



Fire Department

Mark Rohlfing
Chief
Gerard Washington
Acting Assistant Chief

January 11, 2011

To the Honorable
The Board of Fire and Police Commissioners
200 East Wells Street, Room 706
Milwaukee, Wisconsin 53202

Dear Commissioners:

I wish to notify you that one position of Administrative Captain – EMS recently became vacant. Captain Gregory A. Amos has retired effective December 31, 2011. I respectfully request that one position of Administrative Captain - EMS be reclassified to Fire Captain. I have enclosed an updated job description for the position.

Respectfully,



MARK ROHLFING
Chief

MR/jlb
Enclosure
FPC/Reclass/Request EMS Capt to Fire Capt 0111

JOB DESCRIPTION

FOR DER USE ONLY

| | |
|------------------------------------|-----------------------------|
| Vacancy No. _____ | |
| City Service Commission: _____ | Finance Committee: _____ |
| Fire & Police Commission: _____ | Common Council: _____ |

Instructions: Complete all sections except No. 11. Refer to the "Guidelines for Preparing Job Descriptions" for instructions on completing specific items.

| | | | | |
|---|--|---|---|-----------------|
| 1. Date Prepared/ Revised: 1/5/11 | 2. Present Incumbent: | Is incumbent underfilling position? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | | |
| 3. Date Filled: | 4. Previous Incumbent: Gregory A. Amos | If YES, indicate underfill title in box 10. | | |
| 5. Department: Fire Department | | Bureau: Special Operations Division: EMS | Unit: 2 Section: | |
| 6. Work Location: 711 W. Wells St. | | Telephone: 286-5254 Email: | Work Schedule: Hours: 7:30am-4:00pm / Days: M-F | |
| 7. Represented by a Union? YES | 8. Bargaining Unit: Local 215, Firefighters If in District Council 48, chose a Local: None | | 9. FLSA Status: NON-EXEMPT | |
| 10. | Official Title: Administrative Captain - EMS | Pay Range | Job Code | EEO Code |
| | | 857 | 2422 | 213 |
| | Underfill Title (if applicable): | | | |
| | Requested Title (if applicable): Fire Captain | 857 | 2424 | 213 |
| Recommended Title (DER Use Only): | Approved by: _____ Date: _____ | | | |

11. BASIC FUNCTION OF POSITION:

Primary duty of the Fire Captain (Continuous Quality Improvement Coordinator) is to manage and provide ongoing evaluation of the Continuous Quality Improvement Program for the department's Emergency Medical Services (EMS) system, including monitoring the EMS system's operations for compliance with state and federal regulations, the department's Standard Operating Guidelines, and written protocols. Secondary duties include referral and recommendations to the EMS/Training/Education Bureau Assistant Chief and/or the EMS Division Battalion Chief when problems or potential risk situations are identified, assistance in the development of EMS Standard Operating Guidelines, and participation in the development of educational programs aimed at improving the quality of emergency medical services provided by the department.

12. DESCRIPTION OF JOB (Check if description applies to **Official Title** or **Underfill Title**):

A. ESSENTIAL FUNCTIONS/Duties and Responsibilities: (Refer to the "Guidelines for Preparing Job Descriptions" for instructions on determining Essential Functions.)

| % of Time | ESSENTIAL FUNCTION |
|-----------|---|
| 20% | • Conducts regular audits of system documentation to assure completeness and compliance with established Standard Operating Guidelines and medical protocols. |
| 20% | • Serves as liaison with EMS system providers to investigate potential system problems and coordinate interagency actions. |
| 15% | • Upon receipt of an expressed complaint or concern, gathers all available information and develops an appropriate response. |
| 10% | • Participates in the research and development of EMS Standard Operating Guidelines and medical protocols. |

B. PERIPHERAL DUTIES:

| % of Time | PERIPHERAL DUTY |
|-----------|--|
| 15% | • Performs data analysis to identify trends in the EMS system. |
| 10% | • Assists in planning, scheduling, and implementing EMS training programs. |
| 5% | • Develops and implements customer satisfaction surveys. Organizes data collected from surveys and prepares report to indicate areas of customer satisfaction/dissatisfaction. |
| 5% | • Participates in public relations assignments. |

C. NAME AND TITLE OF IMMEDIATE SUPERVISOR:

[EMS Division] Battalion Chief, Fire, Sean W. Slowey

D. SUPERVISION RECEIVED: (Describe the extent to which work assignments and methods are outlined, reviewed, and approved by this position’s supervisor.)

Works independently of supervision in both emergency and non-emergency situations.

E. SUPERVISION EXERCISED:

Total number of employees for whom responsible, either directly or indirectly = **varies as programs require**. Directly supervises instructors assigned to EMS training classes, and personnel assigned to public education programs. Indirectly supervises all sworn department personnel of equal or less rank while participating in education programs. Functions within and may supervise the EMS branch at major incidents.

Direct Supervision: List the number and titles of personnel directly supervised. Specify the kind and extent of supervision exercised by indicating one or more of the following:

| a. | Assign duties | e. | Sign or approve work |
|-------------------|---------------------------------|---|--|
| b. | Outline methods | f. | Make hiring recommendations |
| c. | Direct work in progress | g. | Prepare performance appraisals |
| d. | Check or inspect completed work | h. | Take disciplinary action or effectively recommend such |
| Number Supervised | Job Title | Extent of Supervision Exercised (Select those that apply from list above, a - h) | |
| varies | Fire Lieutenant | a. c. d. h. | |
| varies | Heavy Equipment Operators | a. c. d. h. | |
| varies | Firefighters | a. c. d. h. | |
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F. MINIMUM QUALIFICATIONS REQUIRED: (Indicate the MINIMUM qualifications required to enter the job.)

i. Education and Experience:

Minimum of 2 years at the rank of Paramedic Field Lieutenant, Fire Paramedic Field Lieutenant, Fire Lieutenant, or already possessing the rank of Fire Captain.

ii. Knowledge, Skills and Abilities:

Must exhibit a high degree of professionalism, and possess organizational and management skills. Requires good communication skills and the ability to work effectively with other people. Requires the ability to function independently and solve problems. Working knowledge of various computer programs.

iii. Certifications, Licenses, Registrations:

State of Wisconsin Emergency Medical Technician (EMT) license
 Recognized as a "Full Practice" paramedic by the Medical Director – Milwaukee County EMS

iv. Other Requirements:

Sworn and uniformed member of the Milwaukee Fire Department
 Must become qualified as a CPR Instructor

13. PHYSICAL AND ENVIRONMENTAL DEMANDS: TOOLS AND EQUIPMENT USED

The Americans with Disabilities Act of 1993 requires job descriptions to provide detailed information regarding the physical demands required to perform the essential functions of a job; the conditions under which the job is performed; and the tools and equipment the employee will be required to use on the job. Reasonable accommodations may be made to enable qualified individuals to perform the essential duties and responsibilities of the job for each of the categories listed below.

G. PHYSICAL ACTIVITY OF THE POSITION: (List the physical activities that are representative of those that must be met to successfully perform the essential functions of the job).

CHECK ALL THAT APPLY:

| | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Climbing: Ascending or descending ladders, stairs, scaffolding, ramps, poles, and the like; using feet and legs and/or hands and arms. Body agility is emphasized. Check only if the amount and kind of climbing required exceeds that required for ordinary locomotion. |
| <input checked="" type="checkbox"/> | Balancing: Maintaining body equilibrium to prevent falling when walking, standing or crouching on narrow, slippery or erratically moving surfaces. Check only if the amount and kind of balancing exceeds that needed for ordinary locomotion and maintenance of body equilibrium. |
| <input checked="" type="checkbox"/> | Stooping: Bending body downward and forward by bending spine at the waist. Check only if it occurs to a considerable degree and requires full use of the lower extremities and back muscles. |
| <input checked="" type="checkbox"/> | Kneeling: Bending legs at knee to come to a rest on knee or knees. |
| <input checked="" type="checkbox"/> | Crouching: Bending the body downward and forward by bending leg and spine. |
| <input checked="" type="checkbox"/> | Crawling: Moving about on hands and knees or hands and feet. |
| <input checked="" type="checkbox"/> | Reaching: Extending Hand(s) and arm(s) in any direction. |
| <input type="checkbox"/> | Standing: Particularly for sustained periods of time. |
| <input checked="" type="checkbox"/> | Walking: Moving about on foot to accomplish tasks, particularly for long distances. |
| <input checked="" type="checkbox"/> | Pushing: Using upper extremities to exert force in order to draw, press against something with steady force in order to thrust forward, downward or outward. |
| <input checked="" type="checkbox"/> | Pulling: Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion. |
| <input checked="" type="checkbox"/> | Lifting: Raising objects from a lower to a higher position or moving objects horizontally from position-to-position. Check only if it occurs to a considerable degree and requires substantial use of the upper extremities and back muscles. |
| <input checked="" type="checkbox"/> | Fingering: Picking, pinching, typing or otherwise working primarily with fingers rather than with the whole hand or arm, as in handling. |
| <input checked="" type="checkbox"/> | Grasping: Applying pressure to an object with fingers and palm. |
| <input type="checkbox"/> | Feeling: Perceiving attributes of objects such as size, shape, temperature or texture by touching with the skin, particularly that of the fingertips. |
| <input checked="" type="checkbox"/> | Talking: Expressing or exchanging ideas by means of the spoken word. Those activities which demand detailed or important instructions spoken to other workers accurately, loudly or quickly. |
| <input checked="" type="checkbox"/> | Hearing: Perceiving the nature of sounds with no less than a 40 db loss. Ability to receive oral communication and make fine discriminations in sound. |
| <input type="checkbox"/> | Repetitive Motions: Substantial movements (motions) of the wrist, hands, and/or fingers. |
| <input checked="" type="checkbox"/> | Driving: Minimum standards required by State Law (including license). |

H. PHYSICAL REQUIREMENTS OF THE POSITION: (List the physical requirements that are essential functions of the job.)

CHECK ONE:

| | |
|-------------------------------------|--|
| <input type="checkbox"/> | Sedentary Work: Exerting up to 10 pounds of force occasionally and/or negligible amount of force frequently or constantly to lift, carry, push, pull or otherwise move objects. Sedentary work involves sitting most of the time. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met. |
| <input type="checkbox"/> | Light Work: Exerting up to 10 pounds of force occasionally and/or negligible amount of force constantly to move objects. If the use of arm and/or leg controls requires exertion of forces greater than that for sedentary work and the worker sits most of the time, the job is rated for Light Work. |
| <input checked="" type="checkbox"/> | Medium Work: Exerting up to 50 pounds of force occasionally and/or up to 20 pounds of force frequently, and/or up to 10 pounds of force constantly to move objects. |
| <input type="checkbox"/> | Heavy Work: Exerting up to 100 pounds of force occasionally, and/or up to 50 pounds of force frequently, and/or up to 20 pounds of force constantly to move objects. |
| <input type="checkbox"/> | Very Heavy Work: Exerting in excess of 100 pounds of force occasionally, and/or in excess of 50 pounds of force frequently, and/or in excess of 20 pounds of force constantly to move objects. |

I. VISUAL ACUITY REQUIREMENTS: (List the visual acuity requirements that are essential functions of the job.)

CHECK ONE:

| | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Operators (Electronic Equipment), Inspection, Close Assembly, Clerical, Administrative: This is a minimum standard for use with those whose job requires work done at close visual range (i.e. preparing and analyzing data and figures, accounting, transcription, computer terminal, extensive reading, visual inspection involving small parts, operation of machines, using measurement devices, assembly or fabrication of parts). |
| <input type="checkbox"/> | Machine Operators, Mechanics, Skilled Tradespeople: This is a minimum standard for use with those whose work deals with machines where the seeing job is at or within arm's reach. This also includes mechanics and skilled tradespeople and those who do work of a non-repetitive nature such as carpenters, technicians, service people, plumbers, painters, mechanics, etc. (If the machine operator also inspects, check the "Operators" box.) |
| <input type="checkbox"/> | Mobile Equipment Operators: This is a minimum standard for use with those who operate cars, trucks, forklifts, cranes, and high lift equipment. |
| <input type="checkbox"/> | Other: This is a minimum standard based on the criteria of accuracy and neatness of work for janitors, sweepers, etc. |

J. THE CONDITIONS THE WORKER WILL BE SUBJECT TO IN THIS POSITION:

List the environmental/working conditions to which the employee may be exposed while performing the essential functions of the job. Include scheduling considerations such as on-call for emergencies, rotating shift, etc. **Approximate Percentage of time performing field work: 50%**

CHECK ALL THAT APPLY:

| | |
|-------------------------------------|--|
| <input type="checkbox"/> | None: The worker is not substantially exposed to adverse environmental conditions (such as typical office or administrative work). |
| <input checked="" type="checkbox"/> | The worker is subject to inside environmental conditions: Protection from weather conditions but not necessarily from temperature changes (i.e. warehouses, covered loading docks, garages, etc.) |
| <input checked="" type="checkbox"/> | The worker is subject to outside environmental conditions: No effective protection from weather. |
| <input checked="" type="checkbox"/> | The worker is subject to extreme cold: Temperatures below 32 degrees for period of more than one hour. |
| <input checked="" type="checkbox"/> | The worker is subject to extreme heat: Temperatures above 100 degrees for periods of more than one hour. |
| <input checked="" type="checkbox"/> | The worker is subject to noise: There is sufficient noise to cause the worker to shout in order to be heard above the surrounding noise level. |
| <input checked="" type="checkbox"/> | The worker is subject to vibration: Exposure to oscillating movements of the extremities or whole body. |
| <input type="checkbox"/> | The worker is subject to hazards: Includes a variety of physical conditions, such as proximity to moving mechanical parts, electrical current, working on scaffolding and high places or exposure to chemicals. |
| <input checked="" type="checkbox"/> | The worker is subject to atmospheric conditions: One or more of the following conditions that affect the respiratory system or the skin: Fumes, odors, dust, mists, gases or poor ventilation. |
| <input type="checkbox"/> | The worker is subject to oil: There is air and/or skin exposure to oils and other cutting fluids. |
| <input checked="" type="checkbox"/> | The worker is required to wear a respirator. |

K. MACHINE, TOOLS, EQUIPMENT, ELECTRONIC DEVICES, SOFTWARE, ETC. USED BY POSITION:

List equipment needed to successfully perform the essential functions of the job. Reasonable accommodations may be made to enable qualified individuals with disabilities to perform the essential functions.)

CHECK ALL THAT APPLY:

| | |
|---|---|
| <input type="checkbox"/> Camera and photographic equipment | <input checked="" type="checkbox"/> Office Equipment (desk, chair, telephone, etc.) |
| <input type="checkbox"/> Cleaning supplies | <input checked="" type="checkbox"/> Office supplies (pens, staplers, pencils, etc.) |
| <input type="checkbox"/> Commercial vehicle | <input checked="" type="checkbox"/> Packing materials (boxes, shrink wrap, etc.) |
| <input type="checkbox"/> Data processing equipment | <input checked="" type="checkbox"/> PC equipment (monitor, keyboard, printer, etc.) |
| <input checked="" type="checkbox"/> Handcart | <input checked="" type="checkbox"/> PC software |
| <input type="checkbox"/> Hand tools (<i>please list</i>): | |
| <input type="checkbox"/> Office Machines (<i>check all that apply</i>): <input checked="" type="checkbox"/> Copier <input checked="" type="checkbox"/> Facsimile <input type="checkbox"/> Calculator <input type="checkbox"/> Cash register | |
| <input type="checkbox"/> Other (<i>please list</i>): EMS-related | |

L. SUPPLEMENTARY INFORMATION: (Indicate any other information which further explains the importance, difficulty, or uniqueness of the position, such as its scope of responsibility related to finances, equipment, people, information, etc. Also indicate success factors such a personal characteristics that contribute to an individual's ability to perform well in the job, and any other special considerations.)

Subject to recall. Subject to attendance at alarms at any hour and under extreme conditions of danger, stress, weather, extended periods of physical activity, etc.

M. I believe that the statements made above in describing this job are complete and accurate:



Signature of Department Head or Designated Representative