

U.S. DEPARTMENT OF LABOR

Bureau of Labor Statistics



Your Occupational Requirements



Thank you for participating in the Occupational Requirements Survey (ORS) Employee Survey!

The information you provide will help us understand more about the cognitive and physical demands of different types of jobs in the United States.

By law (Title 5 of Public Law 107-347), we must keep your information confidential; we use it for statistical purposes only.

If you have comments regarding this survey, please send them to the Office of Compensation Levels and Trends,
2 Massachusetts Ave., N.E., Room 4175, Washington, D.C. 20212

If you have any questions, please call:

Field economist's name:	Telephone:
Field economist supervisor's name:	Telephone:

Purpose of ORS

ORS is a new federal survey designed to provide information about work-related requirements found in jobs in the United States. The Bureau of Labor Statistics (BLS) conducts this survey under an agreement with the Social Security Administration (SSA).

The information that you provide in this diary will help the SSA make fair decisions in its disability programs, which currently provide financial help to more than 14 million disabled individuals and 2 million eligible dependents. For more information about ORS, visit: <http://www.bls.gov/ors/>

This questionnaire focuses on cognitive (mental) and physical demands of your job. As you consider your responses to the questions below, follow these guidelines:

- 1) Base your answers on **how you generally perform your work**, meaning the way in which you normally complete your assigned duties, tasks, and responsibilities.
- 2) Base your answers on how your work is **performed without accommodation**. Accommodations are modifications that an employer makes to meet the needs of an individual worker with a disability or other work constraints.

Occupational Details

This first group of questions focuses on basic details about your current job.

1) What is the title of your job?

2) Does your job have any responsibility for accomplishing tasks by directing others? Yes No

a. If yes, which of the following statements best describes the responsibility for directing others?

Lead: I have authority to make, coordinate or review the work assignments of employees performing the same general work as me on a day to day basis.

Supervisor: I have the authority, in the interest of the company, to hire, transfer, lay off, promote, reward or discipline other employees.

3) How is your job classified by your employer? Full-time Part-time

a. How many hours per day do you typically work under this classification?

b. How many hours per week do you typically work under this classification?

c. How many weeks per year do you typically work under this classification?

Example: Some workers in full-time jobs work 8 hours per day, 40 hours per week, and 52 weeks per year.

4) Is your job represented by a labor union? Yes No

5) Do you receive performance pay? Yes No

Examples of performance pay: commissions, production bonus, piece rate or other incentives based on production or sales.

Occupational Tasks, Duties and Responsibilities

The next couple of questions ask about the kinds of tasks that are performed in your job.

Task: is a distinct activity that you perform resulting in a meaningful outcome.

Timeframe: the prior month

6) In a typical day, what primary tasks do you perform?

7) Over the past month, did you perform any tasks that are not included in the list for question 6? Yes No

a. If yes, what additional tasks were performed?

Occupational Cognitive (Mental) Demands

This next group of questions focuses on information about the intellectual and mental demands of your job. Select the option that **best** describes your job requirements.

If you would like to see an example of how the level of decision-making is coded, [click here](#).

Decision-making

Decision-making measures the type and scope of decisions you are expected to make. It is common for jobs to include a range of decision making.

8) What is the highest level of independent judgment you are expected to use for your job?

- I use independent judgment to select from a limited number of predetermined actions.
- I use independent judgment to determine the most appropriate course of action in situations that do not have set responses.
- I use independent judgment to make decisions by choosing from a large number of possibilities in situations where a high degree of uncertainty or complexity may exist.

Work Review

Work Review measures the frequency at which a machine, supervisor, or lead worker checks your work to ensure performance standards are being met. Work review can occur in person or remotely.

9) What is the highest frequency of work review that you receive under normal circumstances?

- More than once per day
- Once per day
- At least once per week, but less than daily
- Less than weekly

Pace

Pace is the physical and cognitive speed needed to perform work tasks. Pace can be the actual rate required to complete repetitious tasks, or the rate at which you are expected to respond to a variety of incoming projects.

There are two components to 'Pace':

Pace of work: measures the rate at which you must process new or incoming information, or take physical action based on new information.

Controlling workflow: means that you can prioritize work tasks or adjust the amount of time it takes to complete them.

10) Are there faster and slower periods of work? Yes No

11) What is the fastest pace performed?

- Rapid with no periods of waiting
- Steady with rare periods of waiting
- Unhurried with much time spent observing or waiting, rushed periods rarely or never occur

12) Can you intervene and control the flow of work?

- Yes, I can change the priority of work tasks or the amount of time allotted to complete them.
- No, my work is primarily driven by business processes, production line speed, or customer demands.

Adaptability

Adaptability measures characteristics of your job that cause you to adjust to changes in work routines in the following areas: work tasks, work schedule, and work location.

Work tasks: are your regular duties. A change in work task requires that you remember new instructions, procedures, or similar information.

13) What is the highest rate of change in work tasks that you experience on your job?

- At least once per day
- At least once per week, but less than daily
- At least once per month, but less than weekly
- Less than monthly, including never

Work Schedule: is the regular recurring work hours and days that are set by your employer. To be considered a change in the work schedule, the change must be directed your employer.

14) Does your work schedule ever change? Yes No

Work Location: is the physical site where you work. A change in work location is a change to a new work site or from a discontinued work site. Changes in work location may accompany changes in work tasks or schedule.

15) What is the highest rate of change in work location change that you experience on your job?

- Does not change unless it is permanent
- Changes up to four times a year
- Changes more than four times a year

Work-related Personal Interactions

Work-Related Personal Interactions measures your requirement to cooperate with others, handle conflict, and respond to social cues, requests, and criticism. There are two types of work-related personal interactions:

Regular contacts: are those people with whom you have an established working relationship. Examples of regular contacts include:

- o Co-workers, supervisors, and managers with whom you regularly work
- o Clients, customers or students you see on a regular basis

Other contacts: are those people with whom you have no established working relationship, including the public.

16) What is the highest level of work-related verbal interactions that you have with contacts?

	Regular Contacts	Other Contacts
Constantly, every few minutes	<input type="checkbox"/>	<input type="checkbox"/>
More than once per hour, but not constantly	<input type="checkbox"/>	<input type="checkbox"/>
More than once per day, but not more than once per hour	<input type="checkbox"/>	<input type="checkbox"/>
No more than once per day, includes never	<input type="checkbox"/>	<input type="checkbox"/>

17) What is the highest level of work-related interactions that you have with contacts?

	Regular Contacts	Other Contacts
Exchanging straightforward, factual information	<input type="checkbox"/>	<input type="checkbox"/>
Coordinating work with others; solving recurring problems with cooperative parties	<input type="checkbox"/>	<input type="checkbox"/>
Some gentle persuading or soft-selling; discussing	<input type="checkbox"/>	<input type="checkbox"/>
Influencing; hard-selling; asserting control in situations	<input type="checkbox"/>	<input type="checkbox"/>
Resolving controversial or long-range issues; defending; negotiating	<input type="checkbox"/>	<input type="checkbox"/>

Occupational Physical Demands

This final group of questions asks about the physical demands of your job.

When responding, provide information on whether or not you are required to perform the physical demand. In some instances, you will also need to provide information on how long the physical demand is performed.

Please do the following:

- If you have a choice between physical demands, select the one that you use **the majority of the time**. Code this one “Yes” and mark the others as “No”.

For example, if you can choose between stooping, crouching, or kneeling, but most of the time you crouch, select “Yes” for crouching and “No” for stooping and kneeling.

- Record the **amount of time spent** performing the physical demand on a typical work day/shift over the course of the **past month**.
- If a physical demand that is required for your job is **not performed in the past month**, indicate
 - how many times you performed this demand in the past year
 - how many minutes/hours OR percent of time you performed this demand.

Remember:

- Base your answers on **how you generally perform your work**, meaning the way that you normally complete assigned duties, tasks, and responsibilities.
- Base your answers on how your work is **performed without accommodation**. Accommodations are modifications that an employer makes to meet the needs of an individual worker with a disability or other work constraints.

Visual representations of the physical demands collected in the ORS are available here if needed to help answer the questions about them: <http://www.bls.gov/ncs/ors/physical-production.pdf>

Physical Demands: Exertion

Lifting/Carrying

Lifting: is raising or lowering an object from one level to another and includes upward pulling.

Carrying: is transporting an object, usually by holding it in the hands, arms, or on the shoulders.

18) What is the heaviest thing lifted/carried?

How much does it weigh? Pounds

How much time in a day is spent lifting it? hours minutes

19) Is anything lifted/carried more than 2/3 of the day?

If yes, what is it?

If yes, how much does it weigh? Pounds

20) Is anything lifted/carried more than 1/3 of the day?

If yes, what is it?

If yes, how much does it weigh? Pounds

21) Is anything lifted/carried up to 1/3 of the day?

If yes, what is it?

If yes, how much does it weigh? Pounds

Pushing/Pulling

Pushing/Pulling is a measure of strength, not dexterity.

Pushing: is exerting force on an object so that the object moves away from the force.

Pulling: is exerting force on an object so that the object moves toward the force.

22) Do you need to push or pull with your ...?

Hands and/or Arms: Yes No (If yes, answer questions 23 & 24; otherwise, click 'Next')

Feet and/or Legs: Yes No (If yes, answer questions 23 & 24; otherwise, click 'Next')

Feet only: Yes No (If yes, answer questions 23 & 24; otherwise, click 'Next')

23) If yes, how much of a typical work day do you generally push or pull an object with your ...?

Hand and/or Arms: hours and/or minutes OR percent

Feet and/or Legs: hours and/or minutes OR percent

Feet only: hours and/or minutes OR percent

Note: Responses may be provided in terms of time (hours and/or minutes) or percent of a typical work day that is spent pushing or pulling.

24) If yes, does the pushing or pulling involve one or both of your ...?

Hands and/or Arms: One Both

Feet and/or Legs: One Both

Feet only: One Both

Physical Demands: Reaching/Manipulation

Reaching

Reaching: is extending the arm(s) with the hand higher than the head.

There are two types of reaching. Both types can be present in the same task.

Overhead Reaching: is reaching that includes:

- 1) Bending the elbows. The angle at the shoulders is 90 degrees or more, AND
- 2) Keeping the elbow extended. The angle at the shoulder is 120 degrees or more.

At/Below the Shoulder Reaching: is reaching that does not meet the thresholds for overhead.

25) Do you ever need to reach ...?

Overhead: Yes No (If yes, answer questions 26 & 27; otherwise, click 'Next')

At or Below Shoulder: Yes No (If yes, answer questions 26 & 27; otherwise, click 'Next')

26) If yes, how much of your day do you reach ...?

Overhead: hours and/or minutes OR percent

At or Below Shoulder: hours and/or minutes OR percent

Note: Responses may be provided in terms of time (hours and/or minutes) or percent of a typical work day that is spent reaching.

27) If yes, do you use one hand/arm or both when reaching ...?

Overhead: One Both

At or Below Shoulder: One Both

Keyboarding

Keyboarding is a repetitive motion requiring the use of the whole hand to enter data by means of a keyboard device.

Types of devices include:

Traditional Keyboard: is a panel of keys used as the primary input device on a computer or typographic machine.

10-Key Pad: is a numeric keypad where multiple fingers are used to enter data.

Touchscreen Keyboard: is a touch sensitive keyboard display on a computer or other electronic device that uses repetitive finger or thumb motion, and using the whole hand, for data entry.

Other: is keyboarding devices that do not fit into one of the other categories

28) Do you ever use a keyboarding device?

Traditional Keyboard: Yes No (If yes, answer question 29; otherwise, click 'Next')

10-Key Pad: Yes No (If yes, answer question 29; otherwise, click 'Next')

Touchscreen Keyboard: Yes No (If yes, answer question 29; otherwise, click 'Next')

Other: Yes No (If yes, answer questions 29 and 30; otherwise, click 'Next')

29) If yes, how much time do you spend using a...?

Traditional Keyboard:	<input type="text"/>	hours and/or minutes OR	<input type="text"/>	percent
10-Key Pad:	<input type="text"/>	hours and/or minutes OR	<input type="text"/>	percent
Touchscreen Keyboard:	<input type="text"/>	hours and/or minutes OR	<input type="text"/>	percent
Other:	<input type="text"/>	hours and/or minutes OR	<input type="text"/>	percent

Note: Responses may be provided in terms of time (hours and/or minutes) or percent of a typical work day that is spent keyboarding.

30) If other keyboarding occurs, list the type(s) of devices used to perform this keyboarding.

Manipulation

Gross Manipulation: is seizing, holding, grasping, turning, or otherwise working with the hand(s). It is often present when lifting involves the hands. Fingers are involved only to the extent that they are an extension of the hand, to hold or operate a tool such as tin snips or scissors.

Fine Manipulation: is touching, picking, pinching, or otherwise working primarily with fingers rather than with the whole hand or arm. This includes data entry performed on a touchscreen keyboard using only one finger.

A worker can use both gross manipulation and fine manipulation while performing a task.

Foot/Leg Controls: is the use of one or both feet/legs to move controls on machinery or equipment. Controls include pedals, buttons, levers, and cranks.

31) Do your tasks involve ...?

Gross Manipulation: Yes No (If yes, answer questions 32 & 33; otherwise, click 'Next')

Fine Manipulation: Yes No (If yes, answer questions 32 & 33; otherwise, click 'Next')

Foot/Leg Controls: Yes No (If yes, answer questions 32 & 33; otherwise, click 'Next')

32) If yes, how much of a typical work day do you spend on tasks involving ...?

Gross Manipulation: hours and/or minutes OR percent

Fine Manipulation: hours and/or minutes OR percent

Foot/Leg Controls: hours and/or minutes OR percent

Note: Responses may be provided in terms of time (hours and/or minutes) or percent of a typical work day that is spent using manipulation.

33) If yes, do you use one or both hand/arm (foot/leg) for tasks involving...?

Gross Manipulation: One Both

Fine Manipulation: One Both

Foot/Leg Controls: One Both

Physical Demands: Postural

Sitting vs. Standing/Walking

Sitting: occurs when one of the following conditions exists:

- You remain in a seated position. This includes active sitting.
- You are inactive and seated or prone (lying down).
- You may choose between sitting and standing for a given task.

Standing/walking: occurs when you are not sitting or prone. This includes time spent crawling, kneeling, or crouching.

Sitting vs. standing/walking at will: is the ability to alternate between sitting and standing/walking. This exists when:

- You have the flexibility to choose between sitting and standing throughout the day.
- You have no assigned time during the day to sit or stand/walk.
- No external factors determine whether you must sit or stand/walk.

34) How many hours a day do you usually spend ...?

<input type="text"/>	Sitting
<input type="text"/>	Standing/Walking

Note: The total of hours sitting and standing/walking should equal the total number of hours worked per day.

35) Do you have the ability to alternate between sitting and standing at will throughout the day? Yes No

Stooping, Crouching, Kneeling, Crawling

Stooping: is bending the body forward and down, bending the spine at the waist and leaning down towards an object or the ground. Stooping can occur in a seated position, although it occurs most often while standing.

Crouching: is bending the body downward and forward by bending the legs and spine.

Kneeling: is bending the legs at the knees to come to rest on the knee or knees.

Crawling: is moving about on hands and knees or hands and feet.

36) Do you complete tasks involving ...?

Stooping: Yes No (If yes, answer question 37; otherwise, click 'Next')

Crouching: Yes No (If yes, answer question 37; otherwise, click 'Next')

Kneeling: Yes No (If yes, answer question 37; otherwise, click 'Next')

Crawling: Yes No (If yes, answer question 37; otherwise, click 'Next')

37) If yes, how much of a typical work day do you complete tasks involving ...?

Stooping: hours and/or minutes OR percent

Crouching: hours and/or minutes OR percent

Kneeling: hours and/or minutes OR percent

Crawling: hours and/or minutes OR percent

Note: Responses may be provided in terms of time (hours and/or minutes) or percent of a typical work day that is spent stooping, crouching, kneeling or crawling.

Climbing

Climbing Ramps or Stairs: occurs when you ascend or descend ramps or stairs primarily using your feet and legs. When climbing ramps or stairs, you typically use your arms and hands for balance only, as in holding a stair railing.

Climbing Ladders, Ropes, or Scaffolds: occurs when you ascend or descend ladders, scaffolding, ropes, or poles, using feet/legs, and hands/arms. When climbing ladders, ropes or scaffolds, you typically use both upper body and lower body in some capacity.

38) Do you complete tasks involving ...?

Climbing Ramps/Stairs: Yes No (If yes, answer question 39; otherwise, click 'Next')

Climbing Ladders/Ropes/Scaffolds: Yes No (If yes, answer question 39; otherwise, click 'Next')

39) If yes, how much of a typical work day do you complete tasks involving ...?

Climbing Ramps/Stairs: hours and/or minutes OR percent

Climbing Ladders/Ropes/Scaffolds: hours and/or minutes OR percent

Note: Responses may be provided in terms of time (hours and/or minutes) or percent of a typical work day that is spent climbing.

Physical Demands: Auditory/Vision

Auditory

Hearing Requirements: are the ability to hear, understand, and distinguish speech and/or other sounds, such as machinery alarms or medical codes/alarms. There are five types:

- One-on-one (in person)
- Group or conference (in person)
- Telephone (and similar remote communication devices such as radios and walkie-talkies)
- Other sounds, such as job-related safety alarms on machinery
 - Exclude alarms that are not job-related, such as fire, tornado, weather, and other public safety alarms.
- Passage of hearing test prior to employment in order to perform occupational duties.
 - Exclude hearing tests that simply determine pre-employment hearing levels

Communicating Verbally: is using the spoken word to exchange information with clients, the public, or coworkers and includes:

- The ability to give detailed spoken instructions to other workers accurately, loudly or rapidly.
- One directional speaking, such as lectures, broadcasts and other public speaking activities.
- The amount of total conversation time, not just the time in you are actually speaking.

40) Does your job require you to hear and understand ...?

- | | | |
|--|------------------------------|-----------------------------|
| a. one-on-one (in person) communication | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. communication in a group or conference (in person) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. communication over the telephone | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. other sounds | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

41) Does your job require you to pass a hearing test? Yes No

42) Does your job require you to communicate verbally? Yes No

If yes, how much of a typical work day do you generally communicate verbally (express or exchange ideas by means of spoken word)? hours and/or minutes OR percent

Note: Responses may be provided in terms of time (hours and/or minutes) or percent of a typical work day that is spent communicating verbally.

Vision

Near Visual Acuity: is clarity of vision at approximately 20 inches or less, as when working with small objects or reading small print.

Far Visual Acuity: is clarity of vision at 20 feet or more. This includes the ability to see a person or object at a distance and to recognize features.

Peripheral Vision: is what is seen above, below, to the left or right by the eye while staring straight ahead.

43) Does your job require you to see objects 20 inches or less away clearly (including the use of computers)?

Yes No

44) Does your job require you to see objects greater than 20 feet away clearly?

Yes No

45) Does your job require you to have a good field of vision (peripheral vision)?

Yes No

Summary/Thank You

Thank you for completing this questionnaire designed to capture information about the cognitive and physical demands of your job. This information will be used in the continuing development of the Occupational Requirements Survey (ORS).

The ORS data will be used by U. S. Social Security Administration (SSA) to adjudicate its disability claims. SSA disability adjudicators will use this information to determine if applicants for disability can do their past relevant work despite their impairments, and if necessary, determine the number of occupations and types of occupations that an applicant can perform despite their impairments.

Your participation in completing this questionnaire will help ensure that BLS is able to provide data of the highest quality on the occupational requirements of jobs in the U.S. economy. This, in turn, will help ensure that the operation of the SSA's disability programs is equitable and efficient.