

TASK OVERVIEW
TEAM LEADER LIFESTYLE & WELLBEING (Community)

Physical Demands Factors	Occasional 1-33% of day	Frequent 34-66% of day	Constant 67-100% of day
SITTING		✓	
Comments	Driving cars. Running seated exercise groups. Assisting with table based activities, 1:1 communication with clients, sitting on bus. Office/ computer based tasks, written documentation. Able to break as required and walk around office		
STANDING	✓		
Comments	Occasional supervision of activities, photocopying, talking to clients and family members, groups of clients, other staff. No prolonged standing		
WALKING		✓	
Comments	To and from various areas of the site, walking to access photocopier, fax, filing cabinets, meeting visitors, meetings with staff, collecting and returning clients from home for activities, assessments, occasional assisting clients with walking, walking clients in outside areas such as parks, and within the site.		
STOOPING	✓		
Comments	Should be avoided at all times by bending at hips and knees but may occur when reaching into awkward places. E.g. strapping clients into seat belts, strapping wheelchairs into floor supports of bus. Placing paper in copier, accessing lowest drawers, items on low shelves.		
CROUCHING	✓		
Comments	Assisting clients on and off the bus, assisting clients to secure bus seat belts, accessing equipment from low based shelves.		
KNEELING	✓		
Comments	Accessing equipment from deep cupboards, or low shelves, or at floor level, files/equipment from low based shelves or drawers.		
CLIMBING	✓		
Comments	Occasional onto and off bus, but as a passenger, up and down steps; and stairs between floors as applicable. Stairs at some offices.		
BALANCING	✓		
	Assisting ambulant clients.		
FORWARD REACH	✓		
Comments	Occasional manoeuvring wheelchairs, accessing supplies, assisting clients with table based activities, securing clients in bus seats, reading to clients, retrieving equipment for activities. Accessing folders on shelves, written work.		

Physical Demands Factors	Occasional 1-33% of day	Frequent 34-66% of day	Constant 67-100% of day
OVERHEAD REACH	✓		
<i>Comments</i>	Accessing stored items for overhead cupboards: light supplies, books, CDs and equipment. Assisting clients on and off the bus. Occasional closing back door of buses.		
USE OF HANDS & FINGERS			✓
<i>Comments</i>	All tasks require constant bilateral handling, fine pincer fingering with the dominant hand for written work. Using computer mouse, keyboard, writing, answering phone. Use gross hand movement.		
BENCH HEIGHT LIFT	✓		
<i>Comments</i>	Bench to shoulder: Light documents to/from overhead shelves		
PUSH	✓		
<i>Comments</i>	Occasional transporting clients within and around in their wheelchairs. Moving whiteboards. Opening office door/s closing filing cabinet drawers.		
PULL	✓		
<i>Comments</i>	Occasional clients in wheelchairs can be up to 12 kg rolling resistance. Opening office door/s closing filing cabinet drawers.		
CARRYING	✓		
<i>Comments</i>	Supplies, – generally up to 10kg. Documentation, folders, book and paperwork, work bag.		

Psychosocial Demands Factors	Occasional 1-33% of day	Frequent 34-66% of day	Constant 67-100% of day
DEALING WITH DIFFICULT CUSTOMERS	✓		
<i>Comments</i>	Lifestyle leaders may work with clients, families and/or situations which are emotionally demanding. (either on the phone or in person)		
WORK WITH CLIENTS WITH DEMENTIA OR A PSYCHOLOGICAL ILLNESS	✓		
<i>Comments</i>	Clients with dementia or a psychological illness may be physically and/or verbally aggressive towards staff.		
OPERATING IN A FAST PACED WORK ENVIRONMENT		✓	
<i>Comments</i>	Workers will often be required to manage a workload with set time constraints.		

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WORK IN AN OPEN PLAN OFFICE ENVIRONMENT		✓	
<i>Comments</i>	Most Offices are open plan. This means that office based staff will most likely undertake their work amongst external noise such as phones ringing, phone calls and general conversation.		
DEALING WITH DEATH AND DYING	✓		
<i>Comments</i>	Death is a natural outcome of ageing. This means that workers will at times be supporting clients and their families at end of life.		