A Publication of the National Wildfire Coordinating Group

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United States Department of the Interior

National Association of State Foresters



#### NATIONAL INTERAGENCY INCIDENT MANAGEMENT SYSTEM

#### TASK BOOK FOR THE POSITION OF

## SITUATION UNIT LEADER (SITL)

(WILDFIRE ASSIGNMENT REQUIRED)

PMS 311-24 NFES 2333 **August 1993** 

### 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.

ERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK FOR THE POSITION OF	FINAL EVALUATOR'S VERIFICATION tasks have been performed and are complete with signatures. I also verify that	as a trainee and should therefore be considered for certification in this position.	EVALUATOR'S SIGNATURE AND DATE	EVALUATOR'S PRINTED NAME, TITLE, DUTY STATION, AND PHONE NUMBER	AGENCY CERTIFICATION :	I certury that	CERTIFYING OFFICIAL'S SIGNATURE AND DATE	G OFFICIAL'S NAME, TITLE, DUTY STATION, AND PHONE NUMBER
VERIFICATION / CE	FINAL I verify that all tasks have been perf	has performed as a trainee and shou	EVALUAT	EVALUATOR'S PRINTED NAM		I certury that	CERTIFYING O	CERTIFYING OFFICIAL'S NAM

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

Order NFES # 2333

#### 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: SITUATION UNIT LEADER (SITL)

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 limitation (per National Mobilization Guide). The basic information and materials needed are:</li> <li>ICS Form 209.</li> <li>ICS Form 213, General Message.</li> <li>ICS Form 214, Unit Log.</li> <li>ICS Form 215, Operation Planning Worksheet.</li> <li>Felt tip pens.</li> <li>Pencils.</li> <li>Paper.</li> <li>Notebooks.</li> <li>Dot grids.</li> <li>Rulers.</li> <li>Acetate.</li> <li>Field planimeter.</li> <li>Available incident specific information or management guidelines, e.g., NWCG 410-1 for wildfire incident, HAZMAT Response Plan for hazardous material incidents.</li> </ol>	Ο		
2. <u>Properly use maps and compass.</u>	0		

\*Code:

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.)
 W = task must be performed on a wildfire incident

- /R = Rare event—the evaluation assignment may not provide opportunities to demonstrate performance. The evaluator may be able to determine skills/knowledge through interview or the home office may need to arrange for another assignment or a simulation.

### POSITION: SITUATION UNIT LEADER (SITL)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ol> <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> </ol>	0		
<ul> <li>4. 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>	Ι		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
MOBILIZATION			
5. <u>Obtain complete information from</u> <u>dispatch upon initial activation.</u>	Ι		
<ul> <li>Incident name.</li> <li>Incident order number.</li> <li>Request number.</li> <li>Reporting location.</li> <li>Reporting time.</li> <li>Transportation arrangements/travel routes.</li> <li>Contact procedures during travel (telephone/radio).</li> </ul>			
<ul> <li>6. <u>Gather information necessary to assess</u> <u>incident assignment and determine</u> <u>immediate needs and actions.</u></li> <li>Incident Commander's/Supervisor's name, location, contact.</li> <li>Current resource commitments.</li> <li>Current situation.</li> <li>Expected duration of assignment.</li> </ul>	Ι		
INCIDENT ACTIVITIES			
<ul> <li>7. <u>Arrive at incident.</u></li> <li>Check in at check-in location according to agency guidelines and within acceptable time limit.</li> <li>Locate assigned location.</li> <li>Arrive properly equipped.</li> </ul>	Ι		

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	TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
8.	<ul> <li><u>Obtain briefing from Planning Section</u> <u>Chief.</u></li> <li>Obtain copy of ICS Form 201, incident briefing.</li> <li>Understand established timeframes, schedule for planning section meeting and information expected for inclusion into the incident action plan.</li> <li>Locate unit's work area at Incident Command Post.</li> </ul>	Ι		
9.	<ul> <li>Organizes work area. Consider key items:</li> <li>Acquire table(s); seating; additional supplies not in kit.</li> <li>Acquire communications equipment: radio, telephones, data communication equipment and operator.</li> <li>Establish filing system: card holders or racks organized by operational period and section.</li> </ul>	Ι		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ol> <li>Organize and supervise unit.</li> <li>Identify need for subordinates.</li> <li>Order subordinates.</li> <li>Brief and keep subordinates informed.</li> <li>Establish unit timeframes and schedules.</li> <li>Make assignments.</li> <li>Spot check work.</li> <li>Evaluate performance.</li> <li>Review and approve time.</li> <li>Develop teamwork.</li> <li>Provide counseling and discipline when required.</li> <li>Insure that subordinates have appropriate PPE!</li> </ol>			
<ul> <li>11. <u>Interact and coordinate with appropriate</u> <u>Unit Leader and operations personnel.</u></li> <li>Receive and transmit needed information.</li> </ul>	Ι		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ol> <li>Coordinate with facilities unit and supply unit to obtain work facilities.</li> <li>Acquire adequate space and work stations for subordinate personnel.</li> <li>Provide for night operations.</li> <li>Provide protection from adverse weather.</li> <li>Plan for possible expanded operation.</li> <li>Provide adequate space for display.</li> <li>Arrange for and determine space for display areas at both Command Post and other appropriate areas which allow viewing by up to 20 people at one time.</li> </ol>	Ι		
<ul> <li>13. <u>Obtain Base maps.</u></li> <li>Obtain six quality maps of incident area during the initial operational period.</li> <li>Insure maps identify recognizable geographic features, are adaptable for photo copying, provide adequate detail and cover the area that can potentially be involved in the incident.</li> </ul>	Ι		
<ul> <li>14. <u>Gather additional operational information.</u></li> <li>Obtain accurate and current information about: <ul> <li>Incident Base facilities and layout.</li> <li>Equipment available.</li> <li>Transportation available.</li> <li>Support facilities available.</li> </ul> </li> </ul>	Ι		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>15. Establish operational procedures with field observers, technical specialists and operational personnel.</li> <li>Establish ordering procedures.</li> <li>Establish reporting schedules.</li> <li>Establish meeting schedules (times and locations).</li> <li>Establish briefing and debriefing procedures.</li> <li>Establish safety standards and procedures.</li> <li>Identify information to be gathered and reported.</li> </ul>	Ι		
<ul> <li>16. Ensure accurate and timely map and overlay production and updates as needed.</li> <li>Meet established timeframes.</li> <li>Adhere to agency or specific incident standards symbols (NWCG 410-1 for wildfire, HAZMAT response plan for hazardous incidents, etc.).</li> <li>Maintain Base maps in a neat and orderly manner.</li> <li>Protect working maps.</li> </ul>	Ι		
<ul> <li>17. Provide photographic services as requested by Planning Section Chief.</li> <li>Coordinate and/or establish priorities.</li> <li>Provide infrared interpretation, aerial photographs, slides and video as needed and required for incident.</li> <li>Assure timely processing and availability.</li> </ul>	Ι		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
18. Collect and compile information for Incident Action Plan, planning meetings, etc.).	Ι		
<ul> <li>Insure adequate lead time.</li> <li>Review and verify accuracy (as needed) of all items.</li> <li>Ensure all required inputs are provided to documentation unit for the Incident Action Plan within established timeframes.</li> <li>Maintain incident chronology on maps or narratives as appropriate with assistance from field observers and technical specialists as appropriate.</li> </ul>			
<ul> <li>19. <u>Attend planning meetings.</u></li> <li>Provide current and accurate information about the incident status.</li> <li>Provide predictions of future incident status.</li> </ul>	Ι		
<ul> <li>20. Insure ICS Form 209 is completed.</li> <li>Complete accurately in adherence to incident standards and in coordination with resource unit and cost unit.</li> <li>Obtain approval by Planning Section Chief.</li> <li>Submit to Agency Dispatch within established timeframes.</li> </ul>	Ι		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>21. Coordinate preparation of the traffic plan.</li> <li>Coordinate with ground support unit.</li> <li>Include in plans maps and written directions.</li> </ul>	I		
<ul> <li>22. <u>Provide documentation of situation unit activities.</u></li> <li>Complete ICS Form 214.</li> <li>Insure completion of ICS Form 213.</li> <li>Submit all documentation to Documentation Unit Leader within established timeframes.</li> </ul>			
<ul> <li>23. Interact with Planning Section Chief and other units on release priorities.</li> <li>Determine lengths of current and previous assignment(s) for all resources.</li> <li>Determine all resource's qualifications.</li> <li>Determine specific needs and desires of individuals and resources.</li> <li>Determine excess resources within 24 to 48 hours prior to the time that they will actually be excess.</li> </ul>	Ι		
<ul> <li>24. <u>Release excess unit personnel.</u></li> <li>Adhere to demobilization guidelines.</li> <li>Complete ICS Form 221.</li> <li>Complete performance evaluations as per agency guidelines.</li> </ul>	Ι		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>25. <u>Brief replacement if necessary.</u></li> <li>Conduct complete initial briefing.</li> <li>Remain with replacement for one complete operational period to facilitate transition.</li> </ul>	I		
<ul> <li>26. Provide all situation unit materials to documentation unit at the completion of the incident.</li> <li>Organize and index all material.</li> <li>Label and tab major headings.</li> <li>Protect all maps and overlays from smudging.</li> <li>Place all materials in protective containers or boxes.</li> <li>Deliver all materials to documentation unit.</li> </ul>	Ι		
<ul> <li>DEMOBILIZATION</li> <li>27. Demobilization and check-out.</li> <li>Receive demobilization instructions from work supervisor.</li> <li>Brief subordinates on procedures and responsibilities.</li> <li>Insure that incident and agency demobilization procedures are followed. If required, ICS Form 221 (Demobilization Check-Out) is completed and turned in to appropriate person.</li> </ul>	Ι		

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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  $(2 \ 1/2 \ \text{feet})$
- 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**

TRAINEE NAME

### TRAINEE POSITION

#1 Evaluator's incident/of	s name, fice 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		
trainee. I recommend The indiv The indiv Not all ta: The indiv	the following for further idual has successfully pe idual was not able to con sks were evaluated on th	r development of this trair erformed all tasks for the p nplete certain tasks (com is assignment and an addi nt in the performance of ta	vision and in a satisfactory nee: position and should be const nents below) or additional g tional assignment is needed tsks for the position and mu	idered for certification guidance is required. to complete the eva	on. luation.
Date: certification) rating:		itials:	Evaluator's relev	ant red card (or ager	ncy

#2	Evaluator's incident/of	or's name, /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:								
Date: certificati	Date: Evaluator's initials: ertification) rating:			Evaluator's relev	Evaluator's relevant red card (or agency			
ļ								

# **Evaluation Record** (Continuation Sheet)

TRAINEE NAME

## TRAINEE POSITION

#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			
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Date: certification) rating:	Evaluator's in	Evaluator's relev	Evaluator's relevant red card (or agency					

#4		Evaluator's name, ncident/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					
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Date:      Evaluator's initials:				Evaluator's relev	Evaluator's relevant red card (or agency				
certification) rating:									