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

ORDERING MANAGER (ORDM)

PMS 311-43 NFES 2353 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 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		AGENCY CERTIFICATION :	I certify that	CERTIFYING OFFICIAL'S SIGNATURE AND DATE	G OFFICIAL'S NAME, TITLE, DUTY STATION, AND PHONE NUMBER
VERIFICATIO	F I verify that all tasks have bee	has performed as a trainee an	EVA	EVALUATOR'S PRINTED		I certify that	CERTIFY	CERTIFYING OFFICIAL'S

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

Order NFES # 2353

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: ORDERING MANAGER (ORDM)

		С	EVALUATION	EVALUATOR:
TASK		O D	RECORD #	Initial & date upon completion
		D E*		of task
GE	NERAL			
1.	 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: Ordering Manager's text. NWCG Fireline Handbook 410-1. Pencils, pads, large manila envelopes. General Message Forms ICS 213. Order forms and supply catalogs (agency specific). 	0		
M	DBILIZATION			
2.	 Obtain complete information from dispatch upon initial activation. Prior to dispatch to the incident, the following information is obtained. Incident order number. Request number. Incident name. Incident number. Reporting location (drop point). 	0		
	 Phone contacts. Radio frequencies. Transportation arrangements and routes. Reporting times. 			

*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: ORDERING MANAGER (ORDM)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
 <u>Gather information.</u> Gather all available information necessary to accurately assess incident; make appropriate decisions about immediate needs and actions including: Check-in location. Reporting time (ETA). Travel route. Order number. Assigned Incident Commander's name/location. Type of incident. Current resource commitments. Current situation status. Expected duration of incident. Terrain. Weather (current and expected). Agency administrator's name and method to reach (as appropriate). Agency administrator's briefing requirements(as appropriate). Phone/radio contact procedures during travel. 	0		
 INCIDENT ACTIVITIES Arrive at incident and check in. Arrive properly equipped at incident assigned location within acceptable time limits. Check in according to agency guidelines. 	Ι		

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POSITION: ORDERING MANAGER (ORDM)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
5. <u>Obtain briefing from Supply Unit Lead</u> Ensure briefing from Supply Unit Lead is complete. Briefing will include as a minimum:	der		
 Location of your work area, copies what resources have been ordered a received that are assigned to the incident. What personnel have been ordered your function, work schedule, polia and operating procedures, names o personnel you will be contacting. Projections for additional personne and equipment, approximate time a numbers. Responsible agency's ordering poliand procedures. Sources of supplies—where do I porders? To whom? Phone number(Agency specific ordering forms an catalogs. Any supplies currently on order. Type recording system being used. List of personnel authorized to ord Procurement lead times required for food, tools, fuel, etc. Type of communications available Location of work station. Location of materials to run your office. Shift change times for the supply used. 	and for cy f el and icies lace s)? d er. or		
Established security procedures.Permission to order recorder(s).			

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POSITION: ORDERING MANAGER (ORDM)

	TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
6.	 6. Establish ordering procedures. Based on direction from Supply Unit Leader, implement the incident resource ordering system within the first shift. Procedures will clearly establish: Who has ordering authority. Means of consolidating orders. Means of documenting the order and check for supplemental items required to complete the order. Place orders through proper channels. If possible, meet face-to-face with agency personnel you will be dealing with during these procedures. Determine status of the resource order. Close out and demobilization of the 			
7.	Close out and demonization of the incident resources. <u>Receive written request for supplies and resources from incident personnel directly or through the incident communication system.</u>	I		
	 Within time frames established by the Supply Unit Leader, will evaluate and consolidate document and check for supplemental items to complete the requested resources. Notify the Supply Unit Leader of orders placed by unauthorized personnel before placing order. 			
8. *Co	Place resource order through appropriate channels. Resource orders will be placed through established channels based upon time frames set by Supply Unit Leader. de: O = task can be completed in any situation (class	I		

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POSITION: ORDERING MANAGER (ORDM)

	TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
9.	Set up and maintain filing system. Within the first work shift, establish a filing system to track: resources needing to be ordered, pending resource orders, resources on the incident during each shift. The file system will be kept current as resource orders are placed or received.	Ο		
10.	<u>Reconcile existing resource orders.</u> Within the first shift, establish the status of existing resource orders. Brief the Supply Unit Leader and R&D Manager of status of resource orders at the end of the shift.	Ι		
11.	<u>Reconcile and confirm all new resource</u> <u>orders, delivery times, method of delivery</u> <u>and location.</u> Based on direction from Supply Unit Leader, reconcile and confirm resource orders at least once during the shift. Information is passed on to the requestor or as it becomes available via the general message forms or other established means. Problems in ordering are dealt with in a timely manner. Major problems are brought to the Supply Unit Leader with recommendations to correct the problem.	0		
12.	<u>Keep Receiving/Distribution (R/D)</u> <u>Manager informed of orders placed.</u> R/D Manager will be updated of resources being ordered during the shift. Briefings will be given with enough lead time to all the R/D Manager to accommodate the delivery workload within their shift.	Ι		

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POSITION: ORDERING MANAGER (ORDM)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
13. <u>Brief subordinate(s) and relief personnel.</u> Direct communication is critical. Information is to be given periodically and with every change from planned work. The chain of command must be followed. Overall incident information is important to subordinates.	Ι		
14. <u>Prepare and submit reports</u> . All reports will be completed daily on a scheduled basis, as required by the Supply Unit Leader. Reports will provide enough information to describe the condition of the ordering function, and any problems which arose during the shift.	Ι		
15. Evaluate Performance of subordinates as required by agency policy. Performance evaluations are done for all unit personnel prior to their release from the incident. Performance evaluations are discussed with the individual.	Ι		

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POSITION: ORDERING MANAGER (ORDM)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
 DEMOBILIZATION 16. Demobilization and check-out. Receive demobilization instructions from work supervisor. 	I		
 Brief subordinate staff on demobilization procedures and responsibilities. Ensure that incident and agency demobilization procedures are followed. If required, ICS Form 221 (Demobilization Check-Out) is completed and turned in to the appropriate person. 			

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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:						
or Sin	of Incident nulation 7 & 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 relev	ant red card (or ager	ncy		
	-							

#2	#2 Evaluator's name, incident/office title & agency:							
Evaluator	's home unit	address & phone:						
or Sin	of Incident nulation y & 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 relev	ant red card (or ager	ncy			

Evaluation Record (Continuation Sheet)

TRAINEE NAME

TRAINEE POSITION

#3 Evaluator's incident/off	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					
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Date: certification) rating:	Evaluator's relev	ant red card (or ager	псу					

#4	Evaluator's name, incident/office title & agency:							
Evaluator	's home unit	address & phone:						
or Sin	of Incident nulation y & 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				
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:								
Date: Evaluator's initials:			Evaluator's relev	ant red card (or ager	ncy			
certificatio	certification) rating:							