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**Task Book for the Position of**

**Type 3 ALL-HAZARDS**

PLANNING SECTION CHIEF (PSC3-AH)

*This Position Task Book allows “direct entry” and includes tasks for the following positions;*

**Resource Unit Leader**

**Situation Unit Leader**

**Demobilization Unit Leader**

**Documentation Unit Leader**

**An individual who is qualified in one or more of these subordinate positions can be recorded as having completed the associated task(s) in this position task book.**

**Version: December 2016**

Text box for adapting State name, logo, etc.

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| |  | | --- | | **All-Hazards Plans Section Chief (PSC3-AH)** | | **Position Task Book Assigned to** | | Trainee’s Name | | Duty Station | | Phone Number | | E-Mail | |  | | **Was initiated by** | | Official’s Name | | Title | | Duty Station | | Phone Number | | E-Mail | |  | | **Was initiated at** | | Location | | Date | |

All-Hazards Incident Management Teams Association (AHIMTA) was founded in 2010, as a grassroots 501(c) (6) professional association comprised of several hundred incident management practitioners from multiple disciplines representing Federal, State and local agencies, nongovernmental organizations (NGOs), and the private sector. The main driving factor for the creation of the Association was the critical need for standardized qualifications for All-Hazards Incident Management Teams (AHIMTs), particularly at the Type 3 complexity level for interstate deployment. In 2013 The AHIMTA formed the Incident Qualifications System Committee (IQS) to further the ICS qualifications guidance work started at the Federal level. After a year of development, stakeholder input, and vetting the first edition of the Interstate Incident Management Team Qualifications Systems (IIMTQS) Guide was published in March of 2014.

This Position Task Book (PTB) was developed and is owned and maintained by the AHIMTA as one of the components of its *Interstate Incident Management Team Qualifications System*. Any comments, corrections, or suggestions to this PTB or to any component of its *Interstate Incident Management Team Qualifications System* should be emailed to the All-Hazards Incident Management Teams Association. [AHIMTA@AHIMTA.org](mailto:xxxxx@AHIMTA.org)

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| **ALL-HAZARDS PLANS SECTION CHIEF (PSC3-AH)** |
| Trainee Name: |
| ***FINAL EVALUATOR’S VERIFICATION:*** |
| *Evaluator; DO NOT complete this unless you are recommending the trainee for certification.* |
| I verify all tasks have been performed and are documented with appropriate initials. |
| I also verify the trainee should be considered for certification in this position. |
| Evaluator’s Signature |
| Date |
| Evaluator’s Printed Name |
| Title |
| Duty Station |
| Phone Number |
| E-Mail |
| ***CERTIFYING OFFICIAL*** |
| Trainee Name: |
| Has met all requirements for qualification in this position is certified for the position. |
| Official’s Signature: |
| Date |
| Official’s Printed Name |
| Title |
| Duty Station |
| Phone Number |
| Email |

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**NATIONAL INCIDENT MANAGEMENT SYSTEM (NIMS)**

**INCIDENT COMMAND SYSTEM (ICS)**

**POSITION TASK BOOKS (PTBs)**

Position Task Books (PTBs) are designed to be used by any individual (trainee) interested in becoming certified under the National Incident Management System (NIMS). The PTB’s are intended to be used to document experiences that indicate successful completion of tasks specific to an Incident Command System (ICS) position. The performance requirements for each position are associated with core ICS competencies, behaviors and tasks as suggested to the Federal Emergency Management Agency (FEMA) by a multi-disciplined, highly experienced expert panel.

Trainees are evaluated during this process by qualified evaluators, and the trainee’s performance is documented in the PTB for each task by the evaluator’s initials and date of completion. An Evaluation Record will be completed by all evaluators documenting the trainee’s progress after each evaluation opportunity.

Successful performance of all tasks, as observed and recorded by an evaluator, will result in a recommendation to the “authority having jurisdiction” (of the trainee), that the trainee be certified in that position. Evaluation and confirmation of the trainee’s performance while completing all tasks will normally require more than one training assignment and several different evaluators. Incidents lasting several days may involve multiple evaluators. Tasks may be evaluated on incidents, simulation/tabletop exercise, planned events, in training and HSEEP compliant functional or full-scale exercises and in other work situations as long as there is a qualified evaluator.

It is important performances be critically evaluated and accurately recorded by each evaluator. All tasks must be evaluated.

The Interstate Incident Management Team Qualifications System [IIMTQS] Guide lists the definitions for trainee, evaluator, training officer and authority having jurisdiction.

***Responsibilities:***

1. **Authority having jurisdiction (AHJ)**:

* Select trainees based on the needs of their organization or to fulfill their obligations to contribute to Incident Management Teams or other Mutual Aid agreements.
* Provide opportunities for evaluation and/or making the trainee available for evaluation.

1. **Training Officer:**

* Providing the correct version of the PTB to the individual in order to document performance.
* Explaining to the trainee the purpose and processes of the PTB as well as the trainee’s responsibilities.
* Tracking progress of the trainee.
* Identifying incidents or situations where the trainee may have evaluation opportunities.
* Identifying and assigning an evaluator who can provide a positive experience for the trainee, when the evaluation opportunity is within the AHJ’s jurisdiction.
* Receiving and filing documentation from the assignment.

1. **The Individual/ Trainee:**

* Reviewing and understanding instructions in the PTB.
* Identifying desired objectives/goals whenever an opportunity for evaluation is recognized.
* Providing background information to an evaluator.
* Assuring the evaluation record is complete.
* Completing all tasks for an assigned position within the timeframe allowed for that position. All tasks with an approval older than the allowed timeframe must be reevaluated.
* Notifying the local AHJ /training officer when the PTB is completed, and obtaining the appropriate signature recommending certification.
* Retaining the original PTB and provide a copy of the PTB to the appropriate individual for review by the State Qualification Review Committee (SQRC) (refer to the current edition of the *IIMTQS Guide*).

1. **Evaluator(s)**:

* Being qualified and proficient in the evaluated position.
* Meeting with the trainee and determining past experience, current qualifications and desired objectives/goals.
* Reviewing tasks with the trainee.
* Explaining to the trainee the evaluation procedures that will be utilized and which tasks may be performed during the evaluation period.
* Accurately evaluating and recording demonstrated performance of tasks. Dating and initialing completion of the task to indicate satisfactory performance. Unsatisfactory performance should also be documented.
* Evaluate the numbered tasks only. Do not evaluate bullets as they are provided as examples or additional clarification.
* Completing the Evaluation Record found at the end of each PTB.
* Completing an Incident Personnel Performance Rating (ICS 225) form.

1. The **Final Evaluator:**

* Being qualified and proficient in the position being evaluated.
* Reviewing the trainee’s record to ensure completeness.
* Signing the appropriate verification statement found in the beginning of the PTB when all tasks have been initialed.
* Ensuring all tasks have been completed within the three years prior to submission for final approval.

1. **Incident Training Specialist**

* Issue the PTB with concurrence of employing/sponsoring organization to document task performance.
* Identify incident evaluation opportunities.
* Assist trainees, coaches/trainers and evaluators with proper documentation.
* Conduct progress reviews and answer questions.
* Ensure that coach/trainer and evaluators are qualified and can make accurate and honest appraisal of the trainee’s performance.

***Position Tasks and Associated Task Book Codes***

Each Position Task Book lists the performance requirements (tasks) for specific positions set by the latest version of ICS competencies and behaviors recognized by FEMA’s National Integration Center and posted to the NIMS Resource Center Web site, <http://www.fema.gov/>media-library/assets/documents/11685.

The tasks required of a position range in criticality. A Trainee must demonstrate competency at critical tasks while functioning in the target position on an incident. The IIMTQS recognizes that the nature of some less critical tasks may be performed on planned events, in exercises, or in other situations and be sufficient demonstration of competency upon which to base qualification.

Each task in this Position Task Book has at least one code associated with the situation(s) within which the task MUST be completed. Performance of any task in a situation(s) other than that required by the task’s code(s) is not valid for qualification.

If more than one code is listed, the task may be completed in any of the situations (e.g. If code **I1**, **I2**, and **O1** are listed, the task may be completed in any of the three situations). The evaluator should circle the evaluation code for which the task was evaluated.

**Definitions for these codes are:**

**I1** = Task must be performed on an incident which meets the following criteria:

* Is managed under the Incident Command System (ICS)
* Requires a written Incident Action Plan (IAP)
* Requires using the Planning P to plan for multiple operational periods
* Matches or is higher complexity level (see IIMTQS Appendix A – Incident Complexity Analysis Chart) than the type rating being pursued

**I2** = Task can be performed in the following situations:

* Incident
* Incident within an Event or Incident

The situation must meet the following criteria:

* + Is a critical time-pressured, high-consequence incident managed under the Incident Command System (ICS)
  + Matches or is higher complexity level (see IIMTQS Appendix A – Incident Complexity Analysis Chart) than the type rating being pursued

**O1** = Task can be performed in the following situations:

* Planned Event
* “Full Scale Exercise” or “Functional Exercise” as defined by HSEEP (see IIMTQS Section XIII. Qualifying Incident, Event, and Exercise Guidelines; Qualifying Exercise Attributes)

This situation must meet the following criteria:

* + Is managed under the Incident Command System (ICS)
  + Matches or is higher complexity level (see IIMTQS Appendix A – Incident Complexity Analysis Chart) than the type rating being pursued
  + Requires a formal written Incident or Event Action Plan (IAP/EAP)
  + Requires using the Planning P to plan for multiple operational periods
  + For an Event, requires contingency planning for an Incident within the Event.

**O2** = Task can be performed in the following situations if the situation affords the opportunity to evaluate the knowledge/skills associated with the ICS position:

* Planned Event not meeting the requirements in O1.
* Exercise not meeting the requirements in O1.
* Training
* Daily Job

**R** = Rare events seldom occur and opportunities to evaluate Trainee performance in real settings are limited. Examples of rare events include accidents, injuries, vehicle and aircraft crashes. Through interviews, the evaluator may be able to determine if the trainee could perform the task in a real situation.

There are numerous bullet statements listed under each task. The bullet statements are listed as guidelines/examples for the evaluator to consider when insuring the intent of the task has been completed. Not all bullet statements for a task are required to be completed if the overall intent of the task has been satisfied.

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| **Competency: Demonstrate knowledge and ability to perform subordinate ICS positions.**  *Description****: Direct Entry*** *positions allow an individual to train and be qualified in this Staff position without being qualified in subordinate positions.**This behavior and associated task(s) are not required if the trainee is already qualified in the subordinate position.* | | | |
| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| **Behavior: Demonstrate knowledge, understanding and ability to perform the Plans Function Unit Leader positions that are subordinate to the unit.** | | | |
| 1. Demonstrate the ability to perform the duties and skills of a Resources Unit Leader according to the most current version of the Position Task Book for this position.  * *Maintain status of all assigned resources (primary and support) at an incident.* * *Manage check-in of all resources.* * *Maintain a status-keeping system indicating current location and status of all resources.* * *Maintain a master list of all resources (e.g., key supervisory personnel, primary and support resources, etc.).* | I1  I2  O1 |  |  |
| 1. Demonstrate the ability to perform the duties and skills of a Situation Unit Leader according to the most current version of the Position Task Book for this position.  * *Ensure the collection, processing and organizing of all incident information.* * *As needed, prepare future projections of incident growth, maps and intelligence.* | I1  I2  O1 |  |  |
| 1. Explain your knowledge and understanding of the job of a Documentation Unit Leader according to most current version of the Position Task Book for this position.  * *Maintain accurate and up-to-date incident files.* * *Provide duplication services.* * *Ensure proper storage of incident files for legal, analytical and historical purposes.* | I1  I2  O1 |  |  |
| 1. Explain your knowledge and understanding of the job of a Demobilization Unit Leader according to the most current version of the Position Task Book for this position.  * *Develop the Incident Demobilization Plan.* | I1  O1 |  |  |

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| **Competency: Assume position responsibilities**  Description: Successfully assume role of Planning Section Chief and initiate position activities at the appropriate time according to the following behaviors. | | | |
| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| **Behavior: Ensure readiness for assignment.** | | | |
| 1. Obtain and assemble information and materials needed for kit. Kit assembled and prepared prior to receiving an assignment. Kit contains critical items needed for the assignment and items needed for functioning during the assignment. Kit is easily transportable. The basic information and materials needed may include, but is not limited to, any of the following:   **Reference Material**   * *References appropriate for the incident type and agencies involved.* * *Agency specific policies and procedures.* * Coast Guard “*Incident Management Handbook”* * Incident Management Training Consortium “*Response and Planning Guide”* * EMSI ICS Institute *“Planning Section Chief”, Job Aid* * *IMT contact* information.   **Forms may include, but are not limited to:** (PSC should ensure availability of forms for appropriate positions):   * *ICS 201, Incident Briefing* * *ICS 202, Incident Objectives* * *ICS 203, Organization Assignment List* * *ICS 204, Assignment List* * *ICS 205, Incident Radio Communications Plan* * *ICS 205A, Communications List* * *ICS 206, Medical Plan* * *ICS 207, Incident Organization Chart* * *ICS 208, Safety Message / Plan* * *ICS 209, Incident Status Summary* * *ICS 210, Resource Status Change* * *ICS 211, Incident Check-In List* * *ICS 213, General Message* * *ICS 214, Activity Log* * *ICS 215 & WS Operational Planning Worksheet* * *ICS 215A, & WS Incident Action Plan Safety Analysis* * *ICS 219-1 through 219-8, Resource Status Cards* * *ICS 221 Demobilization Checkout* * *ICS 225, Incident Personnel Performance Rating* * *Agency specific forms* appropriate to the function   **Supplies**   * *Office supplies appropriate to the function* * *Maps* | I1  I2  O1  O2 |  |  |

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| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| 1. Arrive properly equipped at incident assigned location within acceptable time limits. | I1  I2  O1  O2 |  |  |
| 1. Check in according to receiving agency/organization guidelines. | I1  I2  O1  O2 |  |  |
| **Behavior: Ensure availability, qualifications and capabilities of resources to complete assignment.** | | | |
| 1. Identify Units within the Section to be activated and resources required for Section operations. | I1  I2  O1 |  |  |
| 1. Utilize technical specialists, operations personnel and local agency(s) personnel. | I1  I2  O1 |  |  |
| **Behavior: Gather, update and apply situational information relevant to the assignment.** | | | |
| 1. Obtain complete information from dispatch upon activation.  * *Incident name.* * *Incident order number.* * *Request number.* * *Reporting location.* * *Reporting time.* * *Transportation arrangements/travel routes.* * *Contact procedures during travel (telephone/radio).* | I1  O1 |  |  |
| 1. Gather information necessary to assess incident assignment and determine immediate needs and actions.  * *Incident Commander’s name and agency/organization contact information.* * *Type of incident.* * *Current resource commitments.* * *Current situation.* * *Expected duration of assignment.* * *Topography.* * *Weather.* * *Agency Administrator's briefing/other briefing requirements (as appropriate).* | I1  I2  O1  O2 |  |  |

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| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| 1. Obtain briefing from Agency Administrator/ outgoing Incident Commander and gather information.  * *Ensure briefings from applicable outgoing personnel are complete and include, as a minimum description: Incident Objectives, ICS 201 (Incident Briefing), organizational structure (area command or single organization), special considerations on the incident and the current regional situation.* * *Obtain anticipated incident duration, size and type.* * *Complete the appropriate checklist for takeover* *of incidents.* | I1  I2  O1 |  |  |
| 1. Collect information from outgoing Planning Section Chief, initial Incident Commander or other personnel responsible for incident prior to your arrival.  * *Obtain status of incident and assigned resources.* * *Obtain status of existing Planning Section.* * *Obtain information on location situations; e.g., ICP/base locations, medical facilities, road closures, camp locations, etc.* * *Obtain a copy of “Delegation of Authority”.* | I1  O1 |  |  |
| **Behavior: Establish effective relationships with relevant personnel.** | | | |
| 1. Establish and maintain positive interpersonal and interagency working relationships.  * *Local agencies.* * *Hosting unit.* * *Public.* * *Division/Group Supervisors.* * *Command and General Staff.* | I1  I2  O1 |  |  |
| 1. Create a work environment that provides mutual respect and equal opportunity for all personnel assigned to the incident. | I1  I2  O1 |  |  |
| **Behavior: Establish organization structure, reporting procedures and chain of command of assigned resources.** | | | |
| 1. Organize assigned resources into configurations that meet incident/tactical objectives.  * *Identify workspace requirements and determine location.* * *Brief unit leaders, including summary of incident, current activity and anticipated section activity for individual unit planning.* * *Provide initial operating instructions to section personnel, including health, safety, security concerns and expectations.* | I1  I2  O1  O2 |  |  |

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| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| **Behavior: Understand and comply with ICS concepts and principles.** | | | |
| 1. Maintain appropriate span of control. | I1  I2  O1 |  |  |
| 1. Demonstrate knowledge of ICS structure, principles, positions and ICS forms. | I1  I2  O1  O2 |  |  |
| 1. Understand scope, roles, responsibilities, jurisdiction and authority of responder agencies. | I1  I2  O1 |  |  |
| 1. Assure execution of appropriate administrative requirements (to include documentation, ICS forms, personnel and equipment time records, performance ratings). | I1  O1  O2 |  |  |
| **Competency: Lead assigned personnel**  Description: *Influence, guide and direct assigned personnel to accomplish objectives and desired outcomes in a rapidly changing, high-risk environment.* | | | |
| **Behavior: Model leadership values and principles.** | | | |
| 1. Exhibit principles of duty.  * *Be proficient in your job, both technically and as a leader.* * *Make sound and timely decisions.* * *Ensure tasks are understood, supervised and accomplished.* * *Train and mentor assigned* subordinates. | I1  I2  O1  O2 |  |  |
| 1. Exhibit principles of respect.  * *Know your subordinates and look out for their well-being.* * *Keep your subordinates informed.* * *Build the team.* * *Assign your subordinates* in accordance with their capabilities. | I1  I2  O1  O2 |  |  |
| 1. Exhibit principles of integrity.  * *Know yourself and seek improvement.* * *Seek responsibility and accept responsibility for your actions.* * *Set the example.* | I1  I2  O1  O2 |  |  |

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| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| **Behavior: Ensure the safety, welfare and accountability of assigned personnel.** | | | |
| 1. Identify potentially hazardous situations in your working area. | I1  I2  O1 |  |  |
| 1. Inform subordinates of hazards. | I1  I2  O1 |  |  |
| 1. Control positions and function of resources | I1  I2  O1 |  |  |
| 1. Ensure special precautions are taken when extraordinary hazards exist. | I1  I2  O1 |  |  |
| 1. Ensure adequate rest is provided to all unit personnel. | I1  I2  O1 |  |  |
| 1. Ensure rest, recuperation and release requirements of resources are tracked and preparations are made to meet them (including requirements by terms of employment). | I1  I2  O1 |  |  |
| **Behavior: Establish work assignments and performance expectations, monitor performance and provide feedback.** | | | |
| 1. Establish priorities and coordinate units within the section. | I1  I2  O1  O2 |  |  |
| 1. Communicate job performance requirements to subordinates. | I1  I2  O1 |  |  |
| 1. Continuously evaluate performance. | I1  I2  O1 |  |  |
| 1. Reinforce acceptable performance. | I1  I2  O1 |  |  |
| 1. Communicate deficiencies immediately and take corrective action. | I1  I2  O1 |  |  |
| 1. Identify training needs and provide opportunities for training. | I1  I2  O1  O2 |  |  |
| 1. Prepare and discuss performance ratings with subordinates | I1  I2  O1 |  |  |
| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| 1. Ensure necessary support staff is aware of planning meeting assignments.  * *Situation Unit Leader has accurate and current incident, regional and national situation status.* * *Resources Unit Leader has accurate and current status of resources on the incident as well as regionally and nationally.* * *Technical specialist input is presented.* * *Arrangements are made for documentation and recording of applicable information.* | I1  O1 |  |  |
| 1. Ensure Resources Unit Leader is planning tactics meeting and operational briefing assignment. | I1  O1 |  |  |
| **Behavior: Emphasize teamwork.** | | | |
| 1. Establish cohesiveness among assigned resources.  * *Establish trust through open communication.* * *Require commitment.* * *Set expectations of accountability.* * *Bring focus to the team result.* | I1  I2  O1  O2 |  |  |
| **Behavior: Coordinate interdependent activities.** | | | |
| 1. Interact and coordinate with all command and general staff. | I1  I2  O1 |  |  |
| 1. Coordinate incident rehabilitation needs.  * *Coordinate with responsible agencies.* * *Work with technical specialist(s) e.g., hazardous materials specialist, environmental specialists and keep updated on their activities.* | I1  O1 |  |  |

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| **Competency: Communicate effectively**  Description: *Use suitable communication techniques to share relevant information with appropriate personnel on a timely basis to accomplish objectives in a rapidly changing, high-risk environment* | | | |
| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| **Behavior: Ensure relevant information is exchanged during briefings and debriefings.** | | | |
| 1. Attend Agency Administrator and/or outgoing Incident Commander briefing.  * *Provide the following: a completed analysis of the incident or support the development of an analysis, a written Delegation of Authority, a copy of the most recent ICS 209 (Incident Status Summary), map(s) of the incident, and a completed ICS 201 (Incident Briefing) and IAP (Incident Action Plan).* * *Complete the appropriate checklist for transition of large incidents.* * *Provide copies of current resource orders and those resources committed to incident.* * *Provide key contact list with phone and fax numbers.* | I1  O1 |  |  |
| 1. Obtain briefing from your Incident Commander. May be one-on-one or at an initial strategy meeting or another team meeting.  * *Receive Incident Commander's priorities, goals, and objectives for the incident management team.* * *Receive Incident Commander's priorities, goals and objectives for the incident.* * *Obtain initial instructions concerning the tasks expected of the planning section.* * *Receive expected timeframes for briefings, planning meetings and team meetings.* | I1  I2  O1  O2 |  |  |
| 1. Collect information from the outgoing planning section chief, initial Incident Commander or other personnel with information relevant to your section.  * *Obtain status of incident and assigned resources.* * *Obtain status of existing planning section.* * *Evaluate and replace or order positions in planning section, as needed.* | I1  O1 |  |  |
| 1. Ensure all briefings and meeting locations, are well organized and necessary materials are available.  * *Large ICS 215 (Operational Planning Worksheet) and ICS 215A (Incident Action Plan Safety Analysis).* * *Large scale schematic map of incident.* * *Flip charts.* * *Felt tip markers.* * *Planning meeting Agenda*. | I1  O1  O2 |  |  |
| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| 1. Identify who needs to attend operational briefings  * *Post in conspicuous locations time of briefings, location, and required attendees.* | I1  O1  O2 |  |  |
| 1. Facilitate the operational period briefing, particularly emphasizing any changes from the written IAP. | I1  O1 |  |  |
| 1. Participate in after-incident review per agency/organization policy. | I1  I2  O1 |  |  |
| **Behavior: Ensure documentation is complete and disposition is appropriate.** | | | |
| 1. Ensure an incident summary e.g., ICS 209 (Incident Status Summary) is completed within established timeframes.  * Review for accuracy and completeness, approve, sign and submit to appropriate office. | I1  O1 |  |  |
| 1. Ensure all personnel and equipment time records are complete and have been submitted to the Finance Section Leader at the end of each operational period. | I1  O1  O2 |  |  |
| 1. Submit to the documentation unit completed and legible ICS 214 (Unit Log) containing pertinent information for each operational period. | I1  O1  O2 |  |  |
| 1. Ensure all required incident reports and narratives are completed to agreed upon standards prior to leaving incident. | I1  O1 |  |  |
| 1. Properly assemble and file up-to-date incident records. | I1  O1 |  |  |
| **Behavior: Gather, produce and distribute information as required by established guidelines and ensure understanding by recipient.** | | | |
| 1. Establish and maintain incident planning cycle.  * *Publish and post-planning cycle at appropriate locations.* * *Distribute cycle to Incident Commander, command and general staff, and other appropriate personnel.* * *Facilitate meeting and briefings during the planning cycle.* | I1  O1 |  |  |

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| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| **Behavior: Communicate and ensure understanding of work expectations within the chain of command and across functional areas.** | | | |
| 1. Evaluate and share with incident management team members, all information for your section and what is anticipated for incident operations based on expected duration, size, type of incident, priorities and values to be protected (life, property, infrastructure, environment, etc.) and jurisdictional involvement. | I1  O1 |  |  |
| **Behavior: Develop and implement plans and gain concurrence of affected agencies and/or the public.** | | | |
| 1. Ensure planning staff completes required elements of the Incident Action Plan (IAP) within required timeframes.  * *Obtain elements from other appropriate sections within established timeframes.* * *Assemble the elements into an IAP.* * *Ensure the IAP meets incident objectives and is congruent with approved strategic plan.* * *Develop contingency plan(s) as needed* * *Obtain the Incident Commander's approval and signature on IAP.* * *Identify how many copies of IAP are needed.* * *Ensure documentation unit makes and distributes appropriate copies of IAP to key people.* * *Provide accurate information to these individuals prior to the operational period briefing; e.g., air operations, ground support, food unit, supply unit and agency/organization dispatch*. | I1  O1 |  |  |
| 1. Ensure the agency's/organization’s incident strategic plan is appropriate.  * *If it needs revision the Agency Administrator is responsible (may ask the Incident Commander to revise for the Agency Administrator's approval).* | I1  O1 |  |  |
| 1. Consider demobilization early enough during the incident so an adequate demobilization plan is in place prior to the actual need to release resources.  * *Ensure demobilization plan is complete and signed.* * *Develop in coordination with command and general staff and agency/organization dispatch.* * *Request all sections submit names or lists of surplus or potentially surplus personnel and resources to demobilization unit 48 hours in advance of them becoming surplus.* * *Schedule surplus resources and personnel for proper demobilization.* | I1  O1 |  |  |

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| **Competency:** **Ensure completion of assigned actions to meet identified objectives**  Description: *Identify, analyze and apply relevant situational information and evaluate actions to complete assignments safely and meet identified objectives. Complete actions within established timeframe.* | | | |
| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| **Behavior: Administer and/or apply agency policy, contracts and agreements.** | | | |
| 1. Display, describe and utilize necessary agency/organization policy, legal and fiscal constraints and political considerations to be used in the planning meeting to review adequacy of strategic plans and in development of Incident Action Plan (IAP) | I1  O1  O2 |  |  |
| **Behavior: Gather, analyze and validate information pertinent to the incident or event and make recommendations for setting priorities.** | | | |
| 1. Evaluate and monitor current situation.  * *Determine if present plan of action meets incident objectives.* * *Determine if the present plan is congruent with the incident strategic plan.* * *Identify current and potential problems and concerns.* * *Advise Incident Commander and other appropriate incident management team personnel.* | I1  I2  O1 |  |  |
| 1. Collect, evaluate and process resource and situational incident information to provide the basis of the IAP. | I1  O1 |  |  |
| **Behavior: Take appropriate action based on assessed risks.** | | | |
| 1. Establish priorities and coordinate units within the section. | I1  I2  O1 |  |  |

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| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| 1. Schedule and facilitate planning meetings.  * *Inform identified planning meeting attendees of the time, location and information expected of them for the meeting.* * *Define objectives, agenda and time expectations for the planning meeting.* * *Agree to and post at appropriate locations, the planning meeting agenda.* * *Identify or reaffirm incident objectives (Incident Commander [IC] identifies or approves objectives.* * *Display, describe and utilize necessary agency/organization policy, legal and fiscal constraints and political considerations to be used in the planning meeting to review adequacy of strategic plans and in development of Incident Action Plan (IAP).* * *Present accurate, adequate and current situation and resource status information with accurate maps.* * *Ensure Operations Section Chief identifies values to be protected, division boundaries and prioritizes divisions in the event choices are made in allocating scarce resources, on map(s) visible to all attendees.* * *Ensure Operations Section Chief identifies tactics, resources needed and reporting/pickup locations and time by division/groups and this information is properly displayed on ICS 215 or equivalent.* * *Ensure the Safety Officer identifies hazards and the mitigation of those hazards by division/group and this information is displayed on an ICS 215 A (Incident Action Plan Safety Analysis) or equivalent.* * *Compare resources needed to implement the Operations Section Chief's proposed action plan to available resources and reconcile any differences.* * *Display available resources for IAP on ICS 215* * *Coordinate all attendees to assure the plan as proposed can be implemented and supported;* * *Ensure health and safety is incorporated into the planning process.* * *Resolve concerns and conflicts.* * *Adjust IAP accordingly.* * *Identify elements of the IAP required from other sections, and time needed by the planning section; e.g., Safety Message, Communication Plan, Medical Plan, Air Operations Summary, Transportation Plan and other special messages.* * *Conduct planning meeting in 30 minutes or less.* | I1  O1 |  |  |
| 1. Ensure planning meetings are scheduled as required and all objectives of planning meeting are met in the acceptable time frame. | I1  O1 |  |  |
| **TASK** | **C O D E** | **Evaluation Record**  **Number** | **EVALUATOR:**  **Initial & date upon completion of task** |
| **Behavior: Modify approach based on evaluation of incident situation.** | | | |
| 1. Monitor incident status and develop alternative strategies.  * *Document and present potential alternative strategies to command and general staff.* * *Advise command and general staff of significant changes in incident status that affect them, in a timely manner.* | I1  O1 |  |  |
| **Behavior: Plan for demobilization and ensure demobilization procedures are followed.** | | | |
| 1. Consider demobilization and/or transition early enough during the incident so an adequate Demobilization or Transition Plan is in place prior to the actual need to release resources.  * *Ensure demobilization plan is complete and signed.* * *Develop in coordination with command and general staff and agency/organization dispatch.* * *Request all sections submit names or lists of surplus or potentially surplus personnel and resources to demobilization unit 48 hours in advance of them becoming surplus.* * *Schedule surplus resources and personnel for proper demobilization.* | I1  O1 |  |  |
| 1. Implement approved demobilization plan and schedule. | I1  O1 |  |  |
| **Behavior: Transfer position duties while ensuring continuity of authority and knowledge and taking into account the increasing or decreasing incident complexity.** | | | |
| 1. Monitor and document progress toward incident objectives and prepare for transition. | I1  O1 |  |  |
| 1. Determine with replacement time of transfer. | I1  O1 |  |  |
| 1. Communicate transfer of command to command and general staff. | I1  O1 |  |  |
| 1. If necessary, coordinate with agencies about transfer of command back to local jurisdiction. | I1  O1 |  |  |

**INSTRUCTIONS FOR COMPLETING THE EVALUATION RECORD**

A separate Evaluation Record needs to be completed for each incident, event, full-scale exercise, functional exercise, tabletop, daily duties, or in a classroom where a Trainee can be evaluated and is required for any task signed off in the PTB. If additional Evaluation Records are needed, a page can be copied from a blank task book and attached.

**Each Evaluation Record will need to have the following information provided:**

**Evaluation Record #:** *The number at the top of the evaluation record which identifies a particular incident or group of incidents. This number should be placed in the column labeled “Evaluation Record #” on the PTB for each task performed satisfactorily. This number enables reviewers of the completed PTB to ascertain the qualifications of the different evaluators prior to making the appropriate sign-off on the PTB.*

***Trainee Name*:** *Insert the Trainee’s full name.*

***Trainee Position*:** *Insert the Trainee’s ICS Trainee position.*

**Evaluator’s Information:**

***Evaluator’s Name:*** *Insert the Evaluator’s full name.*

***Incident Position/Assignment:*** *Identify the ICS position the Evaluator selected during this evaluation.*

***Evaluator’s Agency/Organization:*** *Identify the**agency/organization the Evaluator is representing*

***Evaluator’s Office Title:*** *Identify the position or title the Evaluator has within their home agency/organization.*

***Agency/Organization Address:*** *Insert the mailing address of the Agency/Organization where the Evaluator receives US mail service.*

***Phone and E-mail:*** *Insert the Evaluator’s phone number and e-mail address.*

***Evaluator’s Relevant Certification Qualification System:*** *List the evaluator’s NIMS ICS certification relevant to the Trainee position supervised and the Qualification System (i.e., IIMTQS, NWCG, USCG).*

***Name and Location of Exercise/Event/Incident:*** *Identify the name and location where the tasks were evaluated.*

***Exercise/Event/Incident Kind and Complexity:*** *Enter type of incident (hazmat, tornado, flood, structural fire, search and rescue, tabletop exercise, full scale exercise, etc.) and* complexity of incident or sub-incident that the evaluation is for by Type (Type 1, 2, 3, etc).

***Number and Type of Resources:*** *Enter the number and type of resources assigned to the incident pertinent to the Trainee’s position.*

***Duration:*** *Enter inclusive dates during which the Trainee was evaluated and number of operational periods in Trainee status. This block may indicate a span of time covering small incidents/events considered (or managed) as one on-going incident if the Trainee has been evaluated on that basis.*

***Recommendation:***  *Check as appropriate and/or make comments regarding the future needs for development of this Trainee.*

***Recommendations/Comments:*** *Provide comments and observations of the Trainee while they were assigned to the incident/event/exercise. The ICS 225 can also be completed and used as an accompanying document to record the incident experience or it can be used as guidance on the type of information that is necessary in this section of the Evaluation Record.*

***Evaluator’s Signature:*** *Evaluator signs here.*

***Date:*** *Indicate* *the calendar date the record is being completed.*

***Evaluator’s Initial:*** *Initial here to authenticate recommendations and to allow for comparison with initials in the PTB.*

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| **Evaluation Record # 1** | |
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| TRAINEE NAME | TRAINEE POSITION |
| **Evaluator’s Information** | |
| Evaluator’s Name: | |
| Incident Position/Assignment | |
| Evaluator’s Agency/Organization: | |
| Evaluator’s Office Title: | |
| Agency/Organization Address: | |
| Phone and Email**:** | |
| Evaluator’s Relevant Certification and Qualification System: | |
| Name and Location of Exercise/Event/Incident Kind: | |
| Exercise/Event/Incident Type (*hazmat, tornado, flood, structural fire, search and rescue, tabletop exercise, full scale exercise, etc.) and Complexity (Type 1, 2, 3, etc.):* | |
| Number and Type of Resources Pertinent to Trainee’s Position: *(number of personnel being supervised, number of resources by type and kind)* | |
| Duration: *(inclusive dates in Trainee status and number of operational periods in Trainee status)* | |
| **Recommendation:** The tasks initialed and dated by me have been performed under my supervision in a satisfactory manner by the above named Trainee. I recommend the following for further development of this Trainee.  \_\_\_\_\_\_ The individual has successfully performed all tasks for the position and should be considered for certification.  \_\_\_\_\_\_ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.  \_\_\_\_\_\_ The individual attempted but was not able to successfully complete certain tasks (comments below) or additional guidance is required.  \_\_\_\_\_\_ The individual is deficient in the performance of tasks for the position and needs further training in both required knowledge and skills prior to additional assignment(s) as a Trainee (comments below).  Recommendations/Comments *(Attach additional comment sheets as needed. Also see ICS-225: Incident Personnel Performance Rating)*: | |
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| Evaluator’s Signature: Date: | |
| Evaluator’s Initials: | |
| **Evaluation Record # 2** | |
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| TRAINEE NAME | TRAINEE POSITION |
| **Evaluator’s Information** | |
| Evaluator’s Name: | |
| Incident Position/Assignment | |
| Evaluator’s Agency/Organization: | |
| Evaluator’s Office Title: | |
| Agency/Organization Address: | |
| Phone and Email**:** | |
| Evaluator’s Relevant Certification and Qualification System: | |
| Name and Location of Exercise/Event/Incident Kind: | |
| Exercise/Event/Incident Type (*hazmat, tornado, flood, structural fire, search and rescue, tabletop exercise, full scale exercise, etc.) and Complexity (Type 1, 2, 3, etc.):* | |
| Number and Type of Resources Pertinent to Trainee’s Position: *(number of personnel being supervised, number of resources by type and kind)* | |
| Duration: *(inclusive dates in Trainee status and number of operational periods in Trainee status)* | |
| **Recommendation:** The tasks initialed and dated by me have been performed under my supervision in a satisfactory manner by the above named Trainee. I recommend the following for further development of this Trainee.  \_\_\_\_\_\_ The individual has successfully performed all tasks for the position and should be considered for certification.  \_\_\_\_\_\_ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.  \_\_\_\_\_\_ The individual attempted but was not able to successfully complete certain tasks (comments below) or additional guidance is required.  \_\_\_\_\_\_ The individual is deficient in the performance of tasks for the position and needs further training in both required knowledge and skills prior to additional assignment(s) as a Trainee (comments below).  Recommendations/Comments *(Attach additional comment sheets as needed. Also see ICS-225: Incident Personnel Performance Rating)*: | |
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| Evaluator’s Signature: Date: | |
| Evaluator’s Initials: | |
| **Evaluation Record # 3** | |
|  |  |
| TRAINEE NAME | TRAINEE POSITION |
| **Evaluator’s Information** | |
| Evaluator’s Name: | |
| Incident Position/Assignment | |
| Evaluator’s Agency/Organization: | |
| Evaluator’s Office Title: | |
| Agency/Organization Address: | |
| Phone and Email**:** | |
| Evaluator’s Relevant Certification and Qualification System: | |
| Name and Location of Exercise/Event/Incident Kind: | |
| Exercise/Event/Incident Type (*hazmat, tornado, flood, structural fire, search and rescue, tabletop exercise, full scale exercise, etc.) and Complexity (Type 1, 2, 3, etc.):* | |
| Number and Type of Resources Pertinent to Trainee’s Position: *(number of personnel being supervised, number of resources by type and kind)* | |
| Duration: *(inclusive dates in Trainee status and number of operational periods in Trainee status)* | |
| **Recommendation:** The tasks initialed and dated by me have been performed under my supervision in a satisfactory manner by the above named Trainee. I recommend the following for further development of this Trainee.  \_\_\_\_\_\_ The individual has successfully performed all tasks for the position and should be considered for certification.  \_\_\_\_\_\_ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.  \_\_\_\_\_\_ The individual attempted but was not able to successfully complete certain tasks (comments below) or additional guidance is required.  \_\_\_\_\_\_ The individual is deficient in the performance of tasks for the position and needs further training in both required knowledge and skills prior to additional assignment(s) as a Trainee (comments below).  Recommendations/Comments *(Attach additional comment sheets as needed. Also see ICS-225: Incident Personnel Performance Rating)*: | |
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| Evaluator’s Signature: Date: | |
| Evaluator’s Initials: | |
| **Evaluation Record # 4** | |
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| TRAINEE NAME | TRAINEE POSITION |
| **Evaluator’s Information** | |
| Evaluator’s Name: | |
| Incident Position/Assignment | |
| Evaluator’s Agency/Organization: | |
| Evaluator’s Office Title: | |
| Agency/Organization Address: | |
| Phone and Email**:** | |
| Evaluator’s Relevant Certification and Qualification System: | |
| Name and Location of Exercise/Event/Incident Kind: | |
| Exercise/Event/Incident Type (*hazmat, tornado, flood, structural fire, search and rescue, tabletop exercise, full scale exercise, etc.) and Complexity (Type 1, 2, 3, etc.):* | |
| Number and Type of Resources Pertinent to Trainee’s Position: *(number of personnel being supervised, number of resources by type and kind)* | |
| Duration: *(inclusive dates in Trainee status and number of operational periods in Trainee status)* | |
| **Recommendation:** The tasks initialed and dated by me have been performed under my supervision in a satisfactory manner by the above named Trainee. I recommend the following for further development of this Trainee.  \_\_\_\_\_\_ The individual has successfully performed all tasks for the position and should be considered for certification.  \_\_\_\_\_\_ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.  \_\_\_\_\_\_ The individual attempted but was not able to successfully complete certain tasks (comments below) or additional guidance is required.  \_\_\_\_\_\_ The individual is deficient in the performance of tasks for the position and needs further training in both required knowledge and skills prior to additional assignment(s) as a Trainee (comments below).  Recommendations/Comments *(Attach additional comment sheets as needed. Also see ICS-225: Incident Personnel Performance Rating)*: | |
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| Evaluator’s Signature: Date: | |
| Evaluator’s Initials: | |

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| **NOTES** |
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