



POSITION TASK BOOK FOR THE POSITION OF

Communications Unit Leader All-Hazards (COML)

Version: January 2012

POSITION TASK BOOK ASSIGNED TO:
INDIVIDUAL'S NAME, AHIMT NAME, AND PHONE NUMBER
POSITION TASK BOOK INITIATED BY:
OFFICIAL'S NAME, TITLE, AND PHONE NUMBER
DATE THAT THE POSITION BOOK WAS INITIATED:
MONTH, DAY, YEAR

Indiana Department of Homeland Security
Joseph E. Wainscott, Jr., Executive Director
Indiana Government Center South
302 West Washington Street, Room E208
Indianapolis, IN 46204

EVALUATOR

DO NOT COMPLETE THIS UNLESS YOU ARE RECOMMENDING THE TRAINEE FOR

VERIFICATION/QUALIFICATION OF COMPLETED POSITION TASK BOOK FOR THE
POSITION OF COMMUNICATIONS UNIT LEADER

FINAL EVALUATOR'S VERIFICATION

I verify that all tasks have been performed and are documented with appropriate initials. I also verify that _____ has performed as a trainee and should therefore be considered for qualification in this position.

FINAL EVALUATOR'S SIGNATURE AND DATE

EVALUATOR'S PRINTED NAME, TITLE, AND PHONE NUMBER

AGENCY HEAD RECOMMENATION FOR QUALIFICATION

I certify that _____ has met all requirements for qualification in this position, and I recommend they be credentialed for the position.

OFFICIAL'S SIGNATURE AND DATE

OFFICIAL'S PRINTED NAME, TITLE, AGENCY, AND PHONE NUMBER

DISTRICT RESPONSE TASK FORCE COMMANDER RECOMMENDATION FOR QUALIFICATION

I certify that _____ has met all requirements for qualification in this position, and I recommend that they be credentialed for the position.

OFFICIAL'S SIGNATURE AND DATE

OFFICIAL'S PRINTED NAME, TITLE, AGENCY, AND PHONE NUMBER

INCIDENT MANAGEMENT SYSTEM POSITION TASK BOOK

Position Task Books (PTB) were developed for designated positions as described under the National Interagency Incident Management System (NIIMS) and have been incorporated into the National Incident Management System (NIMS). The position task book is used by the State of Indiana to qualify that the person to whom the task book belongs meets the standards recommended by the National Integration Center (NIC).

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 a Qualified Evaluator, will result in a recommendation that the trainee be qualified in that position. Evaluation and confirmation of the individual's performance of all tasks may involve more than one evaluator and can occur on incidents, events, full scale exercises, and in other work situations. Designated PTBs require position performance during which the majority of required tasks are demonstrated on a single incident. It is important performance be critically evaluated and accurately recorded by each evaluator. All tasks must be evaluated. All bullet statements within a task that require an action (contain an action verb) must be demonstrated before that task can be signed off.

A brief list of responsibilities also appears below.

RESPONSIBILITIES:

1. The **Agency Management** is responsible for:
 - Selecting trainees based on the needs of their organization or area Incident Management Teams.
 - Providing opportunities for evaluation and/or making the trainee available for evaluation.

2. The **Individual** is responsible for:
 - Reviewing and understanding instructions in the PTB.
 - Identifying desired objectives/goals.
 - Providing background information on an evaluator.
 - Satisfactorily demonstrating completion of all tasks for an assigned position within three years.
 - Assuring the evaluation record is complete.
 - Notifying the local agency head when the PTB is completed and obtaining their signature recommending qualification.

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 evaluation and recording demonstrated performance of tasks. Dating and initializing completion of the task shall document satisfactory performance. Unsatisfactory performance shall be documented in the Evaluation Record.
- Completing the Evaluation Record found at the end of each PTB.

4. The **Final Evaluator** is responsible for signing the verification statement inside the front cover of the PTB when all tasks have been initialed.

5. The **Agency Head** or designee is responsible for:

- Tracking progress of the trainee.
- 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.
- Documenting the assignment.
- Conducting progress reviews.
- Conducting a closeout interview with the trainee and evaluator and assuring that documentation is proper and complete.



Competency 1: Assume position responsibilities

Description: Successfully assume role of Communications Unit Leader and initiate position activities at the appropriate time according to the following behaviors.

Behavior 1: Ensure readiness for assignment.

TASK	CODE	EVALUATION RECORD #	EVALUATOR Initial and Date upon completion of task
<p>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. The <u>basic</u> information and materials needed <u>may include</u>, but is not limited to, any of the following:</p> <p>Reference Materials</p> <ul style="list-style-type: none"> • Appropriate ICS forms and logs • Current Tactical Interoperable Communications Plan (TICP) and Statewide Communications Interoperability Plan (SCIP), if available • Inventories or other lists of local and regional communications response equipment • Preplanned local system coverage maps • Contact, capability, and availability information for local and regional Communications Technicians and Specialists • Field Operations Guide (NIFOG) • COML Mobilization Guide (specific to locality) • Pads of paper, pencils, pens, and tape • Personal items (including medicine and cash), food and beverage to be self-sustained for 48 hours or more • Portable radio(s) as appropriate for the region • Radio Programming equipment (cloning cable or computer), adapters, and suitable tools • GPS • First-aid kit • 24-hour clock • Multi-purpose knife 	O		

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 I = Task must be performed on an incident or Full Scale Exercise
 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 simulation.

TASK	CODE	EVALUATION RECORD #	EVALUATOR Initial and Date upon completion of task
<p>2. Establish and maintain positive interpersonal and interagency working relationships.</p> <ul style="list-style-type: none"> • Through briefings, discuss EEO, civil rights, sexual discrimination, and other sensitive issues with assigned personnel. • Create a work environment that provides diversity and equal opportunity for all personnel assigned to the incident • Provide equal assignment opportunities based on individual skill level. • Monitor and evaluate progress based on expected work standards. • Address individual agency values and policies throughout the tenure of the incident. • Arbitrate differences in agency values and policies that affect the operation in a manner that fosters continuous positive working relationships. • Integrate cultural resource considerations into all management activities. • Coordinate with other Communications Unit Leaders prior to incidents to share information and assure communications interoperability. 	O		
<p>3. Provide for the safety and welfare of assigned personnel during the entire period of supervision.</p> <ul style="list-style-type: none"> • Recognize potentially hazardous situations. • Inform subordinates of hazards. • Provide safety and identifying equipment, such as vests identifying the communications function, flashlights, and glow sticks. • Ensure special precautions are taken when extraordinary hazards exist. • Ensure adequate rest, hydration, and nutrition is provided to all unit personnel. • Recognize any special medical needs of all unit personnel. 	I		

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TASK	CODE	EVALUATION RECORD #	EVALUATOR Initial and Date upon completion of task
MOBILIZATION			
4. Obtain complete information from the public safety communications center(s) serving the area and incident upon initial activation, including: <ul style="list-style-type: none"> • Incident name and, as appropriate, an order, request, or other unique number identifying the incident for tracking purposes • Reporting location • Reporting time • Transportation arrangements/travel routes • Contact procedures during travel (telephone/radio) 	I		
5. Gather information to assess the incident assignment. This is an ongoing task throughout all phases of the incident. Include assigned resources in a draft Incident Radio Communications Plan (ICS Form 205). Examples of important information include: <ul style="list-style-type: none"> • Frequencies and/or talk groups already assigned • Other mutual aid channels or equipment already in use • Gateway or other interoperability devices already in use • Other current incidents or events that may create conflicts, communications plans, or tax resources 	I		
6. Contact Local Communications Coordinator or Communications Duty Officer (CDO) at NIFC or any local or state resources as necessary to determine frequencies and equipment assigned to the incident, if appropriate for this incident.	I		
7. Arrive at incident and check in. Arrive properly equipped at the assigned incident location within acceptable time limits.	I		
8. Obtain briefing from supervisor. Examples of briefing items are: <ul style="list-style-type: none"> • Work space • Work schedule • Policies and operating procedures • Current resource commitments and expectations • Current situation • Expected duration or assignment • Special Needs This list is not all inclusive; COML is responsible for asking adequate questions.	I		

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TASK	CODE	EVALUATION RECORD #	EVALUATOR Initial and Date upon completion of task
9. Receive Incident Action Plan (IAP), if developed, or Incident Briefing Form (ICS Form 201). Determine support needs to meet the IAP.	I		
10. Determine requirements for communications to be established and place the initial order. Using information obtained from IAP, Section briefings, and agency briefings, immediately order (using proper procedures) supplies, materials, and equipment necessary to support projected incident size.	I		
11. Evaluate needs and order supplies, materials, and personnel to keep unit operation. <ul style="list-style-type: none"> • Order materials and supplies using procedures established by the section chief. • Maintain quantities of supplies and materials at a level to prevent shortage of any basic needed items. • Ensure adequate personnel to support the communications unit, technicians, radio operators, etc. • Coordinate with the participating agencies for any additional interoperability resources that may be needed. • Assess current tactical communications equipment needs such as power sources for extended operations 	I		
12. Organize and supervise unit. <ul style="list-style-type: none"> • Brief and keep subordinates informed and updated. • Establish unit time frames and schedules. • Assign and monitor work assignments. • Review and approve time. • Develop team work. • Provide counseling and discipline as needed. • Follow established procedures for reporting inappropriate actions involving contractors, military, or other personnel. • Brief relief personnel. 	I		
13. Participate in incident planning meetings as the technical expert for communications needs. <ul style="list-style-type: none"> • Determine the feasibility of providing the required communications support. • Provide operational and technical information on communications equipment available for the incident. • Provide operational and technical information on communications equipment and systems capabilities and restrictions. Coordinate with other Communications Unit Leaders under any Area Command established to share information and assure communications interoperability.	I		

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TASK	CODE	EVALUATION RECORD #	EVALUATOR Initial and Date upon completion of task
<p>14. Design communications systems to meet incident operational needs.</p> <ul style="list-style-type: none"> • Determine additional resource needs and order necessary equipment and personnel. • Prepare Incident Radio Communications Plan (ICS Form 205). • Request any additional communications vendor services; e.g. telephone, SATCOM, and microwave. Identify costs associated with equipment. • Coordinate, through the chain of command, the locations for equipment to be installed; e.g. repeaters, satellite telephones, telephone lines, etc. • Provide communications support for external and internal data operations. • Order frequencies following the proper procedures. • Create diagrams of current communication system(s). • Determine optimal locations for any future expansion of communications equipment using topographical maps to evaluate elevation and separation needs. 	I		
<p>15. Install communication equipment.</p> <ul style="list-style-type: none"> • Obtain equipment from supply unit. • Install and test all components of the communications equipment to ensure the incident’s systems are operational, for example: <ul style="list-style-type: none"> ▪ Command repeater ▪ Logistics repeater ▪ Links (radio and wire-based) ▪ Remotes ▪ Gateways ▪ Aircraft and other special needs • Develop installation priorities, while adhering to safety standards regarding communications needs of tactical personnel; i.e. operations before logistics. • Clone, program, and authorized radios as necessary 	I		

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TASK	CODE	EVALUATION RECORD #	EVALUATOR Initial and Date upon completion of task
16. Assign communications equipment. <ul style="list-style-type: none"> • Identify kinds and numbers of communications equipment to be distributed to specific units according to the communications plan. • Provide resources and unit leaders with appropriate equipment based on the communications plan. • Provide basic training as needed on equipment being fielded. • Maintain equipment inventory to provide accountability. 	I		
17. Establish Incident Communications Center (ICC). <ul style="list-style-type: none"> • Coordinate location of ICC with Facilities Unit Leader. • Locate ICC close to the incident command post and away from high traffic areas and noise. • Locate ICC away from radio frequency and electronic noise. • Verify Estimated Time of Arrival (ETA) of communications personnel and establish assignments based on incident requirements. Set schedules around operations requirements. • Obtain necessary supplies for ICC to function properly. 	I		
18. Manage operations of the ICC. <ul style="list-style-type: none"> • Document radio/telephone activities on appropriate forms. • Set up a filing system for ICC documentation. • Direct radio/telephone traffic to proper destinations. • Establish notification procedures for emergency messages. • Identify system problems, both technical and operations, and determine appropriate solutions. • Follow established routing procedures for messages. 	I		
19. Coordinate frequencies, activities, and resources with communications resource coordinators outside of the incident. <ul style="list-style-type: none"> • Contact communications coordinators and notify them of incident frequency, talk group, mutual aid, channel, dispatch center, or other shared resource assignments, as appropriate. • Identify communications equipment and personnel that are excess to incident needs and demobilize if appropriate. • Identify resources as to type/qualifications, quantity, and location. • Provide a copy of the ICS Form 205 to other agencies or to the COML at any nearby incidents as necessary to avoid interference or other conflicts. 	I		

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TASK	CODE	EVALUATION RECORD #	EVALUATOR Initial and Date upon completion of task
20. Notify appropriate local, county, regional, State and/or Federal agencies on adjacent incident(s) of system design and frequency allocations.	I		
21. Initiate and maintain accurate records of all communications equipment. <ul style="list-style-type: none"> • Initiate and maintain accountability system for issuing hand-held radio resources. • Document geographic locations of equipment and transfer this information to local maps (latitude/longitude, legal). • Keep records for local and national resources to ensure return to proper locations. 	I		
22. Perform operational tests of communications systems throughout the duration of the incident. <ul style="list-style-type: none"> • Identify and take necessary action to accomplish minor field repair or place orders for replacement of equipment. • Monitor all gateways in use. • Plan for batter replacement. • Act decisively to minimize interruptions in system operation. 	I		
23. Interact and coordinate with appropriate unit leaders and operations personnel. <ul style="list-style-type: none"> • Coordinate with operations regarding system coverage and needs. • Coordinate with first responders and public safety support organizations regarding needed support (e.g., medical unit for medical evacuation plan). • Coordinate with special units (air operations, EOD, SWAT, etc) for special frequency needs. • Participate in planning meetings and briefings. Know what other resources may be coming to the incident, such as those from Urban Search and Rescue (USAR), National Interagency Fire Center (NIFC), FEMA, Coast Guard, etc.	I		
24. Identify for release any excess unit resources. Coordinate with unit managers and provide a list of excess personnel and facilities. List will include: <ul style="list-style-type: none"> • Who or what is excess • Time and date of excess The list will be reviewed daily for accuracy. Follow the established demobilization process, including notification to communications resource coordinators.	I		

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TASK	CODE	EVALUATION RECORD #	EVALUATOR Initial and Date upon completion of task
25. Maintain ICS Unit Log. Unit Log will be kept current, legible, and will document all major activities, which may include: <ul style="list-style-type: none"> • Equipment locations • Medical evacuations • Personnel changes 	I		
26. Evaluate performance of subordinates as required by agency policy and/or permitted by agreement. <ul style="list-style-type: none"> • Discuss performance evaluations with individual(s) • Maintain accuracy and fairness • List training if needed or desired 	I		
DEMOBILIZATION			
27. Demobilization and check out. <ul style="list-style-type: none"> • Submit all required information to the Documentation Unit Leader. • Receive demobilization instructions from work supervisor. • Brief subordinate staff on demobilization procedures and responsibilities. • Ensure that incident and agency demobilization procedures are followed. • Complete required ICS form(s) and turn in to the appropriate person. • Ensure personnel in the unit are demobilized correctly. • Document lost equipment on agency specific forms. 	I		

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INSTRUCTIONS FOR COMPLETING THE EVALUATION RECORD

There are four separate blocks allowing evaluations to be made. These evaluations may be made on incidents (may include preplanned events and full scale exercises), simulations 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.

COMPLETE THESE ITEMS AT THE START OF THE EVALUATION PERIOD:

Evaluator's name, incident/office title, and agency: List the name of the Evaluator, his/her incident position or office title, and agency.

Evaluator's home agency, address and phone: Self explanatory

#: The number next to the Evaluator's name in the upper left corner of the evaluation record identifies a particular experience or group of experiences. This number should be placed in the column labeled "Evaluation Record #" on the Qualification Record for each task performed satisfactorily. This number will enable reviewers of the complete Qualification Record to ascertain the qualifications of the different evaluators prior to making the appropriate signoff on the Qualification Record.

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

Incident Kind: Enter kind of incident, e.g., hurricane, search and rescue, flood, preplanned event, full scale exercise, etc.

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

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

Duration: Enter inclusive dates during with the Trainee was evaluated. This block may indicate a span of time covering several small and similar incidents 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.

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 qualification: List your qualification 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				
Name & Location of Incident or Situation (Agency & Area)	Incident Kind (e.g. Flood, Tornado)	Number & Type of Resources Pertinent to the Trainee's Position	Duration (inclusive dates in trainee status)	Management Level of Complexity Level
Recommendations: 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. <ul style="list-style-type: none"> • The individual has successfully performed all tasks for the position and should be considered for qualification. • 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 needs further training (both required and knowledge and skills needed) prior to additional assignment(s) as a Trainee. Recommendations: _____ _____ Date: _____ Evaluator's Initials: _____ Evaluator's relevant agency qualifications or rating: _____				

#2	Evaluator's Name	Incident/Office Title	Agency	
Evaluator's Home Unit Address & Phone				
Name & Location of Incident or Situation (Agency & Area)	Incident Kind (e.g. Flood, Tornado)	Number & Type of Resources Pertinent to the Trainee's Position	Duration (inclusive dates in trainee status)	Management Level of Complexity Level
Recommendations: 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. <ul style="list-style-type: none"> • The individual has successfully performed all tasks for the position and should be considered for qualification. • 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 needs further training (both required and knowledge and skills needed) prior to additional assignment(s) as a Trainee. Recommendations: _____ _____ Date: _____ Evaluator's Initials: _____ Evaluator's relevant agency qualifications or rating: _____				

Evaluation Record
(Continuation Sheet)

 TRAINEE NAME _____
 TRAINEE POSITION

#3	Evaluator's Name	Incident/Office Title	Agency	
Evaluator's Home Unit Address & Phone				
Name & Location of Incident or Situation (Agency & Area)	Incident Kind (e.g. Flood, Tornado)	Number & Type of Resources Pertinent to the Trainee's Position	Duration (inclusive dates in trainee status)	Management Level of Complexity Level
Recommendations: 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. <ul style="list-style-type: none"> • The individual has successfully performed all tasks for the position and should be considered for qualification. • 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 needs further training (both required and knowledge and skills needed) prior to additional assignment(s) as a Trainee. Recommendations: _____ _____ Date: _____ Evaluator's Initials: _____ Evaluator's relevant agency qualifications or rating: _____				

#4	Evaluator's Name	Incident/Office Title	Agency	
Evaluator's Home Unit Address & Phone				
Name & Location of Incident or Situation (Agency & Area)	Incident Kind (e.g. Flood, Tornado)	Number & Type of Resources Pertinent to the Trainee's Position	Duration (inclusive dates in trainee status)	Management Level of Complexity Level
Recommendations: 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. <ul style="list-style-type: none"> • The individual has successfully performed all tasks for the position and should be considered for qualification. • 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 needs further training (both required and knowledge and skills needed) prior to additional assignment(s) as a Trainee. Recommendations: _____ _____ Date: _____ Evaluator's Initials: _____ Evaluator's relevant agency qualifications or rating: _____				

