A Publication of the National Wildfire Coordinating Group

#### NATIONAL INTERAGENCY INCIDENT MANAGEMENT SYSTEM

#### TASK BOOK FOR THE POSITION OF

Sponsored by United States Department of Agriculture

LOGISTICS SECTION CHIEF TYPE 1
(LSC1)
LOGISTICS SECTION CHIEF TYPE 2
(LSC2)

United States Department of the Interior

(WILDFIRE ASSIGNMENT REQUIRED)

National Association of State Foresters



PMS 311-33 August 1993 NFES 2343

#### TASK BOOK ASSIGNED TO:

INDIVIDUAL'S NAME, DUTY STATION, AND PHONE NUMBER

#### TASK BOOK INITIATED BY:

OFFICIAL'S NAME, TITLE, DUTY STATION, AND PHONE NUMBER

LOCATION AND DATE THAT TASK BOOK WAS INITIATED

The material contained in this book accurately defines the performance expected of the position for which it was developed. This task book is approved for use as a position qualification document in accordance with the instructions contained herein.

# has met all requirements for qualification in this position and that such qualification has been issued. I verify that all tasks have been performed and are complete with signatures. I also verify that has performed as a trainee and should therefore be considered for certification in this position. EVALUATOR'S PRINTED NAME, TITLE, DUTY STATION, AND PHONE NUMBER CERTIFYING OFFICIAL'S NAME, TITLE, DUTY STATION, AND PHONE NUMBER VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK CERTIFYING OFFICIAL'S SIGNATURE AND DATE FINAL EVALUATOR'S VERIFICATION EVALUATOR'S SIGNATURE AND DATE FOR THE POSITION OF AGENCY CERTIFICATION I certify that

Additional copies of this publication may be ordered from:

National Interagency Fire Center, ATTN: Supply 3833 S. Development Avenue Boise, Idaho 83705-5354

#### NATIONAL WILDFIRE COORDINATING GROUP POSITION TASK BOOK

Position Task Books (PTB) have been developed for designated positions within the National Interagency Incident Management System. Each PTB lists the performance requirements (tasks) for the specific position in a format that allows a trainee to be evaluated against written guidelines. Successful performance of all tasks, as observed and recorded by an evaluator, will result in a recommendation to the agency that the trainee be certified in that position.

Evaluation and confirmation of the individual's performance of all the tasks may involve more than one evaluator and can occur on incidents, in classroom simulation, and in other work situations. Designated PTBs require position performance during which the majority of required tasks are demonstrated on a single incident. Some positions also required that specific tasks be performed on a wildland fire—performance of these tasks on other types of incidents are NOT qualifying. It is important that performance be critically evaluated and accurately recorded by each evaluator. All tasks must be evaluated. All bullet statements within a task which require an action (contain an action verb) must be demonstrated before that task can be signed off.

A more detailed description of this process, definitions of terms, and responsibilities are included in the Wildland Fire Qualification Subsystem Guide 310-1. A brief list of responsibilities also appears below.

#### **RESPONSIBILITIES:**

- 1. The **Local Office** is responsible for:
  - Selecting trainees based on the needs of the local office and the geographic area.
  - Ensuring that the trainee meets the training and experience requirements included in the Wildland Fire Qualification Subsystem Guide 310-1.
  - Issuing PTBs to document task performance.
  - Explaining to the trainee the purpose and processes of the PTB as well as the trainee's responsibilities.
  - Providing opportunities for evaluation and/or making the trainee available for evaluation.
  - Providing an evaluator for local assignments.
  - Tracking progress of the trainee.
  - Confirming PTB completion.
  - Determining certification per local policy.
  - Issuing proof of certification.
- 2. The **individual** is responsible for:
  - Reviewing and understanding instructions in the PTB.
  - Identifying desired objectives/goals.

- Providing background information to an evaluator.
- Satisfactorily demonstrating completion of all tasks for an assigned position within three years.
- Assuring the Evaluation Record is complete.
- Notifying local office personnel when the PTB is completed and providing a copy.
- Keeping the original PTB in personal records.

#### 3. The **Evaluator** is responsible for:

- Being qualified and proficient in the position being evaluated.
- 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 objectives may be attained.
- Identifying tasks to be performed during the evaluation period.
- Accurately evaluating and recording demonstrated performance of tasks. Satisfactory performance shall be documented by dating and initialing completion of the task. Unsatisfactory performance shall be documented in the Evaluation Record.
- Completing the Evaluation Record found at the end of each PTB.
- Signing the verification statement inside the front cover of the PTB when all tasks have been initialed.

#### 4. The **Training Specialist** is responsible for:

- Identifying incident evaluation opportunities.
- Identifying and assigning an evaluator that can provide a positive experience for the trainee, and make an accurate and honest appraisal of the trainee's performance.
- Providing PTBs to approved trainees on the incident when local agency was unable to provide them.
- Documenting the assignment.
- Conducting progress reviews.
- Conducting a close-out interview with the trainee and evaluator and assuring that documentation is proper and complete.

#### QUALIFICATION RECORD

POSITION: LOGISTICS SECTION CHIEF TYPE 1 & 2 (LSC1 & LSC2)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<u>GENERAL</u>			
<ol> <li>Obtain and assemble information and materials needed for kit. Kit will be assembled and prepared prior to receiving an assignment. Kit will contain critical items needed for the assignment and items needed for functioning during the first 48 hours. Kit will be easily transportable and within agency weight limitations (per National Mobilization Guide). The basic information and materials needed are:         <ul> <li>ICS Form 205, Incident Radio Communication Plan.</li> <li>ICS Form 206, Medical Plan.</li> <li>ICS Form 213, General Message.</li> <li>ICS Form 214, Unit Log.</li> <li>Agency specific forms appropriate to the function.</li> <li>ICS 420-1, Field Operations Guide.</li> <li>ICS 410-1, Fireline Handbook.</li> <li>Position Manuals for the section.</li> <li>Individual checklists/reminders.</li> <li>Pens/pencils/note paper/etc.</li> <li>Office supplies appropriate to the function.</li> </ul> </li> </ol>	O		

O = task can be completed in any situation (classroom, simulation, prescribed fire, daily job, etc.) I = task must be performed on an incident (flood, fire, search & rescue, etc.) \*Code:

W = task must be performed on a wildfire incident

### POSITION: LOGISTICS SECTION CHIEF TYPE 1 & 2 (LSC1 & LSC2)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>2. Provide for the safety and welfare of assigned personnel during the entire period of supervision.</li> <li>Recognizes potentially hazardous situations.</li> <li>Informs subordinates of hazards.</li> <li>Ensures that special precautions are taken when extraordinary hazards exist.</li> <li>Ensures adequate rest is provided to all unit personnel.</li> </ul>	I		

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### POSITION: LOGISTICS SECTION CHIEF TYPE 1 & 2 (LSC1 & LSC2)

	TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
3.	<ul> <li>Establish and maintain positive interpersonal and interagency working relationships.</li> <li>Through briefings, discuss EEO, civil rights, sexual discrimination and other sensitive issues, with assigned personnel.</li> <li>Recognize cultural language difficulties as it impacts work output and expectations.</li> <li>Provide equal assignment opportunities based on individual skill level.</li> <li>Monitor and evaluate progress based on expected work standards not race, color or creed.</li> <li>Individual agency values and policies are addressed throughout the tenure of the incident.</li> <li>Differences in agency values and policies that affect the operation are arbitrated in a manner that fosters continuous positive working relationships.</li> <li>Integrate cultural resource considerations into all management activities.</li> </ul>	0		

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POSITION: LOGISTICS SECTION CHIEF TYPE 1 & 2 (LSC1 & LSC2)

TASK		C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<u>M(</u>	<u>OBILIZATION</u>			
4.	Obtain complete information from dispatch upon initial activation.  Incident name. Incident order number. Request number. Reporting location. Reporting time. Transportation arrangements/travel routes. Contact procedures during travel (telephone/radio).	I		
5.	Gather information necessary to assess incident assignment and determine immediate needs and actions.  Incident Commander's name and address. Type of incident. Current resource commitments. Current situation. Expected duration of assignment. Terrain. Weather. Agency administrator's briefing requirements (as appropriate).	I		
<u>IN</u> 0	Arrive at incident and check in. Arrive properly equipped at incident assigned location within acceptable time limits. Check in according to agency guidelines.	I		

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### POSITION: LOGISTICS SECTION CHIEF TYPE 1 & 2 (LSC1 & LSC2)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
7. Obtain briefing from agency administrator/ outgoing incident commander and gather intelligence.	I		
<ul> <li>Ensure that briefings from agency administrator/outgoing incident commander are complete and includes, as a minimum description: incident objectives, ICS-201, escaped fire situation analysis (wildfire incident), organizational structure (area command or single organization), special considerations on the incident and the current national situation.</li> <li>Collect information on current resources assigned, en route, on order, and local resource status including initial attack as it relates to the logistics section. These information sources may include: agency dispatcher, initial attack incident commander, type II or type III overhead, resource advisor, etc. Determine, through intelligence, facilities established and operating-expected locations.</li> <li>Obtain anticipated incident duration, size and type.</li> <li>Complete the appropriate checklist for takeover of large incidents.</li> </ul>			

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POSITION: LOGISTICS SECTION CHIEF TYPE 1 & 2 (LSC1 & LSC2)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>8. Obtain briefing from your Incident Commander. May be one-on-one or in an Incident Management Team Meeting.</li> <li>Receive Incident Commander's priorities, goals and objectives for the Incident Management Team.</li> <li>Receive Incident Commander's priorities, goals and objectives for the incident.</li> <li>Obtain initial instructions concerning the tasks expected of the Logistics Section.</li> <li>Receive expected time frames for briefings, planning meetings and team meetings.</li> </ul>	I		
<ul> <li>9. Collect information from outgoing Logistics Section Chief, Initial Incident Commander or other personnel responsible for incident prior to your arrival.</li> <li>Obtain status of incident and assigned resources.</li> <li>Obtain status of existing logistics section.</li> <li>Order personnel necessary to staff section units prior to publication of your first incident action plan.</li> </ul>	I		
10. Evaluate and share with incident management team members, all functional information for your section and what is anticipated for incident operations based on expected duration, size and type of incident.	I		

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POSITION: LOGISTICS SECTION CHIEF TYPE 1 & 2 (LSC1 & LSC2)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>Plan and activate section.</li> <li>Identify units within the section to be activated and resources required for section operation. After resources are identified, coordinate the order request</li> <li>Identify work space requirements and determine locations.</li> <li>Brief unit leaders including summary of incident, current activity, and anticipated section activity for individual unit planning</li> <li>Provide initial operating instructions to section personnel.</li> </ul>	I		
<ul> <li>Participate in preparation of Incident Action Plan.</li> <li>Review proposed tactics for next operational period or periods.</li> <li>Advise on current capabilities, limitations.</li> <li>Determine additional resources needed.</li> <li>Discuss long range plans and identify potential or future requirements.</li> <li>Prepare or review applicable portions of the IAP.</li> </ul>	I		

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POSITION: LOGISTICS SECTION CHIEF TYPE 1 & 2 (LSC1 & LSC2)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>13. Conduct logistics section meeting and/or briefing.</li> <li>Review proposed Incident Action Plan and identify possible changes. Follow-up with planning section.</li> <li>Confirm needs, requests or reassign personnel as needed.</li> <li>Review current and future situation status, resource status, fire behavior (wildfire incident), and weather forecast.</li> <li>Ensure medical, transportation, and communication plans are updated and to provide to plans unit.</li> </ul>	I		
14. Participate in the operational period briefing, particularly emphasizing any changes from the written Incident Action Plan.	I		
<ul> <li>Supervise section.</li> <li>Communicate job performance requirements to subordinates.</li> <li>Continuously evaluate performance.</li> <li>Communicate deficiencies immediately and take corrective action.</li> <li>Identify training needs and provide opportunities for training.</li> <li>Prepare and discuss formal performance evaluation.</li> <li>Establish priorities and coordinate units within the section.</li> </ul>	I		

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POSITION: LOGISTICS SECTION CHIEF TYPE 1 & 2 (LSC1 & LSC2)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>Interact and coordinate with all command and general staff.</li> <li>Receive and transmit current and accurate information.</li> </ul>	I		
<ul> <li>17. Update incident commander on current accomplishments and/or problems.</li> <li>Verbally inform incident commander as soon as possible on problems and accomplishments.</li> </ul>	W		
<ul> <li>18. ICS Form 214.</li> <li>Submit completed and legible unit logs containing pertinent information to the documentation unit for each operational period.</li> </ul>	I		
19. Ensure all personnel and equipment time records are complete and have been submitted to the Time Unit Leader at the end of each operational period.	I		
DEMOBILIZATION  20. Consider demobilization early enough during the incident so that an adequate demobilization plan is in place prior to the actual need to release resources.	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>21. Identify excess section resources. Coordinate with Unit Leaders and provide Planning Section Chief a list of excess personnel and other resources. List will include:  <ul> <li>Name/type.</li> <li>Quantity.</li> <li>Time/date of available release.</li> <li>Review the list daily for accuracy. Ensure that all units are demobilized in a timely and complete manner.</li> </ul> </li> </ul>	I		
22. Ensure that performance ratings are completed as required by the Incident Commander.	I		
<ul> <li>23. Assist in development, approval and implementation of Incident Demobilization Plan.</li> <li>Coordinate with the Demobilization Unit/Planning Section Chief during development and implementation of Demobilization Plan.</li> <li>Coordinate during development and implementation with local agency concerning functional demobilization procedures.</li> <li>Brief staff on demobilization responsibilities.</li> </ul>	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>24. Demobilization and check-out. Receive demobilization instructions from the appropriate person.</li> <li>Brief subordinate staff on demobilization procedures and responsibilities. Ensure that incident and agency demobilization procedures are followed. If required, ICS Form 211 (Demobilization Check-Out) is completed and turned in to the appropriate person.</li> <li>Brief replacement if necessary.</li> </ul>	I		
<ul><li>25. <u>Debrief Agency Administrator.</u></li><li>Participate in debriefing.</li></ul>	I		

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#### INSTRUCTIONS for EVALUATION RECORD

There are four separate blocks allowing evaluations to be made. These evaluations may be made on incidents, by simulation in classroom, or in daily duties, depending on what the position task book indicates. This should be sufficient for qualification in the position if the individual is adequately prepared. If additional blocks are needed, a page can be copied from a blank task book and attached.

**Evaluator's name, incident/office title & agency:** List the name of the evaluator, his/her incident position (on incidents) or office title, and agency.

Evaluator's home unit address & phone: self explanatory

#: The number in the upper left corner of the experience block identifies a particular experience or group of experiences. This number should be placed in the column labeled "Evaluation Record #" on the Qualification Record in order to indicate the circumstances under which a particular task was performed.

**Location of Incident/Simulation:** Identify the location where the tasks were performed by agency and office.

**Incident Type:** Enter type of incident, e.g., wildfire, search and rescue, flood, etc.

**Number and Type of Resources:** Enter the number of resources and types assigned to the incident pertinent to the trainee's task book position.

**Duration:** Enter inclusive dates during which the individual was evaluated. This block may indicate a span of time covering several small and similar incidents if the individual has been evaluated on that basis, i.e., several initial attack fires in similar fuel types.

Mgt. Level: Indicate ICS organization level, i.e., Type 4, Type 3, Type 2, Type 1 or Area Command.

**NFFL Fuel Model:** For wildfire experience, enter number (1-13) of the fuel model in which the incident occurred and under which the individual was evaluated.

- 1. Short Grass (1 foot)
- 2. Timber (grass & understory)
- 3. Tall grass (2 1/2 feet)
- 4. Chaparral (6 feet)
- 5. Brush (2 feet)
- 6. Dormant brush-Hardwood Slash
- 7. Southern Rough

- 8. Closed Timber Litter
- 9. Hardwood Litter
- 10. Timber (litter understory)
- 11. Light Logging Slash
- 12. Medium Logging Slash
- 13. Heavy Logging Slash

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

**Date:** List the date the record is being completed.

**Evaluator's initials:** Initial here to authenticate your recommendations and to allow for comparison with initials in the Qualifications Record.

**Evaluator's relevant red card rating:** List <u>your</u> certification relevant to the trainee position you supervised.

### **Evaluation Record**

	Tl	RAINEE NAME		TRAINEE	POSITION	
		s name, fice title & agency:				
Evaluator's hor	ne unit	address & phone:				
Location of Indoor Simulation (agency & an	on	Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
				to		
The tasks initialed & dated by me have been performed under my supervision and 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.  The individual was not able to complete certain tasks (comments below) or additional guidance is required.  Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.  The individual is severely deficient in the performance of tasks for the position and must complete all training (both mandatory & suggested) prior to further assignment as a trainee.  Recommendations:  Date: Evaluator's initials: Evaluator's relevant red card (or agency certification) rating:						
		s name,				
1nc1		fice title & agency: address & phone:				
Location of Inc or Simulati (agency & an	cident on	Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
				to		
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certification) ra	certification) rating:					

## **Evaluation Record** (Continuation Sheet)

	TI	RAINEE NAME	TRAINEE POSITION			
#3	#3 Evaluator's name, incident/office title & agency:					
Evaluator's home unit address & phone:						
Location of Incident or Simulation (agency & area)		Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
				to		
The tasks initialed & dated by me have been performed under my supervision and 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.  The individual was not able to complete certain tasks (comments below) or additional guidance is required.  Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.  The individual is severely deficient in the performance of tasks for the position and must complete all training (both mandatory & suggested) prior to further assignment as a trainee.  Recommendations:  Recommendations:						
Date: Evaluator's initials: Evaluator's relevant red card (or agency certification) rating:						
1						
#4	incident/office title & agency:					
Evaluator	's home unit	address & phone:	i———i	<del></del>	·i	
Location of Incident or Simulation (agency & area)		Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
				to		
The tasks initialed & dated by me have been performed under my supervision and 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.  The individual was not able to complete certain tasks (comments below) or additional guidance is required.  Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.  The individual is severely deficient in the performance of tasks for the position and must complete all training (both mandatory & suggested) prior to further assignment as a trainee.  Recommendations:  Followed by the above have been performed under my supervision and in a satisfactory manner by the above named trainee.						
Date: Evaluator's initials: Evaluator's relevant red card (or agency certification) rating:						