" type="checkbox"/>	Go to the next question	Yes <input type="checkbox"/>
Compete the table below:		
Building / External Location	Nature of responsibility	How often
E.g. 15 multipurpose inside and outside sports centres (£15m)	Draw up, and ensure compliance with security policy for the centres, their contents and users	Daily on an ongoing basis
7.	Do you order or control the stock of any equipment or supplied?	
No <input checked="" type="checkbox"/>	Go to the next question	Yes <input type="checkbox"/>
Compete the table below:		
Equipment/supplies ordered or controlled	Value	How often
E.g. Ordering and stock control or departmental stationery from central supplies	£15000 pa	Monthly order
8.	Are you responsible for any personal possessions of others?	
No <input type="checkbox"/>	Go to the next question	Yes <input checked="" type="checkbox"/>
Compete the table below:		
Personal possessions	Nature of responsibility	How often

Lost property		Safe storage and/or return to owner if known	Daily
9.	Are you responsible for the planning of purchasing and the development of physical resources?		
No <input checked="" type="checkbox"/>	Go to the next question	Yes <input type="checkbox"/>	Complete the table below:
Physical resources	Planning responsibility		How often
E.g. Food for schools	Securing most economical purchase of food to appropriate quality standards in accordance with procurement procedures		Continuously
10.	Do you have any other form of responsibility for physical resources, for example, developing policies or procedures in relation to physical resources, or providing advice, guidance or interpretation of policies and procedures?		
No <input checked="" type="checkbox"/>	Go to the next section – Working Conditions	Yes <input type="checkbox"/>	Complete the table below:
What	Nature of responsibility		How often

Working Conditions

This factor measures any exposure to unpleasant working conditions, for example dirt, dust, heat and cold.

1. What kind of places do you normally work in? (e.g. office, clients' homes, public library, council parks and gardens, vehicle). Give approximate % of time.

Places of work	% of Time
Interior of school building (classrooms, offices, communal open areas)	80%
Toilets	10%
Laboratories, workshops	10%

2. If you work outside, are you required to do so in all weather conditions?

Yes <input type="checkbox"/>	Go to the next question		
No <input type="checkbox"/>	When are you not required to work outdoors?		

3. Do you experience any unpleasant environmental working conditions? (e.g. dust, dirt, temperature extremes and variations, humidity, noise, vibration, fumes, smells, steam, smoke, grease, oil, confined spaces, cramped conditions)?

No <input type="checkbox"/>	Go to the next question		Yes <input checked="" type="checkbox"/>	Complete the table below:
Environmental working condition	Nature	How long at any one time	How often - % working time	
E.g. Noise	Children shouting in a playground	½ hour	Approx 15%	
Smell Dust (settled)	From cleaning toilets From cleaning DT labs	20 mins 20 mins	10% 10%	

4. Do you experience any verbal abuse, aggression or other anti-social behaviour from people (other than your immediate work colleagues)?

No <input type="checkbox"/>	Go to the next question		Yes <input checked="" type="checkbox"/>	Complete the table below:
Nature and source of abuse/aggression	How long at any one time	How often - % working time		
E.g. Swearing from angry parents or members of the public		5 per day – less than 5%		
Swearing / derogatory comments from students	1 minute	1 per term		

5. Do you encounter any hazards in your job?

No <input type="checkbox"/>	Go to the next question		Yes <input checked="" type="checkbox"/>	Complete the table below:
Hazard	How long at any one time	How often - % working time		
E.g. Being cut when cleaning lawn mower blades	10 minutes	Once a day – 1-2%		

Chemicals (burns or irritation whilst mixing/handling)	10 mins	2 per day
Biological – faeces, vomit	10 mins	1 per day
6. Do you encounter any other disagreeable or unpleasant working conditions in your job?		
No <input checked="" type="checkbox"/>	Go to the next question	Yes <input type="checkbox"/>
What and Nature		How long at any one time
		How often - % working time
7. Do you wear any form of protective clothing to carry out your job?		
No <input type="checkbox"/>	Questionnaire Complete	Yes <input checked="" type="checkbox"/>
What		How long at any one time
Why		How often - % working time
Gloves, tabards, mask, goggles	Worn as required by particular task being completed (e.g. protection from fumes or chemical contact)	Variable
		20%

Authorisation			
I consider that this questionnaire is a fair and accurate statement of the requirements of the job.			
Employee Sign* & Print Name		Date*	
Line Manager Sign* & Print Name		Date*	