

OCCUPATIONAL HEALTH JOB ANALYSIS FORM
POSITION: TRADITIONAL BUILDINGS INSPECTOR

<i>please indicate choice</i>	N	O	F	C
Environmental Exposures				
Outside work			X	
Extremes of temperature		X		
Potential for exposure to blood or body fluids	X			
Noise (greater than 80dba – 8hrs twa)	X			
Vibration	X			
Exposure to hazardous substances (e.g. solvents, liquids, dust, fumes, biohazards) Specify: dust, bird guano, lead, rat urine, other building hazards.		X		
Other hazards – e.g. hazardous or dirty waste Specify: potential identification of asbestos		X		
Ionising radiation (State if classified worker Yes/No)	X			
Equipment/Tools/Machines used				
Food handling	X			
Driving e.g. car/ van/ LGV/ PCV		X		
Frequent hand washing	X			
Computer use			X	
Use of disposable gloves		X		
Vibrating tools	X			
Psychosocial issues				
Face to face contact with public		X		
Exposure to verbal aggression		X		
Exposure to physical aggression	X			
Lone working		X		
Ability to control pace of work				X
Ability to control own workload				X
Responsible for managing/ supervising staff	X			
Vulnerable clients – children/ emotionally disturbed/ elderly	X			
Shift work/ night work/ on call duties	X			
Physical Abilities (if loads are handled, enter load size in box)				
Load manual handling. Specify: inspection equipment such as ladders, light weight scaffold etc		X		
Crouching		X		
Kneeling		X		
Pulling	X			
Pushing	X			
Lifting		X		
Sitting		X		
Standing		X		
Stooping		X		
Walking		X		
Climbing – ie. step stools, ladders		X		
Fine motor grips	X			
Gross motor grips	X			
Reaching below shoulder height		X		
Reaching at shoulder height		X		
Reaching above shoulder height		X		

N = Never
O= Occasionally: up to 1/3rd of time

F= Frequently: up to 2/3rd of time

C= Constantly: more than 2/3rd of time