A Publication of the
National Wildfire
Coordinating Group

NATIONAL INTERAGENCY
INCIDENT MANAGEMENT SYSTEM

Sponsored by
United States
Department of Agriculture

TASK BOOK FOR THE POSITION OF

United States
Department of the Interior

HELICOPTER CREWMEMBER (HECM)

National Association of
State Foresters

PMS 311-22
NFES 2330

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.

VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK
FOR THE POSITION OF

_____

FINAL EVALUATOR'S VERIFICATION

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 SIGNATURE AND DATE

_____

EVALUATOR'S PRINTED NAME, TITLE, DUTY STATION, AND PHONE NUMBER

AGENCY CERTIFICATION :

I certify that _____

has met all requirements for qualification in this position and that such qualification has been issued.

_____

CERTIFYING OFFICIAL'S SIGNATURE AND DATE

_____

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

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: HELICOPTER CREWMEMBER (HECM)

TASK	CODE*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
MOBILIZATION 1. <u>Determine type transportation, equipment and supplies that are required.</u> This includes: • Helicopter. • Chase truck. • Initial attack gear. • Extended attack gear. • Personal gear.	I		
INCIDENT ACTIVITIES 2. <u>Cargo operations - internal and external.</u> a. Brief pilot before the mission: • Mission requirements. • Emergency procedures. • Route of flight, hazards, communications (flight following, frequencies, equipment). b. Receive briefing from pilot: • Emergency procedures. • Cargo loading method. • Rigging method. • Weight and balance limitations (load calculation). • Special mission requirements. • Flight and mission hazards.	O		

*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: HELICOPTER CREWMEMBER (HECM)

TASK	CODE*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
3. Transportation of personnel.	O		

a. Brief passengers before takeoff.
 • Describe operation of shoulder straps and seatbelts.
 • Demonstrate crash position.
    • Forward facing passenger (with and without shoulder straps)
    • Aft facing passenger.
    • Side facing passenger.
 • Explain operation of emergency doors and hatches.
 • Insure proper PPE is worn and utilized.
 • Inspect PPE for serviceability.			

b. Prepare manifest for personnel/cargo. • Obtain allowable payload for load calculation form. • Write names and weights of personnel gear and cargo and put on manifest form. • Insure that allowable payload is not exceeded.	O		

*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.

QUALIFICATION RECORD
Continuation Sheet

POSITION: HELICOPTER CREWMEMBER (HECM)

TASK	CODE*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
4. Prepare cargo load. • Prepare cargo manifest and obtain load calculations. • Obtain allowable payload in-ground (HIGE) and out-of-ground effect (HOGE). • Tag and weigh loads. • Bundle or package loose loads and tools. • Package hazardous materials per handbook requirements. • Inspect nets, lead lines and swivels for serviceability. • Prepare load in sling not exceeding either allowable load or sling limitation weight. • Place load in external basket/pods and insure security.	O		

*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.

7

QUALIFICATION RECORD
Continuation Sheet

POSITION: HELICOPTER CREWMEMBER (HECM)

TASK	CODE*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
5. Follow proper procedures for loading/ unloading helicopter. • Follow accepted procedures for all movement around the helicopter. • Load cargo within weight and balance limitations. • Secure cargo in the aircraft. • Secure cargo from passengers and flight crew to insure crash protection value. • Secure or remove cargo and equipment that could be blown by rotor wash. • Secure doors, seat belts, bungees, cargo straps, etc. • Attach cargo to helicopter cargo hook and/or remote hook: 　• Using ground hookup procedures. 　• Using hover hookup procedures. 　• Using long-line remote hook procedures.	O		
6. Marshall helicopters by using approved and arm signals. • Wear appropriate PPE (goggles, hearing protection, high visibility vest). • Insure and maintain visual reference with pilot. • Check for obstacles and obstructions before signaling to take off or land to the pilot. • Provide for fire protection and initiate if needed.	O		

*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.

QUALIFICATION RECORD
Continuation Sheet

POSITION: HELICOPTER CREWMEMBER (HECM)

TASK	CODE*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
7. Construct/prepare landing areas. • Locate appropriate site. • Determine prevailing wind directions and clear approach and departure paths. • Level touchdown area appropriate to size class helicopter. • Install wind sock or wind indicator. • Install appropriate signs and markers. • Provide for dust abatement. • Obtain appropriate mission equipment (fire extinguishers, slings, lead lines, swivels, radios, etc.). • Provide for separation by helicopter size classes. • Establish separate areas for fueling, cargo work, personnel transport, or other mission specific areas.	O		
DEMOBILIZATION 8. Demobilize. • Receive demobilization instructions. • Ensure that incident and agency demobilization procedures are followed.	I		

*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.

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)	8.	Closed Timber Litter
2.	Timber (grass & understory)	9.	Hardwood Litter
3.	Tall grass (2 1/2 feet)	10.	Timber (litter understory)
4.	Chaparral (6 feet)	11.	Light Logging Slash
5.	Brush (2 feet)	12.	Medium Logging Slash
6.	Dormant brush-Hardwood Slash	13.	Heavy Logging Slash
7.	Southern Rough		

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 your certification relevant to the trainee position you supervised.

Evaluation Record

TRAINEE NAME	TRAINEE POSITION

#1	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:_____

_____

Date:_____ Evaluator's initials:_____ Evaluator's relevant red card (or agency certification) rating:_____

#2	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:_____

_____

Date:_____ Evaluator's initials:_____ Evaluator's relevant red card (or agency certification) rating:_____

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
			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:_____

#4	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:_____
_____
Date:_____ Evaluator's initials:_____ Evaluator's relevant red card (or agency certification) rating:_____