M E T R O P O L I T A N E M E R G E N C Y S E R V I C E S B O A R D

RADIO TECHNICAL OPERATIONS COMMITTEE
AGENDA

Board Room, Metro Counties Government Center
March 22, 2017
1:00 – 3:00 p.m.

MEMBERS:

Scott Haas, Chair
Scott County

Ron Jansen, Vice Chair
Dakota County

Jake Thompson
Anoka County

Tim Walsh
Carver County

Rod Olson
City of Minneapolis

Jon Eckel
Chisago County

John Gundersen
Hennepin County

Bob Shogren
Isanti County

Jeff Bjorklund
Metropolitan Airports Commission

Chad LeVasseur
Metropolitan Council

Scott Gerber
MN Fire Chiefs Association

Dave Pikal
Ramsey County

Chuck Steier
U of M Police, at large member

Nate Timm
Washington County

Open
Metro Region EMS

Open
MN Chiefs of Police Association

1. Call to Order

2. Approval of February, 2017 Minutes

3. Agenda Items
   a. City of Minneapolis Participation Plan Amendment – Olson
   b. COML Packet – Dan Klawitter (HCMC EMS)
   c. COML Packet – Jacob Cree (HCMC EMS)
   d. COML Packet- Robert Beem (Hennepin County)
   e. Metro Standard 3.17.5 - Incident Tactical Dispatcher – Kummer
   f. Metro Standard 3.17.6 - Radio Operator – Kummer
   g. Metro Standard 3.17.7 – Incident Communications Center Manager - Kummer

4. Moves, Additions & Changes to the System
   a. Update on Removal of Voting from Interoperability System – Jansen

5. Committee Reports
   a. Metro Mobility System Usage Update—Chad LeVasseur/Dana Rude
   b. System Manager's Group/Metro Owner's Group Update – Jansen
   c. Reports from SECB Committees
      i. Steering - Tretter
      ii. OTC – Gundersen / Timm
      iii. Interoperable Data Committee – Olson / Thompson
      iv. IOC –Thompson / Kummer
      v. IPAWS – Haas / Williams
      vi. Finance / Grants Workgroup- Tretter
   d. 2017 Public Safety Communications Conference – Tretter / Timm / Thompson
      i. Conference Dates: May 1-3, 2017

6. Other Business
   a. Regional Talkgroup Permissions Requests
      i. Federal Reserve Bank – James Schnoor
   b. Next Meeting April 26th

7. Adjourn

Scott Haas, Chair

Metropolitan Emergency Services Board
Radio Technical Operations Committee
Meeting Notes
February 22, 2017

Members Present:
Rod Olson, John Gundersen, Robert Shogren, Dave Pikal, Jon Eckel, Chuck Steier, Jake Thompson, Scott Haas, Nate Timm, Tim Walsh, Chad LeVasseur, Chris Kummer, Ron Jansen, Bob Shogren, Scott Gerber.

Guests Present:
Steve Oruadnik; MN DOC, Steve Stahl; US Customs, Peter Sauter; Carver County, Barry Altman; Hennepin County Emergency Management, Dan Anderson; HCEM, Eric Waage; HCEM, Christine McPherson; Minneapolis ECC, Wendy Lynch; Hennepin County EMS, Marvin Turner; MTPD, Scott Wosje; Northern Business Systems, Rick Juth; ECN.

Call to Order:
Scott Haas called the meeting to order at 1:01 P.M.

Rick Juth asked that an item be added to the agenda. A volunteer from the region is needed to be part of a planning committee for a US Department of Homeland Security Communications Department convergence tabletop exercise. It was agreed this topic will be added to the agenda as 3d.

M/S/C Motion made by Scott Gerber to approve the February 22nd, 2017 agenda with the above modification. John Eckel seconded. Motion carried.

John Gundersen said the comments from Dan Anderson; HCEM at the December 2016 meeting were not included in the minutes and asked that Anderson be allowed to explain what those comments were. Anderson told group that the metro standard for the National Weather Service ARMER be looked at in the future.

M/S/C Motion made by Ron Jansen to approve the January, 2017 minutes as amended. Gundersen seconded. Motion carried.

Agenda Items:

State National Weather Service Standard Workgroup Membership
Gundersen told the group that the red lined document for the standard was presented at the last meeting. The chairman was to send a letter to the Chair of the OTC. Both were sent out. Todd Krause from the National Weather Service was there. One of the objections was the burden was put on the regions to purchase the equipment and provide the training. The weather service has no mandate to be on the ARMER system; and have no budget for it. To date the matter has been before committee eighteen times. It is late enough ion the season now that it would not be activated until the next season.

It was asked that each region appoints two representatives to serve on the group.

Eric Waage; Incident Commander for HCEM spoke to the TOC. It is an evolving situation, and through studying other states it is realized that many have trunk radio system links with EM and weather offices.

DRAFT

There are two key functions. Public warning function which the vital PSAP link and then there is the situational link.

Ron Jansen made the recommendation to appoint one technical member each from the Radio TOC and the 9-1-1 TOC. Eric Waage said he felt someone from Homeland Security should be represented. Gundersen said perhaps Jim Stromberg could recommend someone to sit on the committee that has studied other states.

Juth said that the draft state standard does provide for the ability to program regional weather service talkgroups in subscriber radios which are prohibited at this point. We need to recognize the limitations of the national weather service would have managing multiple talkgroups.

Jansen said that consistency was a driving force behind changing the standard.

M/S/C Motion made by Ron Jansen to appoint two people, one from the Radio and one from the 9-1-1 TOCs to sit on the weather standards workgroup. Jon Eckel seconded. The motion was amended to designate Scott Haas as one of the members.

COML Packet – Barry Altman (HCEM)
Troy Tretter presented to the TOC that Barry Altman has met the requirements for COMT and he was in attendance today.

M/S/C Motion made by Scott Gerber to approve Barry Altman's COMT Packet. John Gundersen seconded. Motion carried.

Barry Altman thanked the committee for the recommendation.

COMT Packet – Michael Ostlund (HCEM)
Troy Tretter presented to the TOC that Michael Ostlund has met the requirements for COMT.

M/S/C Motion made by Robert Shogren to approve Michael Ostlund's COMT Packet. Gundersen seconded. Motion carried.

US Department of Homeland Security and Office of Electronic Communications exercise
Rick Juth said that ECN was approved a technical assistance opportunity by the US Department of Homeland Security and Office of Electronic Communications. It is proposed to assemble an eighteen to twenty member planning team to plan a convergence tabletop exercise that will take place on June 27, 2017 near St. Cloud or Fort Ripley. The planning committee meeting will be March 24 at the Stearns County Service Center 8:30- 11:00. One member from each region in various disciplines is proposed.

Ron Jansen recommended a person is solicited from the CRTF Steering Workgroup.

Chair Haas asked if there was any objection to the recommendation. No objections were raised, and Chair Haas said there was no need for a vote.

Move, Additions & Changes to the System

Update on Removal of Voting from Interoperability System
Rick Jansen said HCGC and King Stack are still on the list.

DRAFT

Gundersen said they have been doing some work on the SATCOW, 7.19.0 upgrade is done and is ready for deployment.

Committee Reports

Metro Mobility System Usage Update
Chad LeVasseur said the repeater disable was started on the East side of the Metro. Nothing back yet from Trapeze yet for their CAD interface.

System Manager's Group/Metro Owner's Group Update – no meeting

Reports from SECB Committees

Steering
More discussion on Federal Participation. 'LIMITED' participation will most likely go away, since someone is either an interoperable participant: no talkgroups, no infrastructure. Otherwise persons are a full participant. Limited was connected to ARMER via a patch. There was discussion on if federal participants were to be charged, a study would need to be done on how charging fees would be done.

OTC
Gundersen said the bulk of the meeting was spent on the weather discussion but that participation plan amendments were discussed for two outstate counties and the U of M. System administrator training was approved. Forest Service participation plan was discussed. Nine standards were approved with minor changes. Also approved was a law enforcement voice communications best practices guide.

Jansen said that the LTAC-E was reviewed by the SMG. Testing was done and submitted by Timm, Olson and Hennepin. There is a new encryption key.

Interoperable Data Committee
Jake Thompson- updates with FirstNet

IOC – No meeting

IPAWS – No meeting

Finance/Grants Workgroup
Tretter said the grants work recommendations for the SECB and SHSP grants were approved. Funding for two PSAP firewalls were approved. Address data point data collection for Washington and Isanti counties. Funding for portable microwave dish in Dakota County. $25,000 grant for Motorola training was approved, Funds for training development, CAD and Interoperability will go before the SECB next week.

Timm asked about the sanctuary cities. Would the funds be spent? Director Mines is going to meet with HSEM and will provide feedback.

2017 Interoperability Conference May 1-3 (MN Public Safety Emergency Communications Conference)
Tretter said the registration will be open soon and the MESB can send up to twenty-five persons can be sent from the region. Grant pays registration and two nights hotel.

DRAFT

Other Business
Regional Talkgroup Permissions Updates

Customs and Border Patrol (Port of Minneapolis)
Steve Stahl from Customs and Border Patrol requested use of ME TACS 1-10.

M/S/C Motion made by Timm to approve the use of ME TAC 1-10 by Customs and Border Patrol. Jansen seconded. Motion carried.

Gold Cross/Mayo Clinic Medical Transport
Tretter stated they are requesting the use of ME TAC 1-10 for medical transports in and out of the metro.

M/S/C Motion made by Gundersen to approve the use to update agreement for ME TAC 1-8 and add ME TAC 9 & 10. Jansen seconded. Motion carried.

Adjourn

DRAFT

Minneapolis
City of Lakes

March 13, 2017

RE: Participation change approval request to add a new console site.

Troy Tretter
Metropolitan Emergency Services Board
2099 University Ave W
St. Paul, MN 55104

Troy,

The City of Minneapolis would like the approval of the MESB to update our participation on the ARMER radio system. In 2015 we updated our dispatch consoles to 17 Motorola MCC7500 units; the previous Gold Elite consoles didn't have room for needed talk groups due to console summing. With the addition of newly added statewide and regional talk groups our consoles are again at summing levels.

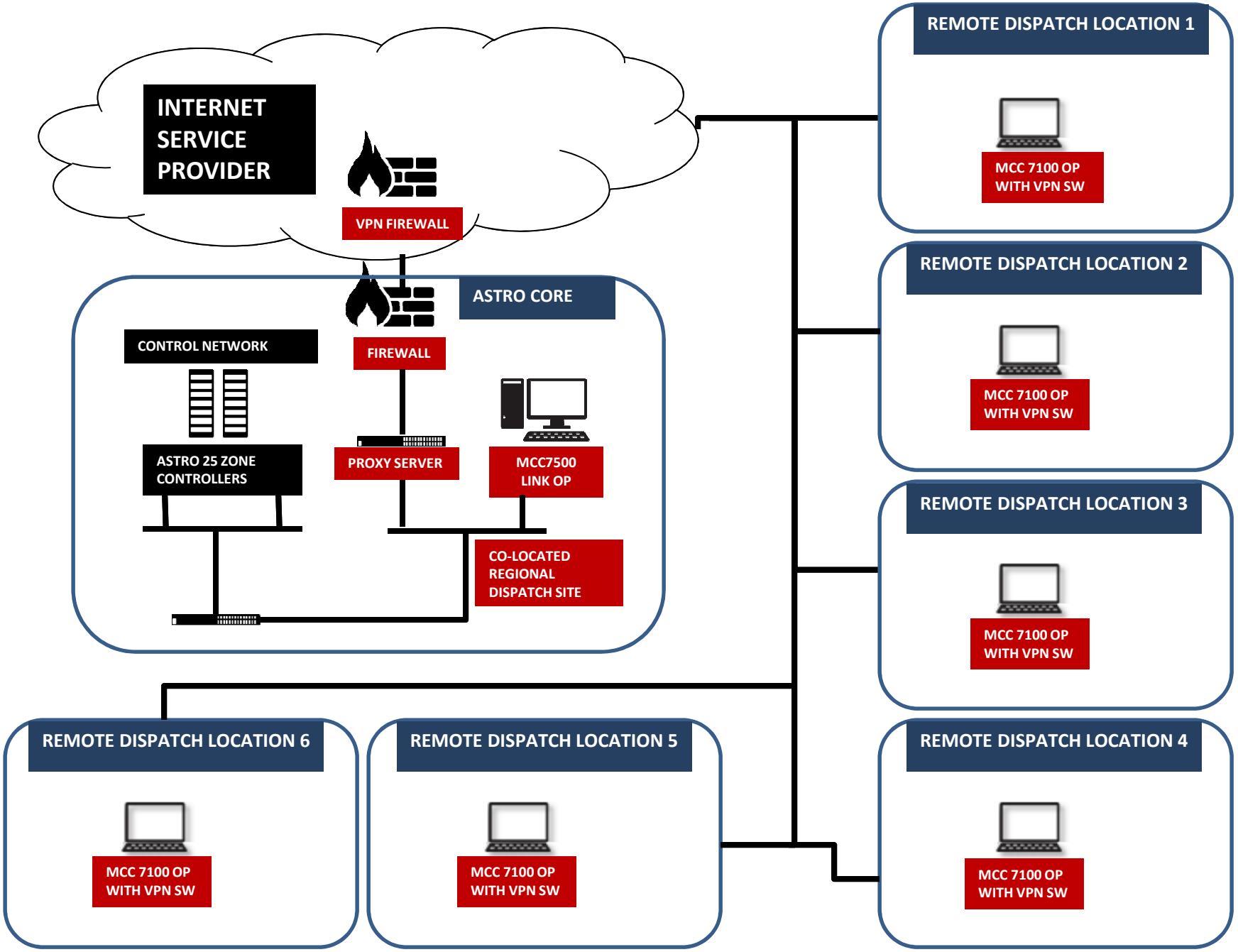
With the number of large upcoming events being held throughout various areas in the City and with additional talk group needs still being worked out, we determined our best course of action is to create an additional console site to support dispatching at the event sites without degrading audio quality of service (QoS) at the Minneapolis Emergency Communications Center (MECC).

We are asking to create a new console site adding one MCC7500, one LAN switch, one proxy server and two firewalls to be housed at the Waters Edge Zone 1 MSO, and six MCC7100 console laptops to be used as remote access dispatch consoles. The MCC7100 consoles will be connecting via wireless cellular broadband carrier ISP "cloud" through dedicated VPN connections only. Creating this console site configuration at the MSO allows the maximum number of talk groups to be shared across all the consoles on the site. Because of the much larger capacity than any one agency console site provides, this new site could support possible future sharing with the rest of the metro region for remote MCC7100 console capabilities, and/or to alleviate other agency console summing. If this were to expand to the region in the future, proxy servers can be added to support up to 49 total MCC7100's.

This has been discussed with MN DOT and Motorola, the design has their support.

Best Regards…..

Rod Olson
Manager of Radio Communications Electronics
ARMER Public Safety Radio System Administrator for
City of Minneapolis, MN
661 5th Ave North,
Minneapolis, MN 55401


INTERNET SERVICE PROVIDER
VPN FIREWALL
ASTRO CORE
CONTROL NETWORK
FIREWALL
ASTRO 25 ZONE CONTROLLERS
PROXY SERVER
MCC7500 LINK OP
CO-LOCATED REGIONAL DISPATCH SITE
REMOTE DISPATCH LOCATION 1
MCC 7100 OP WITH VPN SW
REMOTE DISPATCH LOCATION 2
MCC 7100 OP WITH VPN SW
REMOTE DISPATCH LOCATION 3
MCC 7100 OP WITH VPN SW
REMOTE DISPATCH LOCATION 4
MCC 7100 OP WITH VPN SW
REMOTE DISPATCH LOCATION 5
MCC 7100 OP WITH VPN SW
REMOTE DISPATCH LOCATION 6
MCC 7100 OP WITH VPN SW

Dan Klawitter

Minnesota COML Team
Metro Region Communications Unit Leader
Type III COML CERTIFICATION CHECK OFF

The following items checked are included in this packet

☒ All Prerequisite Training Completed

- ☒ ICS 700 (Printout attached)
- ☒ ICS 800 (Printout attached)
- ☒ ICS 100 (a or b) (Printout attached)
- ☒ ICS 200 (Printout attached)
- ☒ ICS 300 (Printout attached)

If you are part of the Minnesota training Website, A print of the HSEM Certification Record Completed courses main page with the above courses listed will be sufficient.

☒ Copy of Certificate from COML training

☒ Agency Certification (attached)

☒ Completed Task Book (with evaluator reviews)

☒ Copy of an Incident Action Plan, Incident Communications Plan, or After Action Plan (only one needed)

☒ Final Evaluator Certification (attached)

☒ Regional Interoperability Coordinator review

_____ (Signature)

Troy Tretter (Printed Name)

☐ Regional Radio Board – Technical Operations Committee Review

_____ (Chair of Radio-TOC Signature)

Scott Haas (Printed Name)

☐ Statewide Interoperability Program Manager Review

_____ (Statewide Interoperability Program Manager Signature)

Jim Stromberg (Printed Name)

Attachment B

MESB

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

DANIEL B KLAWITTER

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00700
National Incident Management System
(NIMS), An Introduction

Issued this 24th Day of February, 2006

AUTHORIZED IACET PROVIDER

Tony Russell
Superintendent
Emergency Management Institute

0.3 IACET CEU

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

DANIEL B KLAWITTER

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00800.b
National Response Framework, An Introduction

Issued this 22nd Day of June, 2016

Tony Russell
Superintendent
Emergency Management Institute

0.3 IACET CEU

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

DANIEL B KLAWITTER

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00100
Introduction to the Incident Command System,
ICS-100

Issued this 31st Day of March, 2006

Tony Russell
Superintendent
Emergency Management Institute

0.3 IACET CEU

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

DANIEL B KLAWITTER

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00200
ICS for Single Resources and
Initial Action Incidents, ICS-200

Issued this 28th Day of April, 2006

AUTHORIZED IACET PROVIDER

Tony Russell
Superintendent
Emergency Management Institute

0.3 IACET CEU

FEMA

National Fire Academy

Daniel Bruce Klawitter

is awarded this certificate in recognition of completion
of the NFA State/Local Partner-Sponsored Training

ICS 300, Intermediate ICS for Expanding
Incidents for Operational First Responders
St Paul, Minnesota

March 2 - 4, 2016

Superintendent
National Fire Academy

This course meets the NIMS requirements for ICS-300.

Emergency Management Institute

FEMA

This is to certify that

Daniel Bruce Klawitter

successfully completed

NIMS ICS All-Hazards Communications Unit Leader
Saint Paul, Minnesota

2.80 IACET CEU

August 8 - 10, 2016

AUTHORIZED IACET PROVIDER

Superintendent
Emergency Management Institute

MINNESOTA DEPARTMENT OF PUBLIC SAFETY

Alcohol and Gambling Enforcement

Bureau of Criminal Apprehension

Driver and Vehicle Services

Emergency Communication Networks

Homeland Security and Emergency Management

Minnesota State Patrol

Office of Communications

Office of Justice Programs

Office of Traffic Safety

State Fire Marshal

Emergency Communication Networks

445 Minnesota Street • Suite 137 • Saint Paul, Minnesota 55101-5137
Phone: 651.201.7547 • Fax: 651.296.2665 • TTY: 651.282.6555
www.ecn.state.mn.us

MESB

Minnesota Communications Unit Exercise (COMMEX) Results Letter

November 7, 2016

Dear Dan,

Congratulations! You have completed all the required tasks during the COMMEX. Enclosed is your Position Task Book (PTB), along with your exercise support documents.

You will need to have your agency complete the agency certification portion of the PTB. After that, you will need to check who needs a copy of the PTB and make enough copies to send to the following locations that may apply:

- Your personnel file
- Your agency training or credentialing committee
- Your primary Emergency Communications Board (ECB) or Emergency Services Board (ESB)
- Any other credentialing entity (e.g., operational area, Incident Management Team (IMT) etc.)

Put the original PTB in your kit and continue to document any activities during future exercises, planned events, and incidents. After each assignment, re-copy the updated PTB and follow the same process to update your current experience.

Remember to document all activities in your PTB and do not leave the incident or event without getting an evaluation. Once your PTB is full, you will need to start a new PTB. This process will document all your experience and will help with re-credentialing requirements and keeping your skills current.

If you have any questions, I can be reached at 651-201-7548. Thank you for your participation; we look forward to seeing you at future communication-focused activities!

Respectfully,

Cathy Anderson

Cathy Anderson
Standards and Training Coordinator

Homeland Security

ALL-HAZARDS COMMUNICATIONS UNIT LEADER (COML)

Position Task Book

Task Book Assigned To:

Trainee's Name: Daniel Klewitte

Home Unit/Agency: Hennepin EMS

Home Unit Phone Number: 612-873-7522

Task Book Initiated By:

Official's Name: Jason Matthias

Home Unit Title: Lead ECS

Home Unit/Agency: St Louis County MN 911

Home Unit Phone Number: 218 340 2940

Home Unit Address: 2030 N Arlington Ave Duluth MN 55804

Date Initiated: 10/12/16

Version 2.1
November 2014

VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK FOR THE POSITION OF ALL- HAZARDS COMMUNICATIONS UNIT LEADER (COML)

FINAL EVALUATOR'S VERIFICATION

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

Final Evaluators Signature _____ Date 10/12/16

Printed Name Jason Matthias Agency St Louis County 911

Phone Number (218) 340-2940 Email matthias.j@stlouiscountymn.gov

AGENCY CERTIFICATION

I certify that DANIEL KLAWITTER
has met all requirements for qualification in this position and that such qualification has been issued.

Certifying Official's Signature _____ Date 11-10-2016

Printed Name WENDY L LYNCH Agency HENNEPIN EMS

Title EMS CHIEF Phone Number 6128733835

HISTORICAL RECOGNITION

Historical recognition is a process that provides a means by which incident management personnel who have either:

- Documentation of previous ICS training, education, and experience in an ICS position(s); or
- Documentation of previous extensive on-the-job incident response experience,

may receive credit for that previous experience, training, or qualification(s) and be considered as meeting the minimum requirements of this guide in the categories of:

- Education;
- Training; and
- Experience,

for an ICS position(s) until they have successfully completed the actual minimum requirements for that position. Historical Recognition does not apply to the categories of Physical/Medical Fitness, Currency, or certification. The minimum requirements within those categories must be met regardless of any historical recognition process.

HISTORICAL RECOGNITION PROCESS

If an Authority Having Jurisdiction (AHJ) does not form a Qualifications Committee to assist with the management of the overall qualifications process, AHJ's should give strong consideration to at least forming a committee for the purposes of reviewing and processing applications for Historical Recognition. Because of the time commitment involved and the potential for perceptions of favoritism and unequal treatment during the process, other ICS qualifications processes currently used by Federal and State agencies that included a historical recognition provision used review committees to accomplish that process.

The AHJ should develop a process to provide for the following:

- Developing a method to provide for historical recognition when there is sufficient documentation available to substantiate the experience;
- Developing a standardized method for any individual to submit documentation of the experience and training for review by the AHJ or the appropriate review committee established by the AHJ;
- Developing a method to determine if the previous experience or training is appropriate for the position, keeping in mind the required criteria for the position and the competencies necessary for safe and successful performance;
- Providing for Historical Recognition only when the individual has most recently performed the position within the last five years;
- Requiring the individual meet all minimum requirements in this guide for a position if the individual seeks an ICS position other than the position they were historically recognized for;
- Encouraging all individuals who are historically recognized into a position to complete the minimum requirements for the positions within five years of being historically recognized.

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 authority having jurisdiction to certify that the person to whom the task book belongs meets the standards recommended by the National (NIMS) 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 an evaluator, will result in a recommendation 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. 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 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 to 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 certification.
   - 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. Dating and initialing completion of the task shall document satisfactory performance. Unsatisfactory performance shall be documented in the Record of Evaluation.
- Completing the Record of Evaluation 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:
   - Issuing the PTB to document task performance.
   - Explaining to the trainee the purpose and processes of the PTB, as well as the trainee's responsibilities.
   - 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.

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Competency 1: General

Task	Code	Evaluator # and Initials	Date
1. Obtain and assemble information and materials needed for a response kit prior to receiving an assignment, including critical items needed for the assignment and items needed for functioning during the first 48 hours. The following items are suggested as basic information and materials kept in a go bag: **Reference Materials** • 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 Operation Guide (NIFOG). • COML Mobilization Guide (specific to locality). **Supplies** • Pads of paper, pencils, pens, and tape. • Portable radio(s) as appropriate for the region. • Personal items (including medicine and cash), food and beverage to be self-sustained for 48 hours or more. • Radio programming equipment (cloning cable or computer), adapters, and suitable tools. • GPS. • First-aid kit. • 24-hour clock. • Multi-purpose knife.	O	#1	10/18/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
2. Establish and maintain positive interpersonal and interagency working relationships. • 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.	O	#1	10/12/16
3. Provide for the safety and welfare of assigned personnel during the entire period of supervision. • Recognize potentially hazardous situations. • Inform subordinates of hazards. • Provide safety and identifying equipment, such as vests identifying the communication's function, flashlights, and glow sticks. • Ensure that 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	#1	10/12/16

Competency 2: Mobilization

Task	Code	Evaluator # and Initials	Date
4. Obtain complete information from the public safety communications center(s) serving the area and incident upon initial activation, including: • 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	#1	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
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: • Frequencies and/or talkgroups 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	#1	10/12/16
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	#1	10/12/16
7. Arrive at incident and check in. Arrive properly equipped at the assigned incident location within acceptable time limits.	I	#1	10/12/16
8. Obtain briefing from supervisor. Examples of briefing items are: • Work space. • Work schedule. • Policies and operating procedures. • Current resource commitments and expectations. • Current situation. • Expected duration of assignment. • Special needs. This list is not all inclusive; COML is responsible for asking adequate questions.	I	#1	10/12/16
9. Receive Incident Action Plan (IAP) or Incident Briefing Form (ICS Form 201), if developed. Determine support needs to meet the IAP.	I	#1	10/12/16
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	#1	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
11. Evaluate needs and order supplies, materials, and personnel to keep unit operating. • 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 or additional interoperability resources that may be needed. • Assess current tactical communications equipment needs such as power sources for extended operations.	I	#1	10/12/16
12. Organize and supervise unit. • 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	#1	10/12/16
13. Participate in incident planning meetings as the technical expert for communications needs. • 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	#1	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
14. Design communications systems to meet incident operational needs. • 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, microwave) and 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	#1	10/12/16
15. Install communications equipment. • Obtain equipment from supply unit, if one exists and/or from authorized sources. • Provide for the installation of and test all components of the communications equipment to ensure the incident's systems are operational, for example: - 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 or program radios as necessary and authorized.	I	#1	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
16. Assign communications equipment. • 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	#1	10/12/16
17. Establish Incident Communications Center (ICC). • 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	#1	10/12/16
18. Manage operations of the ICC. • Document radio/telephone activities on appropriate forms. • Set up filing system for ICC documentation. • Direct radio/telephone traffic to proper destinations. • Establish notification procedures for emergency messages. • Identify system problems, both technical and operational, and determine appropriate solutions. • Follow established routing procedures for messages.	I	#1	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
19. Coordinate frequencies, activities, and resources with communications resource coordinators outside of the incident. • Contact communications coordinators and notify them of incident frequency, talkgroup, 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	#1 JGM	10/12/16
20. Notify appropriate local, county, regional, State and/or Federal agencies on adjacent incident(s) of system design and frequency allocations.	I	#1 JGM	10/12/16
21. Initiate and maintain accurate records of all communications equipment • 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	#1 JGM	10/12/16
22. Perform operational tests of communications systems throughout the duration of the incident. • Identify and take necessary action to accomplish minor field repair or place orders for replacement of equipment. • Monitor all gateways in use. • Plan for battery replacement. • Act decisively to minimize interruptions in system operation.	I	#1 JGM	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
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Task	Code	Evaluator # and Initials	Date
23. Interact and coordinate with appropriate unit leaders and operations personnel. • 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	#1	10/12/16
24. Identify for release any excess unit resources. Coordinate with unit managers and provide a list of excess personnel and facilities. List will include: • 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	#1	10/12/16
25. Maintain ICS Unit Log. Unit Log will be kept current, legible, and will document all major activities, which may include: • Equipment locations. • Medical evacuations. • Personnel changes.	I	#1	10/12/16
26. Evaluate performance of subordinates as required by agency policy and/or permitted by agreement. • Discuss performance evaluations with individual(s). • Maintain accuracy and fairness. • List training if needed or desired.	I	#1	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Competency 3: Demobilization

Task	Code	Evaluator# Initials	Date
27. Demobilization and check out. • 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 that personnel in the unit are demobilized correctly. • Document lost equipment on agency specific forms.	I	#1 JBM	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

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All-Hazard Communication Unit Leader

INSTRUCTIONS FOR COMPLETING THE RECORD OF EVALUATION

There are four separate pages allowing evaluations to be made. These evaluations may be made on incidents, planned events, Full Scale Exercises (FSE), Functional Exercises (FE), 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 evaluation opportunities are needed, a page can be copied from a blank task book and attached. (Remember to change the Evaluation Record # to the next sequential number.)

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

Trainee's name and Trainee's position: Self Explanatory

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

Evaluator's agency address, e-mail address and phone: Self explanatory

Evaluation Record #: The number prepopulated in the upper left corner of the evaluation page 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 during the evaluation opportunity.

Name and Location of Incident or Situation: Identify the name of the incident (if there is one) and the location where the tasks were performed. If evaluation occurs during a short term situation rather than a named incident, list the responding agency and area.

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

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

Number and Kind of Resources: Enter how many resources of each kind assigned to the incident pertinent to the trainee's task book position. (e.g. 2 mobile communications vehicles)

Duration: Enter inclusive dates during which the trainee was evaluated. If evaluation occurs during a short term situation, enter date and start and end time of evaluation. (e.g. 11/1/14 to 11/4/14)

Management Level or Complexity Level: Indicates ICS organization level, i.e., Type 5, Type 4, Type 3, Type 2, Type 1, Area Command.

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: Evaluator initials here to authenticate their recommendations and to allow for comparison with initials in the Qualifications Record.

Evaluator's relevant rating: Evaluator lists their certification relevant to the trainee position they supervised.

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RECORD OF EVALUATION

TRAINEE NAME **TRAINEE POSITION**

Evaluation Record #1	Evaluator's name: Jason Matthias	Evaluator's Title: Lead ECS	Evaluator's Agency: St Louis County MN 911	
Evaluator's agency address: 2030 N Arlington Ave Duluth MN 55811				
Evaluator's e-mail: matthiasj@stlouiscounty.mn.gov			Phone:	
Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Kind of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Complexity Level
MN GR Complex	Train Derailment Command	Command Vehicle Portable Radios	10/12/16 0700-1530	Type 3

The tasks initialed & 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:

X 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 needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.

Comments: Continue to work on understanding of Data systems

Date: 10/12/16 Evaluator's initials: _____

Evaluator's relevant agency certification or rating: COML

RECORD OF EVALUATION

TRAINEE NAME **TRAINEE POSITION**

Evaluation Record #2	Evaluator's name:	Evaluator's Title:	Evaluator's Agency:	
Evaluator's agency address:				
Evaluator's e-mail:			Phone:	
Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Kind of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Complexity Level

The tasks initialed & 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:

_____ 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 needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.

Comments: _____

_____

_____

_____

Date: _____ Evaluator's initials: _____

Evaluator's relevant agency certification or rating: _____

RECORD OF EVALUATION

TRAINEE NAME **TRAINEE POSITION**

Evaluation Record #3	Evaluator's name:	Evaluator's Title:	Evaluator's Agency:
Evaluator's agency address:			
Evaluator's e-mail:			Phone:

Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Kind of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Complexity Level

The tasks initialed & 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:

_____ 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 needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.

Comments: _____

_____

_____

_____

Date: _____ Evaluator's initials: _____

Evaluator's relevant agency certification or rating: _____

RECORD OF EVALUATION

TRAINEE NAME **TRAINEE POSITION**

Evaluation Record #4	Evaluator's name:	Evaluator's Title:	Evaluator's Agency:	
Evaluator's agency address:				
Evaluator's e-mail:			Phone:	
Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Kind of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Complexity Level

The tasks initialed & 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:

_____ 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 needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.

Comments: _____

_____

_____

_____

Date: _____ Evaluator's initials: _____

Evaluator's relevant agency certification or rating: _____

ICS Form 201 Incident Briefing

INCIDENT BRIEFING	1. INCIDENT NAME	2. DATE	3. TIME PREPARED
	Train	10/12/16	0946

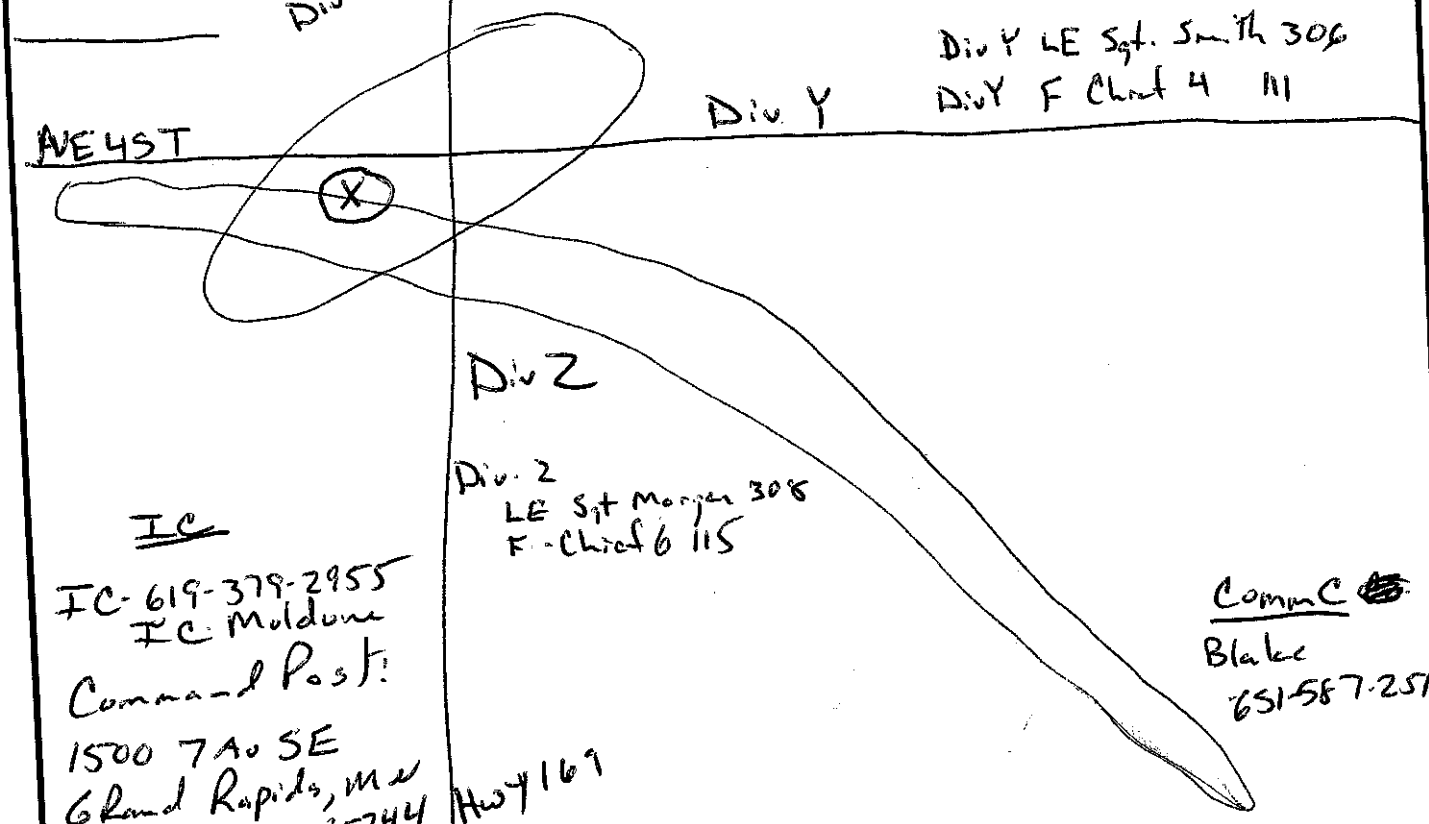
4. MAP SKETCH (NTS)

Function	Frequency or Talkgroup Name	Assignment
Command	IT Event 2	Un. Sound Com
MACS		
Tactical	ITPSCOM 1	Fire/Ems Div A/B
Tactical	ITPSCOM 3	F/E Div Y/Z
Tactical	ITPSCOM 5	Fire Hazmat
Tactical	#TLAW 3	LE- All Div.
Tactical		

Function	Frequency or Talkgroup Name	Assignment
Tactical	6R PW	Public Works
Tactical	6R COM 1	CST - Civil Support Team
Tactical		
Tactical		
Air	STac 1	LL3 - Medical
Air	Metac-2	LE - Support Troop 2
Staging		

Div A LE Sgt Brindly 304 Hwy 169
Div A F Chief 3 116

Div B LE Sgt Carlson 305
Div B F Chief 2 114



S Staging Area Name | Number (H-1, etc.) and Name | H B C Camp Name | Hazard (Identify type, e.g. power lines)

5. PREPARED BY (NAME AND POSITION)

ICS Form 205 Incident Radio Communications Plan

1. Incident Name	2. Date/Time Prepared:	3. Operational Period:	
Train	Date: 10/12/16	Date From: 10/12/16	Date to: 10/13/16
	Time: 0915	Time From: 0915	Time To: 0700

4. Basic Radio Channel Use:

	Zone Grp.	Ch #	Function	Channel Name/ Trunked Radio System Talk group	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	Tx Tone/NAC	Mode (A, D, or M)	Remarks
	1		Command	ITEvent 2	Un.fied Co.	Armer 800mHz		Armer 800mHz		D	Un.fied Command
2	2		FD Tactical	ITPSCom 1	Fire/EMS						Div A/B
3	3		FD Tactical	ITPSCom 3	Fire/EMS						Div Y/Z
4	4		FD Tactical	ITPSCom 5	Fire/[redacted]						Hazmat
5			FD Tactical								
6	5		FD Tactical	ITLAW 3	LE						All Divisions
7			FD Tactical		LE						
8			LE Tactical		LE						
9			LE Tactical		LE						
10	6		Support	BR PW	PW						PW - Stagings, etc
11	7		Support	BR PCom 1	CST						Civil Support Team
12	8		Support	STac 1	Air						LL3 -
13	9		Support	NE Tac 2	Art						Troop - 7
14											
15											
16											

5. Special Instructions:

6. Prepared by (Communications Unit Leader): Name:	Signature:
Daniel Klakwitter	
ICS 205 IAP Page	Date/Time: 10/12/16

The convention calls for frequency lists to show four digits after the decimal place, followed by either an "N" or a "W", depending on whether the frequency is narrow or wide band. Mode refers to either "A" or "D" indicating analog or digital (Project 25)

Approved for use 10/14 1000

OPS Briefing 205 for Following Day

ICS Form 205 Incident Radio Communications Plan

1. Incident Name	2. Date/Time Prepared:	3. Operational Period:	
Train	Date: 10/12/16	Date From: 10/13/16	Date to: 10/13/16
	Time: 1100 hrs	Time From: 0700	Time To: 1900

4. Basic Radio Channel Use:

	Zone Grp.	Ch #	Function	Channel Name/ Trunked Radio System Talk group	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	Tx Tone/NAC	Mode (A, D, or M)	Remarks
1	1		Command	IT EVT 1	Unified Command	Array 800 MHZ		Array 800 MHZ		D	Unified Command
2	2		FD-Tact	IT Pscom1	Div A/B						Div A/B
3	3		FD-Tact	IT Pscom3	Div Y/Z						Div Y/Z
4	4		FD-Tact	IT Pscom5	Hazmat						Hazmat
5	5		FD-Tact	IT Pscom 6	Rescue						Rescue
6	6		LE-Tact	IT Law 3	Sect/Perim Div A/B						Div A/B Security/Perimeter
7	7		LE-Tact	IT Law 4	Sect/Perim Div Y/Z						Div Y/Z Security/Perimeter
8	8		PW-Support	6R PW	Salvage						Stabalize/Remove RR Cars
9	9		~~PD~~ Staging	6R Fire 1	Staging						Standby
10											
11											
12											
13											
14											
15											
16											

5. Special Instructions:

6. Prepared by (Communications Unit Leader): Name:	Signature:
Daniel Klawitter	
ICS 205 / IAP Page	Date/Time: 10/12/16 1100 hrs

The convention calls for frequency lists to show four digits after the decimal place, followed by either an "N" or a "W", depending on whether the frequency is narrow or wide band. Mode refers to either "A" or "D" indicating analog or digital (Project 25)

GENERAL MESSAGE (ICS 213)

1. Incident Name (Optional): Train

2. To (Name and Position): IC

3. From (Name and Position): Klamath / ComL

4. Subject: Order Radio

5. Date: Date 10/12

6. Time 0756

7. Message:

Order Radio - time on site under 120 min.

(612-760-1706)

8. Approved by: Name: Klamath Signature: [signature] Position/Title: ComL

9. Reply:

Approved

10. Replied by: Name: [signature] Position/Title: IC Signature: [signature]

ICS 213

Date/Time: Date 10/14

GENERAL MESSAGE (ICS 213)

1. **Incident Name** (Optional): Train

2. **To** (Name and Position): IC

3. **From** (Name and Position): Klam. Hw - COML

4. **Subject:** Order Radio Cache

5. **Date:** Date 10/12

6. **Time** 0759

7. **Message:**

Order 50 cache Radios, chargers, and cache Radio Specialist.
Be onsite under 180min or 1pm.

(612-768-1706)

8. **Approved by:** Name: Klam. Hw Signature: [signature] Position/Title: COML

9. **Reply:**

Approved

10. **Replied by:** Name: [signature] Position/Title: LOFR Signature: [signature]

ICS 213

Date/Time: Date 10/14 1005

GENERAL MESSAGE (ICS 213)

1. **Incident Name** (Optional): TRAIN

2. **To** (Name and Position): IC

3. **From** (Name and Position): Klaus H. - ComL

4. **Subject:** Order ComL Relief for 10/13/16 6AM

5. **Date:** Date 10/12/16

6. **Time** HHMM 0

7. **Message:**

Order ComL Relief to be on site 10/13/16 at 0600 hours.

(612-760-1706)

8. **Approved by:** Name: Klaus H. Signature: [signature] Position/Title: ComL

9. **Reply:**

Approved

10. **Replied by:** Name: [signature] Position/Title: ICT Signature: [signature]

ICS 213 Date/Time: Date 10/14

GENERAL MESSAGE (ICS 213)

1. Incident Name (Optional): TRAIN

2. To (Name and Position): IC

3. From (Name and Position): Klawi He - COML

4. Subject: Order a Runner for COML

5. Date: Date 10/12/10

6. Time HHMM 0907

7. Message:

Order a Runner for Comm Team.
Be on site by 12pm, NOON. Bring to
Trailer. [redacted]

612-760-7066

8. Approved by: Name: Klawi He Signature: [signature] Position/Title: COML

9. Reply:

10. Replied by: Name: Position/Title: Signature:

ICS 213 Date/Time: Date

Train 10/12/16 COML Klawitter pg 1.

6. SUMMARY OF CURRENT ACTIONS

Time	Summary of Action
0915	Start Comm Plan
0956	Order Radio
0957	205 Approved by IC
1000	Order Radio Cache - 50 w/ Specialist
1001	Order Coml Relief be here at 10/13/16 6AM
1007	Order Runner
1009	Requested IC for 201 & 214's
1015	Approved - RADO Order by IC
1015	Approved - Radio Cache w/ Specialist
1015	Approved - COML Relief
1015	Approved - Runner Ordered
1030	Attend Planning Meeting - Plan P
1100	Completed ICS-205 for Next Op Period. 10/13/16 0700-1900
1259	Employee Issue - RADO Lynn needs to leave - agreed to
—	stay until a replacement arrives in 2 hrs. 213 req.

Continue on NIMS/ICS Form 214 Unit Log

6. SUMMARY OF CURRENT ACTIONS

Time	Summary of Action
1324	Radio starts getting radio traffic - resources avail.
1345	Log. Chief From ~~~ takes 8 cache radios (switch #'s)
1353	Sgt 116 P1 - Hwy 169 / Hwy 2 - EMS - Fire - PD - 116 injured
1353	Call Logistics Chief 116 + E2 in P1, Div. A needs replacement
1353	213 for replacement 116 + E2
~~1403~~	~~From Sec. wks. for demobilization - Request 213~~
~~1405~~	~~Sent 213 to Transportation Sec~~
1403	Log. Sec Req Demob ICS 213 for excess Personal
1422	Log Chief From ~~~ returned 8 cache radio's
	Continue on NIMS/ICS Form 214 Unit Log

ICS Form 309 Communications Log

COMMUNICATIONS LOG	INCIDENT #	OPERATIONAL PERIOD FROM: TO:
	INCIDENT NAME:	

RADIO OPERATOR NAME	STATION I.D.

LOG

TIME	FROM	TO	SUBJECT
1323	CF3	RADO	ON SCENE DIV A - RESOURCES / TG PERSONNEL, EQUIP.
1326	SGT BRADLEY	" "	LEDIV. A - SGT BRADLEY - op. chief
1328	TRANS 301 GR	" "	on FC 1 location Staging
1329	Sgt Carlson	" "	Div. B
1331	Sgt Bradley	" "	Op. Sect Chief Mark - Law Resources
1331	" "		No Op. chief available
1336	C2	" "	Est. DIV. B
1338	IMC Log Sect Chief		Cache radios + Staff
1342	Sec Chief	" "	Staging location
1343	C4	" "	Fire Div Y
1347	Sgt Sinton		LE Div. Y
1348	Haz Mat 1		Assign. Tact
1349	Sgt Morgan		LE Div B
1350	C6	" "	TG Resources
1350	116		169/2 requested tows/tow
1351	PW		TG
1352	Life Link		TG
1353	MSP 301		~~Staging~~ Staging location
1354	?		Location ICP
1403	demobilization	" "	ICS 213

ICS Form 225 INCIDENT PERSONNEL PERFORMANCE RATING

THIS RATING IS TO BE USED ONLY FOR DETERMINING AN INDIVIDUAL'S PERFORMANCE ON AN INCIDENT/EVENT

1. Name: Lynn M. Helick	2. Incident Name: Train	3. Incident Number: 20161699
4. Home Unit Name and Address: Amateur Radio Bldg Main St. GR, MN	5. Incident Agency and Address: GRPD	
6. Position Held on Incident: RADO	7. Date(s) of Assignment: From: 10/12/16 To:	8. Incident Complexity Level: ☐1 ☐2 ☒3 ☐4 ☐5	9. Incident Definition: Train - Department

10. Evaluation

Rating Factors	N/A	1 – Unacceptable	2	3 – Met Standards	4	5 – Exceeded Expectations
11. Knowledge of the Job/ Professional Competence: Ability to acquire, apply, and share technical and administrative knowledge and skills associated with description of duties. (Includes operational aspects such as marine safety, seamanship, airmanship, SAR, etc., as appropriate.)	☐	Questionable competence and credibility. Operational or specialty expertise inadequate or lacking in key areas. Made little effort to grow professionally. Used knowledge as power against others or bluffed rather than acknowledging ignorance. Effectiveness reduced due to limited knowledge of own organizational role and customer needs. ☐	☐	Competent and credible authority on specialty or operational issues. Acquired and applied excellent operational or specialty expertise for assigned duties. Showed professional growth through education, training, and professional reading. Shared knowledge and information with others clearly and simply. Understood own organizational role and customer needs. ☐	☒	Superior expertise; advice and actions showed great breadth and depth of knowledge. Remarkable grasp of complex issues, concepts, and situations. Rapidly developed professional growth beyond expectations. Vigorously conveyed knowledge, directly resulting in increased workplace productivity. Insightful knowledge of own role, customer needs, and value of work. ☐
12. Ability To Obtain Performance/Results: Quality, quantity, timeliness, and impact of work.	☐	Routine tasks accomplished with difficulty. Results often late or of poor quality. Work had a negative impact on department or unit. Maintained the status quo despite opportunities to improve. ☐	☐	Got the job done in all routine situations and in many unusual ones. Work was timely and of high quality; required same of subordinates. Results had a positive impact on IMT. Continuously improved services and organizational effectiveness. ☐	☒	Maintained optimal balance among quality, quantity, and timeliness of work. Quality of own and subordinates' work surpassed expectations. Results had a significant positive impact on the IMT. Established clearly effective systems of continuous improvement. ☐
13. Planning/ Preparedness: Ability to anticipate, determine goals, identify relevant information, set priorities and deadlines, and create a shared vision of the Incident Management Team (IMT).	☐	Got caught by the unexpected; appeared to be controlled by events. Set vague or unrealistic goals. Used unreasonable criteria to set priorities and deadlines. Rarely had plan of action. Failed to focus on relevant information. ☐	☐	Consistently prepared. Set high but realistic goals. Used sound criteria to set priorities and deadlines. Used quality tools and processes to develop action plans. Identified key information. Kept supervisors and stakeholders informed. ☐	☒	Exceptional preparation. Always looked beyond immediate events or problems. Skillfully balanced competing demands. Developed strategies with contingency plans. Assessed all aspects of problems, including underlying issues and impact. ☐
14. Using Resources: Ability to manage time, materials, information, money, and people (i.e., all IMT components as well as external publics).	☐	Concentrated on unproductive activities or often overlooked critical demands. Failed to use people productively. Did not follow up. Mismanaged information, money, or time. Used ineffective tools or left subordinates without means to accomplish tasks. Employed wasteful methods. ☐	☐	Effectively managed a variety of activities with available resources. Delegated, empowered, and followed up. Skilled time manager, budgeted own and subordinates' time productively. Ensured subordinates had adequate tools, materials, time, and direction. Cost conscious, sought ways to cut waste. ☐	☒	Unusually skilled at bringing scarce resources to bear on the most critical of competing demands. Optimized productivity through effective delegation, empowerment, and follow-up control. Found ways to systematically reduce cost, eliminate waste, and improve efficiency. ☐
15. Adaptability/Attitude: Ability to maintain a positive attitude and modify work methods and priorities in response to new information, changing conditions, political realities, or unexpected obstacles.	☐	Unable to gauge effectiveness of work, recognize political realities, or make adjustments when needed. Maintained a poor outlook. Overlooked or screened out new information. Ineffective in ambiguous, complex, or pressured situations. ☐	☐	Receptive to change, new information, and technology. Effectively used benchmarks to improve performance and service. Monitored progress and changed course as required. Maintained a positive approach. Effectively dealt with pressure and ambiguity. Facilitated smooth transitions. Adjusted direction to accommodate political realities. ☐	☐	Rapidly assessed and confidently adjusted to changing conditions, political realities, new information, and technology. Very skilled at using and responding to measurement indicators. Championed organizational improvements. Effectively dealt with extremely complex situations. Turned pressure and ambiguity into constructive forces for change. ☒
16. Communication Skills: Ability to speak effectively and listen to understand. Ability to express facts and ideas clearly and convincingly.	☐	Unable to effectively articulate ideas and facts; lacked preparation, confidence, or logic. Used inappropriate language or rambled. Nervous or distracting mannerisms detracted from message. Failed to listen carefully or was too argumentative. Written material frequently unclear, verbose, or poorly organized. Seldom proofread. ☐	☐	Effectively expressed ideas and facts in individual and group situations; nonverbal actions consistent with spoken message. Communicated to people at all levels to ensure understanding. Listened carefully for intended message as well as spoken words. Written material clear, concise, and logically organized. Proofread conscientiously. ☐	☐	Clearly articulated and promoted ideas before a wide range of audiences; accomplished speaker in both formal and extemporaneous situations. Adept at presenting complex or sensitive issues. Active listener; remarkable ability to listen with open mind and identify key issues. Clearly and persuasively expressed complex or controversial material, directly contributing to stated objectives. ☒

INCIDENT PERSONNEL PERFORMANCE RATING (ICS 225)

Name:	2. Incident Name:	3. Incident Number:

10. Evaluation

Rating Factors	N/A	1 – Unacceptable	2	3 – Met Standards	4	5 – Exceeded Expectations
17. Ability To Work on a Team: Ability to manage, lead and participate in teams, encourage cooperation, and develop esprit de corps.	☐	Used teams ineffectively or at wrong times. Conflicts mismanaged or often left unresolved, resulting in decreased team effectiveness. Excluded team members from vital information. Stifled group discussions or did not contribute productively. Inhibited cross functional cooperation to the detriment of unit or service goals. ☐	☐	Skillfully used teams to increase unit effectiveness, quality, and service. Resolved or managed group conflict, enhanced cooperation, and involved team members in decision process. Valued team participation. Effectively negotiated work across functional boundaries to enhance support of broader mutual goals. ☐	☐	Insightful use of teams raised unit productivity beyond expectations. Inspired high level of esprit de corps, even in difficult situations. Major contributor to team effort. Established relationships and networks across a broad range of people and groups, raising accomplishments of mutual goals to a remarkable level. ☒
18. Consideration for Personnel/Team Welfare: Ability to consider and respond to others' personal needs, capabilities, and achievements; support for and application of worklife concepts and skills.	☐	Seldom recognized or responded to needs of people; left outside resources untapped despite apparent need. Ignorance of individuals' capabilities increased chance of failure. Seldom recognized or rewarded deserving subordinates or other IMT members. ☐	☐	Cared for people. Recognized and responded to their needs; referred to outside resources as appropriate. Considered individuals' capabilities to maximize opportunities for success. Consistently recognized and rewarded deserving subordinates or other IMT members. ☐	☐	Always accessible. Enhanced overall quality of life. Actively contributed to achieving balance among IMT requirements and professional and personal responsibilities. Strong advocate for subordinates; ensured appropriate and timely recognition, both formal and informal. ☒
19. Directing Others: Ability to influence or direct others in accomplishing tasks or missions.	☐	Showed difficulty in directing or influencing others. Low or unclear work standards reduced productivity. Failed to hold subordinates accountable for shoddy work or irresponsible actions. Unwilling to delegate authority to increase efficiency of task accomplishment. ☐	☐	A leader who earned others' support and commitment. Set high work standards; clearly articulated job requirements, expectations, and measurement criteria; held subordinates accountable. When appropriate, delegated authority to those directly responsible for the task. ☐	☒	An inspirational leader who motivated others to achieve results not normally attainable. Won people over rather than imposing will. Clearly articulated vision; empowered subordinates to set goals and objectives to accomplish tasks. Modified leadership style to best meet challenging situations. ☐
20. Judgment/Decisions Under Stress: Ability to make sound decisions and provide valid recommendations by using facts, experience, political acumen, common sense, risk assessment, and analytical thought.	☐	Decisions often displayed poor analysis. Failed to make necessary decisions, or jumped to conclusions without considering facts, alternatives, and impact. Did not effectively weigh risk, cost, and time considerations. Unconcerned with political drivers on organization. ☐	☐	Demonstrated analytical thought and common sense in making decisions. Used facts, data, and experience, and considered the impact of alternatives and political realities. Weighed risk, cost, and time considerations. Made sound decisions promptly with the best available information. ☐	☒	Combined keen analytical thought, an understanding of political processes, and insight to make appropriate decisions. Focused on the key issues and the most relevant information. Did the right thing at the right time. Actions indicated awareness of impact of decisions on others. Not afraid to take reasonable risks to achieve positive results. ☐
21. Initiative Ability to originate and act on new ideas, pursue opportunities to learn and develop, and seek responsibility without guidance and supervision.	☐	Postponed needed action. Implemented or supported improvements only when directed to do so. Showed little interest in career development. Feasible improvements in methods, services, or products went unexplored. ☐	☐	Championed improvement through new ideas, methods, and practices. Anticipated problems and took prompt action to avoid or resolve them. Pursued productivity gains and enhanced mission performance by applying new ideas and methods. ☐	☒	Aggressively sought out additional responsibility. A self-learner. Made worthwhile ideas and practices work when others might have given up. Extremely innovative. Optimized use of new ideas and methods to improve work processes and decisionmaking. ☐
22. Physical Ability for the Job: Ability to invest in the IMT's future by caring for the physical health and emotional well-being of self and others.	☐	Failed to meet minimum standards of sobriety. Tolerated or condoned others' alcohol abuse. Seldom considered subordinates' health and well-being. Unwilling or unable to recognize and manage stress despite apparent need. ☐	☐	Committed to health and well-being of self and subordinates. Enhanced personal performance through activities supporting physical and emotional well-being. Recognized and managed stress effectively. ☐	☒	Remarkable vitality, enthusiasm, alertness, and energy. Consistently contributed at high levels of activity. Optimized personal performance through involvement in activities that supported physical and emotional well-being. Monitored and helped others deal with stress and enhance health and well-being. ☐
23. Adherence to Safety: Ability to invest in the IMT's future by caring for the safety of self and others.	☐	Failed to adequately identify and protect personnel from safety hazards. ☐	☐	Ensured that safe operating procedures were followed. ☐	☒	Demonstrated a significant commitment toward safety of personnel. ☐

24. Remarks: Good Attitude, Pleasure to work with

25. Rated Individual (This rating has been discussed with me):
Signature: [signature] Date/Time: 10/12/16 1430 hrs

26. Rated by: Name: Daniel Klein Signature: [signature]
Name Unit: [signature] Position Held on This Incident: COML
ICS 225 [signature] Date/Time: 10/12/16 1430 hrs.

[signature]

Jacob Cree

Minnesota COML Team
Metro Region Communications Unit Leader
Type III COML CERTIFICATION CHECK OFF

The following items checked are included in this packet

☒ All Prerequisite Training Completed

- ☒ ICS 700 (Printout attached)
- ☒ ICS 800 (Printout attached)
- ☒ ICS 100 (a or b) (Printout attached)
- ☒ ICS 200 (Printout attached)
- ☒ ICS 300 (Printout attached)

If you are part of the Minnesota training Website, A print of the HSEM Certification Record Completed courses main page with the above courses listed will be sufficient.

☒ Copy of Certificate from COML training

☒ Agency Certification (attached)

☒ Completed Task Book (with evaluator reviews)

☒ Copy of an Incident Action Plan, Incident Communications Plan, or After Action Plan (only one needed)

☒ Final Evaluator Certification (attached)

☒ Regional Interoperability Coordinator review

(Signature) **Troy Tretter** (Printed Name)

☐ Regional Radio Board – Technical Operations Committee Review

(Chair of Radio-TOC Signature) **Scott Haas** (Printed Name)

☐ Statewide Interoperability Program Manager Review

(Statewide Interoperability Program Manager Signature) **Jim Stromberg** (Printed Name)

Attachment B

MESB

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

JACOB A CREE

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00700.a
National Incident Management System (NIMS)
An Introduction

Issued this 15th Day of July, 2009

Tony Russell
Superintendent
Emergency Management Institute

0.3 IACET CEU

Emergency Management Institute

4642

FEMA

This Certificate of Achievement is to acknowledge that

JACOB A CREE

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00800.b
National Response Framework, An Introduction

Issued this 13th Day of November, 2014

0.3 IACET CEU

Tony Russell
Superintendent
Emergency Management Institute

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

JACOB A CREE

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00200.a
ICS for Single Resources and
Initial Action Incidents

Issued this 27th Day of August, 2008

AUTHORIZED IACET PROVIDER

Tony Russell
Superintendent
Emergency Management Institute

0.3 IACET CEU

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

JACOB A CREE

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00100.a
Introduction to the Incident Command System
(ICS 100)

Issued this 25th Day of August, 2008

AUTHORIZED IACET PROVIDER

Tony Russell
Superintendent
Emergency Management Institute

0.3 IACET CEU

FEMA

National Fire Academy

Jacob Allen Cree

is awarded this certificate in recognition of completion
of the NFA State/Local Partner-Sponsored Training

ICS 300, Intermediate ICS for Expanding
Incidents for Operational First Responders
St Paul, Minnesota

March 2 - 4, 2016

Superintendent
National Fire Academy

This course meets the NIMS requirements for ICS-300.

Emergency Management Institute

FEMA

This is to certify that

Jacob Allen Cree

successfully completed

NIMS ICS All-Hazards Communications Unit Leader
Saint Paul, Minnesota

2.80 IACET CEU

August 8 - 10, 2016

AUTHORIZED IACET PROVIDER

Superintendent
Emergency Management Institute

MINNESOTA DEPARTMENT OF PUBLIC SAFETY

Emergency Communication Networks

445 Minnesota Street • Suite 137 • Saint Paul, Minnesota 55101-5137
Phone: 651.201.7547 • Fax: 651.296.2665 • TTY: 651.282.6555
www.ecn.state.mn.us

MESB

Alcohol and Gambling Enforcement

Bureau of Criminal Apprehension

Driver and Vehicle Services

Emergency Communication Networks

Homeland Security and Emergency Management

Minnesota State Patrol

Office of Communications

Office of Justice Programs

Office of Traffic Safety

State Fire Marshal

Minnesota Communications Unit Exercise (COMMEX) Results Letter

November 7, 2016

Dear Jacob,

Congratulations! You have completed all the required tasks during the COMMEX. Enclosed is your Position Task Book (PTB), along with your exercise support documents.

You will need to have your agency complete the agency certification portion of the PTB. After that, you will need to check who needs a copy of the PTB and make enough copies to send to the following locations that may apply:

- Your personnel file
- Your agency training or credentialing committee
- Your primary Emergency Communications Board (ECB) or Emergency Services Board (ESB)
- Any other credentialing entity (e.g., operational area, Incident Management Team (IMT) etc.)

Put the original PTB in your kit and continue to document any activities during future exercises, planned events, and incidents. After each assignment, re-copy the updated PTB and follow the same process to update your current experience.

Remember to document all activities in your PTB and do not leave the incident or event without getting an evaluation. Once your PTB is full, you will need to start a new PTB. This process will document all your experience and will help with re-credentialing requirements and keeping your skills current.

If you have any questions, I can be reached at 651-201-7548. Thank you for your participation; we look forward to seeing you at future communication-focused activities!

Respectfully,

Cathy Anderson

Cathy Anderson
Standards and Training Coordinator

Homeland Security

ALL-HAZARD COMMUNICATIONS UNIT LEADER (COML)

Position Task Book

Task Book Assigned To:

Trainee's Name: Jacob Creek

Home Unit/Agency: Hennepin EMS

Home Unit Phone Number: 612-347-2140

Task Book Initiated By:

Official's Name: Jason Mathias

Home Unit Title: Lead ECS

Home Unit/Agency: St Louis County 911

Home Unit Phone Number: 218 340 2940

Home Unit Address: 2030 N Arlington Ave Duluth MN 55811

Date Initiated: Oct 12 2016

Version 2.1
November 2014

VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK FOR THE POSITION OF ALL- HAZARDS COMMUNICATIONS UNIT LEADER (COML)

FINAL EVALUATOR'S VERIFICATION

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

Final Evaluators Signature _____ Date 10/12/16

Printed Name Jason Matthias Agency St Louis County MN911

Phone Number (218) 340-2940 Email matthiasj@stlouiscountymn.gov

AGENCY CERTIFICATION

I certify that JACOB CREE
has met all requirements for qualification in this position and that such qualification has been issued.

Certifying Official's Signature _____ Date 11-10-2016

Printed Name WENDY L LYNCH Agency HENNEPIN EMS

Title EMS CHIEF Phone Number 612-873-3839

HISTORICAL RECOGNITION

Historical recognition is a process that provides a means by which incident management personnel who have either:

- Documentation of previous ICS training, education, and experience in an ICS position(s); or
- Documentation of previous extensive on-the-job incident response experience,

may receive credit for that previous experience, training, or qualification(s) and be considered as meeting the minimum requirements of this guide in the categories of:

- Education;
- Training; and
- Experience,

for an ICS position(s) until they have successfully completed the actual minimum requirements for that position. Historical Recognition does not apply to the categories of Physical/Medical Fitness, Currency, or certification. The minimum requirements within those categories must be met regardless of any historical recognition process.

HISTORICAL RECOGNITION PROCESS

If an Authority Having Jurisdiction (AHJ) does not form a Qualifications Committee to assist with the management of the overall qualifications process, AHJ's should give strong consideration to at least forming a committee for the purposes of reviewing and processing applications for Historical Recognition. Because of the time commitment involved and the potential for perceptions of favoritism and unequal treatment during the process, other ICS qualifications processes currently used by Federal and State agencies that included a historical recognition provision used review committees to accomplish that process.

The AHJ should develop a process to provide for the following:

- Developing a method to provide for historical recognition when there is sufficient documentation available to substantiate the experience;
- Developing a standardized method for any individual to submit documentation of the experience and training for review by the AHJ or the appropriate review committee established by the AHJ;
- Developing a method to determine if the previous experience or training is appropriate for the position, keeping in mind the required criteria for the position and the competencies necessary for safe and successful performance;
- Providing for Historical Recognition only when the individual has most recently performed the position within the last five years;
- Requiring the individual meet all minimum requirements in this guide for a position if the individual seeks an ICS position other than the position they were historically recognized for;
- Encouraging all individuals who are historically recognized into a position to complete the minimum requirements for the positions within five years of being historically recognized.

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 authority having jurisdiction to certify that the person to whom the task book belongs meets the standards recommended by the National (NIMS) 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 an evaluator, will result in a recommendation 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. 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 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 to 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 certification.
   - 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. Dating and initialing completion of the task shall document satisfactory performance. Unsatisfactory performance shall be documented in the Record of Evaluation.
- Completing the Record of Evaluation 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:
   - Issuing the PTB to document task performance.
   - Explaining to the trainee the purpose and processes of the PTB, as well as the trainee's responsibilities.
   - 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.

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Competency 1: General

Task	Code	Evaluator # and Initials	Date
1. Obtain and assemble information and materials needed for a response kit prior to receiving an assignment, including critical items needed for the assignment and items needed for functioning during the first 48 hours. The following items are suggested as basic information and materials kept in a go bag: **Reference Materials** • 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 Operation Guide (NIFOG). • COML Mobilization Guide (specific to locality). **Supplies** • Pads of paper, pencils, pens, and tape. • Portable radio(s) as appropriate for the region. • Personal items (including medicine and cash), food and beverage to be self-sustained for 48 hours or more. • Radio programming equipment (cloning cable or computer), adapters, and suitable tools. • GPS. • First-aid kit. • 24-hour clock. • Multi-purpose knife.	O	#1	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
2. Establish and maintain positive interpersonal and interagency working relationships. • 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.	O	#1	10/12/16
3. Provide for the safety and welfare of assigned personnel during the entire period of supervision. • Recognize potentially hazardous situations. • Inform subordinates of hazards. • Provide safety and identifying equipment, such as vests identifying the communication's function, flashlights, and glow sticks. • Ensure that 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	#1	10/12/16

Competency 2: Mobilization

Task	Code	Evaluator # and Initials	Date
4. Obtain complete information from the public safety communications center(s) serving the area and incident upon initial activation, including: • 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	#1	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
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: • Frequencies and/or talkgroups 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	#1 JCM	10/12/16
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	#1 JCM	10/12/16
7. Arrive at incident and check in. Arrive properly equipped at the assigned incident location within acceptable time limits.	I	#1 JCM	10/12/16
8. Obtain briefing from supervisor. Examples of briefing items are: • Work space. • Work schedule. • Policies and operating procedures. • Current resource commitments and expectations. • Current situation. • Expected duration of assignment. • Special needs. This list is not all inclusive; COML is responsible for asking adequate questions.	I	#1 JCM	10/12/16
9. Receive Incident Action Plan (IAP) or Incident Briefing Form (ICS Form 201), if developed. Determine support needs to meet the IAP.	I	#1 JCM	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
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	#1	10/12/16
11. Evaluate needs and order supplies, materials, and personnel to keep unit operating. • 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 or additional interoperability resources that may be needed. • Assess current tactical communications equipment needs such as power sources for extended operations.	I	#1	10/12/16
12. Organize and supervise unit. • 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	#1	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
13. Participate in incident planning meetings as the technical expert for communications needs. • 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	#1 JCM	10/12/16
14. Design communications systems to meet incident operational needs. • 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, microwave) and 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	#1 JCM	10/13/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
15. Install communications equipment. • Obtain equipment from supply unit, if one exists and/or from authorized sources. • Provide for the installation of and test all components of the communications equipment to ensure the incident's systems are operational, for example: - 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 or program radios as necessary and authorized.	I	#1	10/12/16
16. Assign communications equipment. • 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	#1	10/12/16
17. Establish Incident Communications Center (ICC). • 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	#1	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
18. Manage operations of the ICC. • Document radio/telephone activities on appropriate forms. • Set up filing system for ICC documentation. • Direct radio/telephone traffic to proper destinations. • Establish notification procedures for emergency messages. • Identify system problems, both technical and operational, and determine appropriate solutions. • Follow established routing procedures for messages.	I	#1 JBM	10/12/16
19. Coordinate frequencies, activities, and resources with communications resource coordinators outside of the incident. • Contact communications coordinators and notify them of incident frequency, talkgroup, 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	#1 JBM	10/12/16
20. Notify appropriate local, county, regional, State and/or Federal agencies on adjacent incident(s) of system design and frequency allocations.	I	#1 JBM	10/12/16
21. Initiate and maintain accurate records of all communications equipment • 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	#1 JBM	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
22. Perform operational tests of communications systems throughout the duration of the incident. • Identify and take necessary action to accomplish minor field repair or place orders for replacement of equipment. • Monitor all gateways in use. • Plan for battery replacement. • Act decisively to minimize interruptions in system operation.	I	#1	10/12/16
23. Interact and coordinate with appropriate unit leaders and operations personnel. • 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	#1	10/12/16
24. Identify for release any excess unit resources. Coordinate with unit managers and provide a list of excess personnel and facilities. List will include: • 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	#1	10/12/16
25. Maintain ICS Unit Log. Unit Log will be kept current, legible, and will document all major activities, which may include: • Equipment locations. • Medical evacuations. • Personnel changes.	I	#1	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
26. Evaluate performance of subordinates as required by agency policy and/or permitted by agreement. • Discuss performance evaluations with individual(s). • Maintain accuracy and fairness. • List training if needed or desired.	I	#1 JGM	10/12/16

Competency 3: Demobilization

Task	Code	Evaluator# Initials	Date
27. Demobilization and check out. • 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 that personnel in the unit are demobilized correctly. • Document lost equipment on agency specific forms.	I	# 1 JGM	10/12/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

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All-Hazard Communication Unit Leader

INSTRUCTIONS FOR COMPLETING THE RECORD OF EVALUATION

There are four separate pages allowing evaluations to be made. These evaluations may be made on incidents (may include planned events and full scale exercises), 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. (Remember to change the Evaluation Record # to the next sequential number.)

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

Trainee's name and Trainee's position: Self Explanatory

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

Evaluator's agency address, e-mail address and phone: Self explanatory

Evaluation Record #: The number prepopulated in the upper left corner of the evaluation page 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 during the evaluation opportunity.

Name and Location of Incident or Situation: Identify the name of the incident (if there is one) and the location where the tasks were performed. If evaluation occurs during a short term situation rather than a named incident, list the responding agency and area.

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

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

Number and Kind of Resources: Enter how many resources of each kind assigned to the incident pertinent to the trainee's task book position. (e.g. 2 mobile communications vehicles)

Duration: Enter inclusive dates during which the trainee was evaluated. If evaluation occurs during a short term situation, enter date and start and end time of evaluation. (e.g. 11/1/14 to 11/4/14)

Management Level or Complexity Level: Indicates ICS organization level, i.e., Type 5, Type 4, Type 3, Type 2, Type 1, Area Command.

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: Evaluator initials here to authenticate their recommendations and to allow for comparison with initials in the Qualifications Record.

Evaluator's relevant rating: Evaluator lists their certification relevant to the trainee position they supervised.

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RECORD OF EVALUATION

Jacob Creek
TRAINEE NAME **TRAINEE POSITION**

Evaluation Record #1	Evaluator's name: Jason Matthias	Evaluator's Title: Lead ECS	Evaluator's Agency: St Louis County MN 911
Evaluator's agency address: 2030 N Arlington Ave Duluth MN 55811			
Evaluator's e-mail: matthiasj@stlouiscountymn.gov			Phone: 218 340 2940

Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Kind of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Complexity Level
Train Derailment Commex Grand Rapids MN	COMMEX -Train Derailment	Mobile Command Vehicle Portable Radios	10/12/16 0700-1700	Level 3

The tasks initialed & 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:

X 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 needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.

Comments: Continue to work on 205 plans / Managment of personnel skills. Very good work.

Date: 10/12/16 Evaluator's initials: JM

Evaluator's relevant agency certification or rating: COML

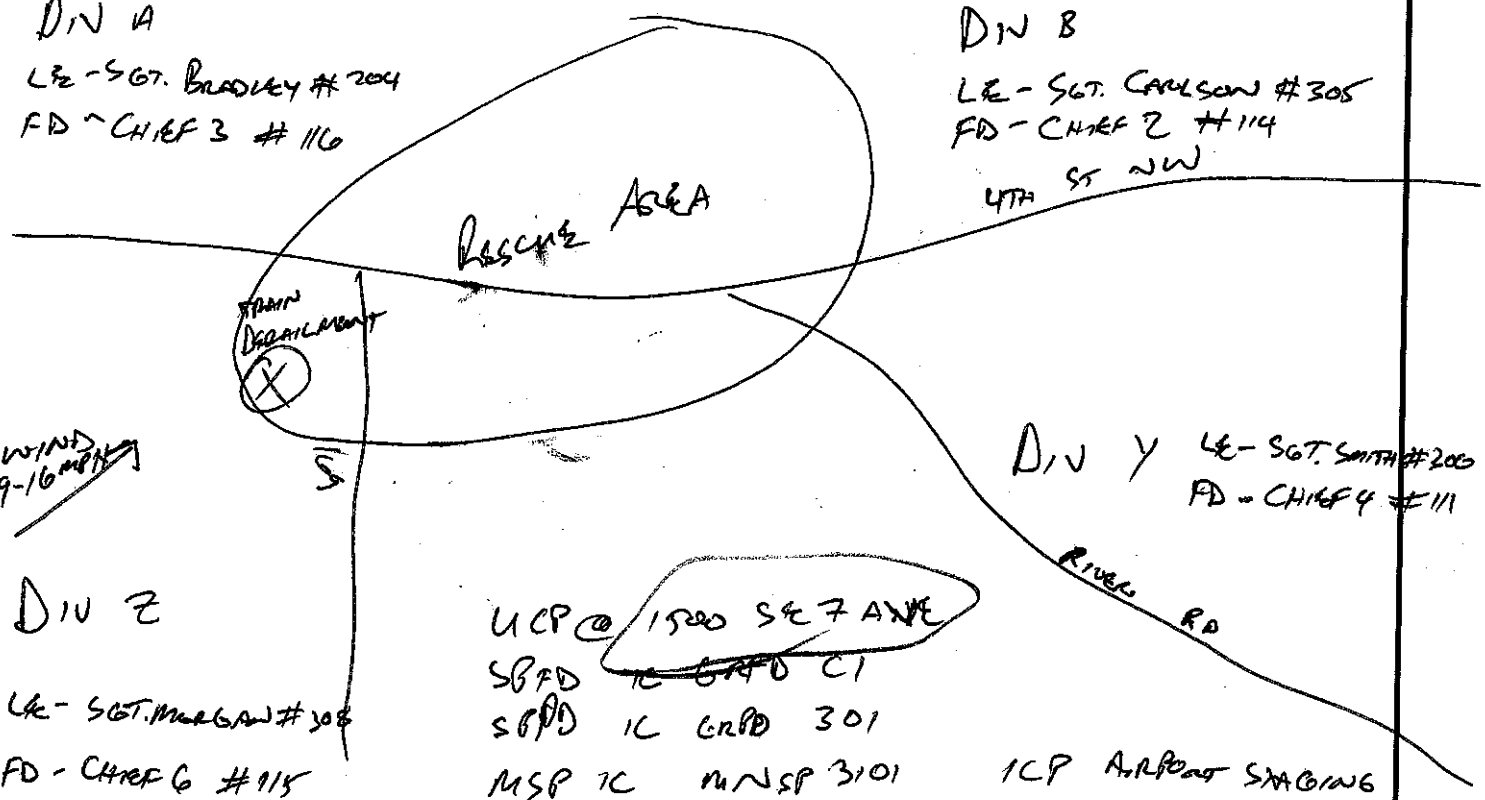
ICS Form 201 Incident Briefing

INCIDENT BRIEFING	1. INCIDENT NAME	2. DATE	3. TIME PREPARED
	TRAIN	10/12/16	8:56

4. MAP SKETCH (NTS)

Function	Frequency or Talkgroup Name	Assignment	Function	Frequency or Talkgroup Name	Assignment
Command	ITINCENT 2	UNIFIED COMMAND	Tactical	ITLAW 3	LAW ENFORCEMENT
MACS			Tactical	STAC -6	LAW ENFORCEMENT
Tactical	ITPSCOM 1	FIRE DIV A/B	Tactical	STAC - 7	LAW ENFORCEMENT
Tactical	ITPSCOM 3	FIRE DIV Y/Z	Tactical	GR PUBLIC WORKS	PUBLIC WORKS
Tactical	ITPSCOM 5	HAZMAT	Air	STAC 4	AIR MEDICAL
Tactical	STAC -3	FIRE OVERFLOW	Air	NGTAC-2	AIR SURVEY
Tactical	STAC-4	FIRE OVERFLOW	Staging	PSCOM 1	STAGING

STAGING
1401 NW 3RD AV



S Staging Area Name | Number (H-1, etc.) and Name | H B C Camp Name | Hazard (Identify type, e.g. power lines)

5. PREPARED BY (NAME AND POSITION) JACOB CAGE COML

PO 1 of 2

INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

1. Incident Name: TRAIN

2. Date/Time Prepared: Date: 10/12/16 Time: 09:15

3. Operational Period: Date From: 10/12/16 Date To: 10/13/16 Time From: 09:15 Time To: 07:00

4. Basic Radio Channel Use:

Zone Grp.	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	TX Tone/NAC	Mode (A, D, or M)	Remarks
	1	COMMAND	IT EVENT 2	UNIFIED COMMAND	ARMER 800	ARMER 800	ARMER 800	ARMER 800	D	
A/B	2	FIRE TACTICAL	IT PS COM 1	DIVISION A & B					D	
Z/7	3	FIRE TACTICAL	IT PS COM 3	DIVISION Z & Y					D	
	4	FIRE TACTICAL	IT PS COM 5	HAZMAT					D	
	5	FIRE TACTICAL	STAC-3	FIRE A/B OVERFLOW					D	
	6	FIRE TACTICAL	STAC-4	FIRE OVERFLOW Z/Y					D	
	7	LAW TACTICAL	IT LAW 3	LAW ENFORCEMENT					D	
	8	LAW TACTICAL	STAC-5	LAW ENFORCEMENT					D	

5. Special Instructions:

6. Prepared by (Communications Unit Leader): Name: JACOB CREEL Signature: [signature]

ICS 205 **IAP Page** ____ Date/Time: 10/12/16 09:36

Approved SM ICT 10/14 [signature]

INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

1. Incident Name:	2. Date/Time Prepared:	3. Operational Period:
TRAIN	Date: 10/12/16 Time: ~~0900~~	Date From: 10/12/16 Date To: 10/13/16 Time From: ~~0900~~ Time To: ~~0700~~

4. Basic Radio Channel Use:

Zone Grp.	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	TX Tone/NAC	Mode (A, D, or M)	Remarks
	9	TACTICAL	STAC-6	LAW ENFORCEMENT	ARMER 800	ARMER 800	ARMER 800	ARMER CSQ	D	
	10	TACTICAL	STAC-7	LAW ENFORCEMENT					D	
	11	~~SUPPORT TACTICAL~~	GP PUBLIC WORKS	PUBLIC WORKS					D	
	12	TACTICAL	STAC-8	CIVIL SUPPORT					D	
	13	TACTICAL AIR TO GROUND	STAC-1	AIR TO GROUND MEDICAL					D	
	14	TACTICAL AIR TO GROUND	NSTAC-2	AIR TO GROUND SURVEY					D	
	15	SUPPORT	PSCOM 1 ~~FIRE~~	STAGING						
		~~SUPPORT~~	~~GP PUBLIC WORKS~~	PUBLIC WORKS						

5. Special Instructions: IC MOLDUFF PHONE NUMBER 619-379-2955

6. Prepared by (Communications Unit Leader): Name: JACOB CASE Signature:

ICS 205	IAP Page	Date/Time: 10/12/16 09:26

ACTIVITY LOG (ICS 214)

1. Incident Name:	2. Operational Period:	Date From: 10/12/16	Date To: Date
TRAIN		Time From: 9HHMM	Time To: HHMM

3. Name:	4. ICS Position:	5. Home Agency (and Unit):
JACOB CARE	COM L T-2	HENNEPIN EMS

6. Resources Assigned:

Name	ICS Position	Home Agency (and Unit)
JACOB CARE	COM L	HENNEPIN EMS
LYNN MITHELICK	RADO	MN STATE PATROL RET. RADIO/AMATEUR

7. Activity Log:

Date/Time	Notable Activities
10/12/16 915	BRIEF WITH IC
10/12/16 955	REQ IC TO APPROVE 205 AND REQ RELIEF, CACHE, RUNNER
↓	IC APPROVED 205 & 201
10:27	REQ. REPLACEMENT RADO FOR CURRENT RADO
10:30	BRIEFING WITH TEAM CHANGE
10:45	REPLACE RADO FOR DIABETIC RXN TAKEN TO MEDICAL FOR TREATMENT
11:00	GAVE PORTABLE TO LSC & ORDERED SHOULDER MICS
11:05	FD OFF-ROAD SENT HELP NOTIFIED IC
11:14	ORDERED COM-T
11:24	CACHE RADIO TURNED IN.

8. Prepared by: Name: Position/Title: Signature: _____

 Date/Time: Date

ICS Form 213 General Message

1. **Incident Name** (Optional): TRAIN

2. **To** (Name and Position): ~~PSC~~ 1/C MOLDUNE INCIDENT Command

3. **From** (Name and Position): JACOB CRAIG COML

4. **Subject:** ORDER RELIEF

5. **Date:** 10/12/16

6. **Time:** 09:35

7. **Message:**

1 - COML TO RELIEVE CURRENT COML. MUST BE SELF-SUFFICIENT FOR 48 HRS. TO ARRIVE @ STAGING @ 06:00 10/15 @ 1500 SE ZANK

ICC

(612) 751-9705

8. **Approved by:** JACOB CRAIG Signature: [signature] Position/Title: COML

9. **Reply:**

Approve

10. **Replied by:** DM Position/Title: ICT Signature: [signature]

ICS 213 Date/Time: 10/14 1002

ICS Form 213 General Message

1. **Incident Name** (Optional): TRAIN		
2. **To** (Name and Position): MOLDUNE, INCIDENT COMMAND		
3. **From** (Name and Position): JACOB CREE, COML T-2		
4. **Subject:** RADIO CACHE	5. **Date:** 10/12/16	6. **Time:** 09:57

7. **Message:**

ORDER 24 800 MGH ~~RAS~~ AGLIMER PORTABLES W/ CHARGERS AND CACHE SPECIALIST TO ICP 1500 SE 7 AVE BY 12:15 10/12/16

(612) 751-9705

8. **Approved by:** JACOB CREE Signature: [signature] Position/Title: COML

9. **Reply:**

10. **Replied by:** Position/Title: Signature:

ICS 213	**Date/Time:**

ICS Form 213 General Message

1. **Incident Name** (Optional): TRAIN			
2. **To** (Name and Position): MOLDUNK INCIDENT COMMAND			
3. **From** (Name and Position): JACOB CREE COML T-2			
4. **Subject:** RUNNER	5. **Date:** 10/12/16	6. **Time:** 10:00	

7. Message:

ORDER 1 RUNNER TO STATE PATROL COMMAND VEHICLE
BY 12:00 10/12/16

(612) 757-9705

8. **Approved by:** JACOB CREE Signature: [signature] Position/Title: COML T-2

9. Reply:

10. Replied by: Position/Title: Signature:

ICS 213 **Date/Time:**

GENERAL MESSAGE (ICS 213)

1. Incident Name (Optional): TRAIN

2. To (Name and Position): LOGISTICS SECTION CHIEF

3. From (Name and Position): JACOB CASE

4. Subject: COM-T T-2

5. Date: 10/12/16

6. Time HHMM 5

7. Message:

ORDERING 1 COM-T TO THE STATE PATROL COMMAND VEHICLE BY 13:30 10/12/16. MUST BE SELF-SUFFICIENT FOR 48 HRS.

(612) 751-9705

8. Approved by: Name: JACOB CASE Signature: _____ Position/Title: COM-L T-2

9. Reply:

10. Replied by: Name: Position/Title: Signature: _____

ICS 213 Date/Time: Date

GENERAL MESSAGE (ICS 213)

1. Incident Name (Optional): TRAIN

2. To (Name and Position): [redacted] LOGISTICS SECTION CHIEF

3. From (Name and Position): JACOB CARR COML T-2

4. Subject: RADIO CACHE DEMOB.

5. Date: 10/02/16

6. Time 1414

7. Message:

THE PREVIOSLY ORDERED RADIO CACHE IS NO LONGER NEEDED BY THIS UNIT. RETURNING 24 RADIOS, CHARGERS, AND RADIO SPECIALIST.

(612) 751-9705

8. Approved by: Name: JACOB CARR Signature: [signature] Position/Title: COML T-2

9. Reply:

10. Replied by: Name: Position/Title: Signature:

ICS 213 Date/Time: Date

ICS Form 309 Communications Log

COMMUNICATIONS LOG	INCIDENT # 20161699	OPERATIONAL PERIOD 10/12/16 FROM: 9:15 TO: 0700 10/13/16
	INCIDENT NAME: TRAIN	

RADIO OPERATOR NAME LYNN MIHELICK	STATION I.D.

LOG

TIME	FROM	TO	SUBJECT
10:43	FD	RADO	WHERE TO STAGE/COMM CHANNEL
10:44	Sgt Bradley	RADO	SGT BRADLEY ON SCENE
10:45	301 GR	" "	WHERE IS ICP
10:47	Sgt Carlson	" "	ON SCENE - NEED LIST OF RESOURCES, TG
10:49	C2	" "	DV.B TG REFER TO IC FOR RESOURCES
10:52	~~IMT~~ IMT LOG	"SCLT" C4	BACKUP OF RADIOS
10:54	Sgt Chief	" "	TG FOR STAGING
10:56	C4	" "	C4 on scene
11:01	Sgt Sunday	" "	LE Div 1-Y Resources
11:02	Hazmat 1	" "	~~[illegible]~~ Channel
11:02	Unit 116	" "	Medical/Tow Request - turning in
11:03	Sgt Morgan	" "	List Resources
11:04	C6	" "	TG for C6
11:05	Train PW Snap on sign		TG for PW
11:06	Link C4	" "	TG for Air to Ground
11:07	SP 3101	" "	ICP ~~to~~ 20
11:08	55th CST	" "	ICP 20
11:13	Bmob. Unit leader	" "	213 Form ASAP - of excess personal

PAGE 1 OF 1 | Form 309

REV 96/02/22

ICS Form 225 INCIDENT PERSONNEL PERFORMANCE RATING

THIS RATING IS TO BE USED ONLY FOR DETERMINING AN INDIVIDUAL'S PERFORMANCE ON AN INCIDENT/EVENT

1. Name:	2. Incident Name:	3. Incident Number:
LYNN MIHELICK	TRAIN	2016 1699

4. Home Unit Name and Address:	5. Incident Agency and Address:
AMATEUR RADIO	TRAIN DERAILMENT EXERCISE 1500 FAU SE

6. Position Held on Incident:	7. Date(s) of Assignment:	8. Incident Complexity Level:	9. Incident Definition:
RADO	From: 10/12/16 To: 10/13/16	☐ 1 ☐ 2 ☑ 3 ☐ 4 ☐ 5	TRAIN DERAILMENT EXER.

10. Evaluation

Rating Factors	N/A	1 – Unacceptable	2	3 – Met Standards	4	5 – Exceeded Expectations
11. Knowledge of the Job/ Professional Competence: Ability to acquire, apply, and share technical and administrative knowledge and skills associated with description of duties. (Includes operational aspects such as marine safety, seamanship, airmanship, SAR, etc., as appropriate.)	☐	Questionable competence and credibility. Operational or specialty expertise inadequate or lacking in key areas. Made little effort to grow professionally. Used knowledge as power against others or bluffed rather than acknowledging ignorance. Effectiveness reduced due to limited knowledge of own organizational role and customer needs. ☐	☐	Competent and credible authority on specialty or operational issues. Acquired and applied excellent operational or specialty expertise for assigned duties. Showed professional growth through education, training, and professional reading. Shared knowledge and information with others clearly and simply. Understood own organizational role and customer needs. ☑	☐	Superior expertise; advice and actions showed great breadth and depth of knowledge. Remarkable grasp of complex issues, concepts, and situations. Rapidly developed professional growth beyond expectations. Vigorously conveyed knowledge, directly resulting in increased workplace productivity. Insightful knowledge of own role, customer needs, and value of work. ☐
12. Ability To Obtain Performance/Results: Quality, quantity, timeliness, and impact of work.	☐	Routine tasks accomplished with difficulty. Results often late or of poor quality. Work had a negative impact on department or unit. Maintained the status quo despite opportunities to improve. ☐	☐	Got the job done in all routine situations and in many unusual ones. Work was timely and of high quality; required same of subordinates. Results had a positive impact on IMT. Continuously improved services and organizational effectiveness. ☑	☐	Maintained optimal balance among quality, quantity, and timeliness of work. Quality of own and subordinates' work surpassed expectations. Results had a significant positive impact on the IMT. Established clearly effective systems of continuous improvement. ☐
13. Planning/ Preparedness: Ability to anticipate, determine goals, identify relevant information, set priorities and deadlines, and create a shared vision of the Incident Management Team (IMT).	☐	Got caught by the unexpected; appeared to be controlled by events. Set vague or unrealistic goals. Used unreasonable criteria to set priorities and deadlines. Rarely had plan of action. Failed to focus on relevant information. ☐	☐	Consistently prepared. Set high but realistic goals. Used sound criteria to set priorities and deadlines. Used quality tools and processes to develop action plans. Identified key information. Kept supervisors and stakeholders informed. ☑	☐	Exceptional preparation. Always looked beyond immediate events or problems. Skillfully balanced competing demands. Developed strategies with contingency plans. Assessed all aspects of problems, including underlying issues and impact. ☐
14. Using Resources: Ability to manage time, materials, information, money, and people (i.e., all IMT components as well as external publics).	☐	Concentrated on unproductive activities or often overlooked critical demands. Failed to use people productively. Did not follow up. Mismanaged information, money, or time. Used ineffective tools or left subordinates without means to accomplish tasks. Employed wasteful methods. ☐	☐	Effectively managed a variety of activities with available resources. Delegated, empowered, and followed up. Skilled time manager, budgeted own and subordinates' time productively. Ensured subordinates had adequate tools, materials, time, and direction. Cost conscious, sought ways to cut waste. ☑	☐	Unusually skilled at bringing scarce resources to bear on the most critical of competing demands. Optimized productivity through effective delegation, empowerment, and follow-up control. Found ways to systematically reduce cost, eliminate waste, and improve efficiency. ☐
15. Adaptability/Attitude: Ability to maintain a positive attitude and modify work methods and priorities in response to new information, changing conditions, political realities, or unexpected obstacles.	☐	Unable to gauge effectiveness of work, recognize political realities, or make adjustments when needed. Maintained a poor outlook. Overlooked or screened out new information. Ineffective in ambiguous, complex, or pressured situations. ☐	☑	Receptive to change, new information, and technology. Effectively used benchmarks to improve performance and service. Monitored progress and changed course as required. Maintained a positive approach. Effectively dealt with pressure and ambiguity. Facilitated smooth transitions. Adjusted direction to accommodate political realities. ☐	☐	Rapidly assessed and confidently adjusted to changing conditions, political realities, new information, and technology. Very skilled at using and responding to measurement indicators. Championed organizational improvements. Effectively dealt with extremely complex situations. Turned pressure and ambiguity into constructive forces for change. ☐
16. Communication Skills: Ability to speak effectively and listen to understand. Ability to express facts and ideas clearly and convincingly.	☐	Unable to effectively articulate ideas and facts; lacked preparation, confidence, or logic. Used inappropriate language or rambled. Nervous or distracting mannerisms detracted from message. Failed to listen carefully or was too argumentative. Written material frequently unclear, verbose, or poorly organized. Seldom proofread. ☐	☐	Effectively expressed ideas and facts in individual and group situations; nonverbal actions consistent with spoken message. Communicated to people at all levels to ensure understanding. Listened carefully for intended message as well as spoken words. Written material clear, concise, and logically organized. Proofread conscientiously. ☑	☐	Clearly articulated and promoted ideas before a wide range of audiences; accomplished speaker in both formal and extemporaneous situations. Adept at presenting complex or sensitive issues. Active listener; remarkable ability to listen with open mind and identify key issues. Clearly and persuasively expressed complex or controversial material, directly contributing to stated objectives. ☐

INCIDENT PERSONNEL PERFORMANCE RATING (ICS 225)

Name: LYNN MIHALEK	2. Incident Name: TRAIN	3. Incident Number: 20161699

10. Evaluation

Rating Factors	N/A	1 – Unacceptable	2	3 – Met Standards	4	5 – Exceeded Expectations
17. Ability To Work on a Team: Ability to manage, lead and participate in teams, encourage cooperation, and develop esprit de corps.	☐	Used teams ineffectively or at wrong times. Conflicts mismanaged or often left unresolved, resulting in decreased team effectiveness. Excluded team members from vital information. Stifled group discussions or did not contribute productively. Inhibited cross functional cooperation to the detriment of unit or service goals. ☐	☐	Skillfully used teams to increase unit effectiveness, quality, and service. Resolved or managed group conflict, enhanced cooperation, and involved team members in decision process. Valued team participation. Effectively negotiated work across functional boundaries to enhance support of broader mutual goals. ☑	☐	Insightful use of teams raised unit productivity beyond expectations. Inspired high level of esprit de corps, even in difficult situations. Major contributor to team effort. Established relationships and networks across a broad range of people and groups, raising accomplishments of mutual goals to a remarkable level. ☐
18. Consideration for Personnel/Team Welfare: Ability to consider and respond to others' personal needs, capabilities, and achievements; support for and application of worklife concepts and skills.	☐	Seldom recognized or responded to needs of people; left outside resources untapped despite apparent need. Ignorance of individuals' capabilities increased chance of failure. Seldom recognized or rewarded deserving subordinates or other IMT members. ☐	☐	Cared for people. Recognized and responded to their needs; referred to outside resources as appropriate. Considered individuals' capabilities to maximize opportunities for success. Consistently recognized and rewarded deserving subordinates or other IMT members. ☑	☐	Always accessible. Enhanced overall quality of life. Actively contributed to achieving balance among IMT requirements and professional and personal responsibilities. Strong advocate for subordinates; ensured appropriate and timely recognition, both formal and informal. ☐
19. Directing Others: Ability to influence or direct others in accomplishing tasks or missions.	☑	Showed difficulty in directing or influencing others. Low or unclear work standards reduced productivity. Failed to hold subordinates accountable for shoddy work or irresponsible actions. Unwilling to delegate authority to increase efficiency of task accomplishment. ☐	☐	A leader who earned others' support and commitment. Set high work standards; clearly articulated job requirements, expectations, and measurement criteria; held subordinates accountable. When appropriate, delegated authority to those directly responsible for the task. ☐	☐	An inspirational leader who motivated others to achieve results not normally attainable. Won people over rather than imposing will. Clearly articulated vision; empowered subordinates to set goals and objectives to accomplish tasks. Modified leadership style to best meet challenging situations. ☐
20. Judgment/Decisions Under Stress: Ability to make sound decisions and provide valid recommendations by using facts, experience, political acumen, common sense, risk assessment, and analytical thought.	☐	Decisions often displayed poor analysis. Failed to make necessary decisions, or jumped to conclusions without considering facts, alternatives, and impact. Did not effectively weigh risk, cost, and time considerations. Unconcerned with political drivers on organization. ☐	☐	Demonstrated analytical thought and common sense in making decisions. Used facts, data, and experience, and considered the impact of alternatives and political realities. Weighed risk, cost, and time considerations. Made sound decisions promptly with the best available information. ☑	☐	Combined keen analytical thought, an understanding of political processes, and insight to make appropriate decisions. Focused on the key issues and the most relevant information. Did the right thing at the right time. Actions indicated awareness of impact of decisions on others. Not afraid to take reasonable risks to achieve positive results. ☐
21. Initiative Ability to originate and act on new ideas, pursue opportunities to learn and develop, and seek responsibility without guidance and supervision.	☐	Postponed needed action. Implemented or supported improvements only when directed to do so. Showed little interest in career development. Feasible improvements in methods, services, or products went unexplored. ☐	☐	Championed improvement through new ideas, methods, and practices. Anticipated problems and took prompt action to avoid or resolve them. Pursued productivity gains and enhanced mission performance by applying new ideas and methods. ☑	☐	Aggressively sought out additional responsibility. A self-learner. Made worthwhile ideas and practices work when others might have given up. Extremely innovative. Optimized use of new ideas and methods to improve work processes and decisionmaking. ☐
22. Physical Ability for the Job: Ability to invest in the IMT's future by caring for the physical health and emotional well-being of self and others.	☐	Failed to meet minimum standards of sobriety. Tolerated or condoned others' alcohol abuse. Seldom considered subordinates' health and well-being. Unwilling or unable to recognize and manage stress despite apparent need. ☐	☐	Committed to health and well-being of self and subordinates. Enhanced personal performance through activities supporting physical and emotional well-being. Recognized and managed stress effectively. ☑	☐	Remarkable vitality, enthusiasm, alertness, and energy. Consistently contributed at high levels of activity. Optimized personal performance through involvement in activities that supported physical and emotional well-being. Monitored and helped others deal with stress and enhance health and well-being. ☐
23. Adherence to Safety: Ability to invest in the IMT's future by caring for the safety of self and others.	☐	Failed to adequately identify and protect personnel from safety hazards. ☐	☐	Ensured that safe operating procedures were followed. ☑	☐	Demonstrated a significant commitment toward safety of personnel. ☐

24. Remarks:

25. Rated Individual (This rating has been discussed with me):
Signature: [signature] Date/Time:

26. Rated by: Name: Jacob Cree Signature: [signature]
Home Unit: Hennepin EMS Position Held on This Incident: COMC
ICS 225 Date/Time: 10/12/16 11:33

Bob Beem

Minnesota COML Team
Metro Region Communications Unit Leader
Type III COML CERTIFICATION CHECK OFF

The following items checked are included in this packet

☒ All Prerequisite Training Completed

- ☒ ICS 700 (Printout attached)
- ☒ ICS 800 (Printout attached)
- ☒ ICS 100 (a or b) (Printout attached)
- ☒ ICS 200 (Printout attached)
- ☒ ICS 300 (Printout attached)

If you are part of the Minnesota training Website, A print of the HSEM Certification Record Completed courses main page with the above courses listed will be sufficient.

☒ Copy of Certificate from COML training

☒ Agency Certification (attached)

☒ Completed Task Book (with evaluator reviews)

☒ Copy of an Incident Action Plan, Incident Communications Plan, or After Action Plan (only one needed)

☒ Final Evaluator Certification (attached)

☒ Regional Interoperability Coordinator review

_____ (Signature)

Troy Tretter (Printed Name)

☐ Regional Radio Board – Technical Operations Committee Review

_____ (Chair of Radio-TOC Signature)

Scott Haas (Printed Name)

☐ Statewide Interoperability Program Manager Review

_____ (Statewide Interoperability Program Manager Signature)

Jim Stromberg (Printed Name)

MESB

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

ROBERT M BEEM JR

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00700.a
National Incident Management System (NIMS)
An Introduction

Issued this 21st Day of January, 2016

0.3 IACET CEU

Tony Russell
Superintendent
Emergency Management Institute

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

ROBERT M BEEM JR

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00800.b
National Response Framework, An Introduction

Issued this 3rd Day of June, 2015

0.3 IACET CEU

Tony Russell
Superintendent
Emergency Management Institute

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

ROBERT M BEEM JR

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00100.b
Introduction to Incident Command System
ICS-100

Issued this 4th Day of June, 2015

Tony Russell
Superintendent
Emergency Management Institute

0.3 IACET CEU

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

ROBERT M BEEM JR

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00200.b
ICS for Single Resources and
Initial Action Incident, ICS-200

Issued this 27th Day of July, 2015

0.3 IACET CEU

Tony Russell
Superintendent
Emergency Management Institute

On Target Training
& Consulting, LLC.

TOMORROW'S SOLUTIONS TODAY

Certificate of Completion

is hereby granted to

Robert Beem

All-Hazard Communication Unit Leader

Course – L-969

Granted: August 8-10, 2016

Steven C Olson
Steven C. Olson
On Target Training
& Consulting, LLC

FEMA

National Fire Academy

Robert Merle Beem

is awarded this certificate in recognition of completion
of the NFA State/Local Partner-Sponsored Training

ICS 300, Intermediate ICS for Expanding
Incidents for Operational First Responders
St Paul, Minnesota

March 2 - 4, 2016

(Acting)
Superintendent
National Fire Academy

This course meets the NIMS requirements for ICS-300.

Wiland ASSOCIATES LLC
Advancing Proactive Incident Management

Certificate of Completion

is hereby granted to

Bob Beem

United States Fire Administration

O-305 – Type 3 IMT Course

Granted: April 22, 2016

Bill Miller
Wiland Associates LLC

Stephen Foley
Wiland Associates LLC

Homeland Security

ALL-HAZARDS COMMUNICATIONS UNIT LEADER (COML)

Position Task Book

Task Book Assigned To:

Trainee's Name: ROBERT BEEM

Home Unit/Agency: HENNEPIN COUNTY SHERIFFS OFFICE

Home Unit Phone Number: 612-596-1957

Task Book Initiated By:

Official's Name: _____

Home Unit Title: _____

Home Unit/Agency: _____

Home Unit Phone Number: _____

Home Unit Address: _____

Date Initiated: _____

Version 2.1
November 2014

VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK FOR THE POSITION OF ALL- HAZARDS COMMUNICATIONS UNIT LEADER (COML)

FINAL EVALUATOR'S VERIFICATION

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

Final Evaluators Signature _____ Date 2/23/17

Printed Name JOHN GUNDERSEN Agency HENNEPIN CO SHER. OFFICE

Phone Number 612-596-1921 Email JOHN.GUNDERSEN@HENNEPIN.US

AGENCY CERTIFICATION

I certify that ROBERT BEEM
has met all requirements for qualification in this position and that such qualification has been issued.

Certifying Official's Signature _____ Date 2/17/17

Printed Name JOHN GUNDERSEN Agency HENNEPIN CO SHERIFFS OFFICE

Title RADIO SYSTEMS MANAGER Phone Number 612-596-1921

HISTORICAL RECOGNITION

Historical recognition is a process that provides a means by which incident management personnel who have either:

- Documentation of previous ICS training, education, and experience in an ICS position(s); or
- Documentation of previous extensive on-the-job incident response experience,

may receive credit for that previous experience, training, or qualification(s) and be considered as meeting the minimum requirements of this guide in the categories of:

- Education;
- Training; and
- Experience,

for an ICS position(s) until they have successfully completed the actual minimum requirements for that position. Historical Recognition does not apply to the categories of Physical/Medical Fitness, Currency, or certification. The minimum requirements within those categories must be met regardless of any historical recognition process.

HISTORICAL RECOGNITION PROCESS

If an Authority Having Jurisdiction (AHJ) does not form a Qualifications Committee to assist with the management of the overall qualifications process, AHJ's should give strong consideration to at least forming a committee for the purposes of reviewing and processing applications for Historical Recognition. Because of the time commitment involved and the potential for perceptions of favoritism and unequal treatment during the process, other ICS qualifications processes currently used by Federal and State agencies that included a historical recognition provision used review committees to accomplish that process.

The AHJ should develop a process to provide for the following:

- Developing a method to provide for historical recognition when there is sufficient documentation available to substantiate the experience;
- Developing a standardized method for any individual to submit documentation of the experience and training for review by the AHJ or the appropriate review committee established by the AHJ;
- Developing a method to determine if the previous experience or training is appropriate for the position, keeping in mind the required criteria for the position and the competencies necessary for safe and successful performance;
- Providing for Historical Recognition only when the individual has most recently performed the position within the last five years;
- Requiring the individual meet all minimum requirements in this guide for a position if the individual seeks an ICS position other than the position they were historically recognized for;
- Encouraging all individuals who are historically recognized into a position to complete the minimum requirements for the positions within five years of being historically recognized.

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 authority having jurisdiction to certify that the person to whom the task book belongs meets the standards recommended by the National (NIMS) 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 an evaluator, will result in a recommendation 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. 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 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 to 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 certification.
   - 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. Dating and initialing completion of the task shall document satisfactory performance. Unsatisfactory performance shall be documented in the Record of Evaluation.
- Completing the Record of Evaluation 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:
   - Issuing the PTB to document task performance.
   - Explaining to the trainee the purpose and processes of the PTB, as well as the trainee's responsibilities.
   - 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.

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Competency 1: General

Task	Code	Evaluator # and Initials	Date
1. Obtain and assemble information and materials needed for a response kit prior to receiving an assignment, including critical items needed for the assignment and items needed for functioning during the first 48 hours. The following items are suggested as basic information and materials kept in a go bag: **Reference Materials** • 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 Operation Guide (NIFOG). • COML Mobilization Guide (specific to locality). **Supplies** • Pads of paper, pencils, pens, and tape. • Portable radio(s) as appropriate for the region. • Personal items (including medicine and cash), food and beverage to be self-sustained for 48 hours or more. • Radio programming equipment (cloning cable or computer), adapters, and suitable tools. • GPS. • First-aid kit. • 24-hour clock. • Multi-purpose knife.	O	#2 - [illegible]	2/17/17

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
2. Establish and maintain positive interpersonal and interagency working relationships. • 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.	O	#1 KAR	10/26/16
3. Provide for the safety and welfare of assigned personnel during the entire period of supervision. • Recognize potentially hazardous situations. • Inform subordinates of hazards. • Provide safety and identifying equipment, such as vests identifying the communication's function, flashlights, and glow sticks. • Ensure that 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	#1 KAR	10/26/16

Competency 2: Mobilization

Task	Code	Evaluator # and Initials	Date
4. Obtain complete information from the public safety communications center(s) serving the area and incident upon initial activation, including: • 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	#1 KAR	10/26/16

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Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
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: • Frequencies and/or talkgroups 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	#1 KAR	10/26/16
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	#1 KAR	10/26/16
7. Arrive at incident and check in. Arrive properly equipped at the assigned incident location within acceptable time limits.	I	#1 KAR	10/26/16
8. Obtain briefing from supervisor. Examples of briefing items are: • Work space. • Work schedule. • Policies and operating procedures. • Current resource commitments and expectations. • Current situation. • Expected duration of assignment. • Special needs. This list is not all inclusive; COML is responsible for asking adequate questions.	I	#1 KAR	10/26/16
9. Receive Incident Action Plan (IAP) or Incident Briefing Form (ICS Form 201), if developed. Determine support needs to meet the IAP.	I	#1 KAR	10/26/16
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	#1 KAR	10/26/16

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Task	Code	Evaluator # and Initials	Date
11. Evaluate needs and order supplies, materials, and personnel to keep unit operating. • 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 or additional interoperability resources that may be needed. • Assess current tactical communications equipment needs such as power sources for extended operations.	I	#1 KAR	10/26/16
12. Organize and supervise unit. • 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	#1 KAR	10/26/16
13. Participate in incident planning meetings as the technical expert for communications needs. • 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	#1 KAR	10/26/16

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Task	Code	Evaluator # and Initials	Date
14. Design communications systems to meet incident operational needs. • 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, microwave) and 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	#1 KAR	10/26/16
15. Install communications equipment. • Obtain equipment from supply unit, if one exists and/or from authorized sources. • Provide for the installation of and test all components of the communications equipment to ensure the incident's systems are operational, for example: - 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 or program radios as necessary and authorized.	I	#1 KAR	10/26/16

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Task	Code	Evaluator # and Initials	Date
16. Assign communications equipment. • 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	#1 KAR	10/26/16
17. Establish Incident Communications Center (ICC). • 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	#1 KAR	10/26/16
18. Manage operations of the ICC. • Document radio/telephone activities on appropriate forms. • Set up filing system for ICC documentation. • Direct radio/telephone traffic to proper destinations. • Establish notification procedures for emergency messages. • Identify system problems, both technical and operational, and determine appropriate solutions. • Follow established routing procedures for messages.	I	#1 KAR	10/26/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Task	Code	Evaluator # and Initials	Date
19. Coordinate frequencies, activities, and resources with communications resource coordinators outside of the incident. • Contact communications coordinators and notify them of incident frequency, talkgroup, 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	#1 KAR	10/26/16
20. Notify appropriate local, county, regional, State and/or Federal agencies on adjacent incident(s) of system design and frequency allocations.	I	#1 KAR	10/26/16
21. Initiate and maintain accurate records of all communications equipment • 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	#1 KAR	10/26/16
22. Perform operational tests of communications systems throughout the duration of the incident. • Identify and take necessary action to accomplish minor field repair or place orders for replacement of equipment. • Monitor all gateways in use. • Plan for battery replacement. • Act decisively to minimize interruptions in system operation.	I	#1 KAR	10/26/16

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Task	Code	Evaluator # and Initials	Date
23. Interact and coordinate with appropriate unit leaders and operations personnel. • 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	#1 KAR	10/26/16
24. Identify for release any excess unit resources. Coordinate with unit managers and provide a list of excess personnel and facilities. List will include: • 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	#1 KAR	10/26/16
25. Maintain ICS Unit Log. Unit Log will be kept current, legible, and will document all major activities, which may include: • Equipment locations. • Medical evacuations. • Personnel changes.	I	#2	2/17/17
26. Evaluate performance of subordinates as required by agency policy and/or permitted by agreement. • Discuss performance evaluations with individual(s). • Maintain accuracy and fairness. • List training if needed or desired.	I	#2	2/17/17

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Competency 3: Demobilization

Task	Code	Evaluator# Initials	Date
27. Demobilization and check out. • 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 that personnel in the unit are demobilized correctly. • Document lost equipment on agency specific forms.	I	#1 KAL	10/26/16

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
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All-Hazard Communication Unit Leader

INSTRUCTIONS FOR COMPLETING THE RECORD OF EVALUATION

There are four separate pages allowing evaluations to be made. These evaluations may be made on incidents, planned events, Full Scale Exercises (FSE), Functional Exercises (FE), 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 evaluation opportunities are needed, a page can be copied from a blank task book and attached. (Remember to change the Evaluation Record # to the next sequential number.)

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

Trainee's name and Trainee's position: Self Explanatory

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

Evaluator's agency address, e-mail address and phone: Self explanatory

Evaluation Record #: The number prepopulated in the upper left corner of the evaluation page 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 during the evaluation opportunity.

Name and Location of Incident or Situation: Identify the name of the incident (if there is one) and the location where the tasks were performed. If evaluation occurs during a short term situation rather than a named incident, list the responding agency and area.

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

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

Number and Kind of Resources: Enter how many resources of each kind assigned to the incident pertinent to the trainee's task book position. (e.g. 2 mobile communications vehicles)

Duration: Enter inclusive dates during which the trainee was evaluated. If evaluation occurs during a short term situation, enter date and start and end time of evaluation. (e.g. 11/1/14 to 11/4/14)

Management Level or Complexity Level: Indicates ICS organization level, i.e., Type 5, Type 4, Type 3, Type 2, Type 1, Area Command.

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: Evaluator initials here to authenticate their recommendations and to allow for comparison with initials in the Qualifications Record.

Evaluator's relevant rating: Evaluator lists their certification relevant to the trainee position they supervised.

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RECORD OF EVALUATION

Robert Beem — **TRAINEE NAME**

COML — **TRAINEE POSITION**

Evaluation Record #1	Evaluator's name: Keith A. Ruffing	Evaluator's Title: ~~COML~~ Police officer	Evaluator's Agency: St. Peter PD
Evaluator's agency address: 207 S. Front St. St. Peter, MN 56082			
Evaluator's e-mail: keithr@saintpeterma.gov			Phone: 507-931-1550

Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Kind of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Complexity Level
MN-St. Peter	Tornado	1 MCV	10/26/16	Type 3

The tasks initialed & 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:

_____ The individual has successfully performed all tasks for the position and should be considered for certification.

__X__ 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 & knowledge and skills needed) prior to additional assignment(s) as a Trainee.

Comments: Needs to be a little more prepared w/ ICS forms & accuracy in completing.

Date: 10/26/16 Evaluator's initials: ~~COML~~ KAR

Evaluator's relevant agency certification or rating: COML

RECORD OF EVALUATION

ROBERT BEEM — **TRAINEE NAME**

COML — **TRAINEE POSITION**

Evaluation Record #2	Evaluator's name: JOHN GUNDERSON	Evaluator's Title: COM-L	Evaluator's Agency: KENNEDY CO SVCE OFFICE
Evaluator's agency address:	1245 SHENANDOAH LA PLYMOUTH MN 55447		
Evaluator's e-mail:	JOHN.GUNDERSON@KENNEDY.MS		Phone: 612-596-1921

Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Kind of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Complexity Level

The tasks initialed & 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:

__✓__ 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 needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.

Comments: _____

Date: 2/17/17 Evaluator's initials: JG

Evaluator's relevant agency certification or rating: COML

METRO REGION
800 MHz Trunked Regional Public Safety Radio System
Standards, Protocols, Procedures

Document Section: Sub-Section: Procedure Title: Date Established: Replaces Document Dated: Date Revised:	**3. Interoperability Guidelines** **METRO 3.17.5** **Criteria for Certification as an Incident Tactical Dispatcher (INTD)**	Radio TOC Recommendation Date: 03/22/17 MESB Approval - Signature:

1. Purpose or Objective

The intent of this standard is to establish protocols and procedures to be used for certification and re-certification of Incident Tactical Dispatcher (INTD) in Minnesota.

2. Background:

During all-hazards emergency response operations, communications among multiple jurisdictions and disciplines, including emergency medical, fire, and law enforcement services, is essential. Unfortunately, the absence of on-scene communications coordination has often compromised critical operations. To close this capability gap, the Department of Homeland Security's (DHS) Office of Emergency Communications (OEC) in partnership with the Office for Interoperability and Compatibility (OIC), the Federal Emergency Management Agency (FEMA), National Integration Center (NIC), and practitioners from across the country developed performance and training standards for the all-hazards Incident Dispatcher as well as formulated a curriculum and comprehensive All-Hazards TRG-IDT course.

An INTD is a specially trained individual qualified to operate away from the dispatch center in a command post, EOC, base camp, incident scene or as mutual aid to another dispatch center. INTD's leverage the multi-tasking, communication, accountability and documentation skills of successful telecommunicators to provide public safety communications expertise and support at planned events, exercises and extended incidents. INTD's may support the communication unit as a single resource or as part of an incident dispatch team or full COMU.

As representatives of the Minnesota public safety community complete INTD, the federal government has left it up to each state as to determine how the INTD will be certified. This standard will lay out the certification process for Minnesota. An INTD will by default meet all criteria to be considered a RADO for the purpose of the Communications Unit (COMU). No further training will be required. However, to receive certification, the INTD must complete the RADO task book and follow State Standard 3.17.6 to be certified.

3. Recommended Procedure:

The following procedure shall be followed in order to be initially certified as an Incident Tactical Dispatcher and in order to be recertified:

Prerequisite Experience/Training:

- A public safety background with three years of experience in dispatch operations, or ICTAP RADO training and 1 year experience in dispatch operations.
- Completion of the ICTAP Communications Unit Awareness web-based course.
- Completion of IS-100.b, IS-144, IS-200.b, IS-700.a, and IS-800.b.
- ICS-300, Intermediate Incident Command System (ICS) for Expanding Incidents, is recommended.

Certification Process:

1. Attend and successfully complete a three-day DHS-OEC all-hazards INTD (TRG-IDT) training session taught by a DHS-OEC certified IDT instructor. Experienced Incident Dispatchers that can demonstrate successful completion of incident dispatcher (IDT) training from outside sources, shall be recognized and considered as having fulfilled this requirement.
2. Complete the INTD Task Book by demonstrating satisfactory performance of each of the tasks as witnessed by qualified evaluator(s) within three years of INTD training. It is acceptable to use an incident that occurred up to three years prior to the INTD training. (See attachment "A" Evaluation Form). Experienced Incident Dispatchers, previously trained before the formal DHS-OEC TRG-IDT was available can use tasks completed since recognized IDT training was completed.
3. Participate as an Incident Tactical Dispatcher in at least one NIMS Type III training drill, functional exercise, full scale exercise, incident or preplanned event. Provide a copy of one of the following: (1) Incident Action Plan; (2) Incident Communications Plan; or (3) After Action Report.
4. Obtain the "Final Evaluator's Verification" from one of the following: (1) A NIMS trained COML; (2) A Designated Agency Head; or (3) An Incident Commander. (See attachment "D" Verification / Certification of completed task book Form)
5. Obtain "Agency Certification" from the Designated Agency Head employing the candidate indicating that the candidate has met all qualifications for IDT certification. (See attachment "C" Agency Certification Form)
6. Submit the signed-off Task Book, NIMS course certificates (a printout from the Homeland Security Emergency Management (HSEM) training repository will suffice) and copies of relevant IAPs, ICPs, and AARs to your Regional Interoperability Coordinator (RIC). For the Metropolitan Emergency Services Board (MESB) Region, the documents will be submitted to the Regional Radio Services Coordinator and be brought before the MESB Radio Technical Operations Committee (RTOC) for approval.
7. The RIC or the Regional Radio Services Coordinator will review the qualification documents to make sure they meet the requirements set forth in this certification process. They will then go before the Regional Advisory Committee (RAC), Regional

Radio Board (RRB), Emergency Services Board (ESB) or the MESB RTOC, presenting the INTD candidate's credentials to request a resolution that the COMT candidate be recommended to the Statewide Interoperability Program Manager for final review and certification. (See attachment "B," check-off template.)

8. The Statewide Interoperability Program Manager will review the qualification documents, copy the Task Book and relevant documents for filing and sign off on the original Task Book and return it to the INTD. This will serve as State Certification of the INTD and will be good for three years. (Submitting these documents by mail is acceptable. If the documents are lost, a copy will be deemed the original and marked as such).

RECERTIFICATION

Submission of Attachment E, along with a dated ICS 205 or AAR will recertify the participant for three years from their previous certification date. If these items are not available, Attachment E, along with a letter signed by an active incident COML or the event or exercise planner indicating the candidate acted in the role of a INTD during an event will be sufficient for recertification.

Once the candidate has participated in an acceptable function and submits the necessary paperwork for recertification, their renewal month and date remains the same as their original certification date unless other arrangements have been made.

It is the candidate's responsibility to provide the appropriate paperwork to the Emergency Communication Networks' (ECN) Standards & Training Coordinator for recertification prior to their certification expiration date.

ECN's Standards & Training Coordinator may send out a reminder at least six months in advance notifying each candidate that they are coming up for recertification if no paperwork has been submitted for renewal within that three-year period.

4. Management

The Statewide Interoperability Program Manager will manage the INTD certification and recertification process in Minnesota.

1. All certifications will be recorded and kept on file by the Emergency Communication Networks' (ECN) Standards & Training Coordinator. A list of certified INTDs with their certification expiration date will be maintained on the Statewide Emergency Communications Board (SECB) website under the ARMER tab.

This form must be filled out by evaluators, when sign offs are done for INTD Task book

Evaluation # 1 - ?? (write over)	Name of Evaluator:	Title:	Agency:
Evaluator's Address			

Name & Location of Incident - Agency and Area	Kind of Incident	Number and Type of Communication Resources	Duration of Incident	Management Level or Complexity Level

Name of Trainee_____

- ☐ **The tasks initialed & 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.**
- ☐ **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 needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a trainee.**

Recommendations:_____

Date:_____ **Evaluator's initials:**_____

Evaluator's relevant agency certification` rating:_____

Attachment A

Minnesota COML Team
Metro Region Incident Tactical Dispatcher (INTD) CERTIFICATION CHECK OFF

The following items checked are included in this packet

☐ All Prerequisite Training Completed

- ☐ ICS 100 (Printout attached)
- ☐ ICS 200 (Printout attached)
- ☐ ICS 300 (Printout attached)
- ☐ ICS 700 (Printout attached)
- ☐ ICS 800 (Printout attached)
- ☐ ICS 144 (Printout attached)

If you are part of the Minnesota training Website, A print of the HSEM Certification Record Completed courses main page with the above courses listed will be sufficient.

☐ Copy of Certificate from INTD training

☐ Agency Certification (attached)

☐ Completed Task Book (with evaluator reviews)

☐ Copy of an Incident Action Plan, Incident Communications Plan, or After Action Plan (only one needed)

☐ Final Evaluator Certification (attached)

☐ Regional Interoperability Coordinator review

_____ **Troy Tretter**
(Signature) (Printed Name)

☐ Regional Radio Board – Technical Operations Committee Review

_____ **Scott Haas**
(Chair of Radio-TOC Signature) (Printed Name)

☐ Statewide Interoperability Program Manager Review

_____ **Jim Stromberg**
(Statewide Interoperability Program Manager Signature) (Printed Name)

MESB

VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK
FOR THE POSTION OF INTD (All Hazards)

Agency Certification

I certify that _____ has met all requirements for qualifications in this position and that such qualification has been issued.

Certifying Official's Signature _____ Date_____

Printed Name _____ Agency _____

Title _____ Phone Number _____

Pre Qualifications for INTD Training are but not limited to:

- **A public safety communications background with exposure to field operations; this experience should be validated by the authority who supervised the student.**
- **Fundamental public safety communications technology, supervisory, and personnel management skills. These must be validated by the authority who supervised the student and include, but are not limited to:**
    - **Knowledge of local communications systems**
        - **Frequencies and spectrum**
        - **Technologies**
    - **Knowledge of local topography**
    - **Knowledge of system site locations**
    - **Knowledge of local, regional, and state communications plans**
    - **Knowledge of local and regional Tactical Interoperable Communications Plans, if available**
    - **Knowledge of local, regional and national communications and resource contacts**
- **Completion of the following training courses:**
    - **IS-700, IS-800b, ICS-100, ICS-200, and ICS-300, ICS-144**

TO BE ATTACHED TO COMPLETED INTD (ALL HAZARDS) TASK BOOK

VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK
FOR THE POSTION OF TYPE III INTD (All Hazards)

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 certification in this position.

Final Evaluators Signature _____ Date_____

Printed Name _____ Agency _____

Highest NIMS Qualification _____

Phone Number _____ email address _____

Compiled training information:

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 the inclusive dated during which the trainee was evaluated.

Management Level or Fire Complexity Level: _____
Indicates ICS organization level, i.e., Type 5, Type 4, Type 3, Type 2, Type 1, Area Command.

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 Qualification Record.

To be attached to completed Type III INTD (All Hazards) Task Book

METRO REGION
800 MHz Trunked Regional Public Safety Radio System
Standards, Protocols, Procedures

Document Section: Sub-Section: Procedure Title: Date Established: Replaces Document Dated: Date Revised:	**3. Interoperability Guidelines** **METRO 3.17.6** **Criteria for Certification as a Radio Operator (RADO)**	Radio TOC Recommendation Date: 03/22/17 MESB Approval - Signature:

1. Purpose or Objective

The intent of this standard is to establish protocols and procedures to be used for certification and re-certification of the Radio Operator (RADO) in the Metro Region of Minnesota.

2. Background:

During all-hazards emergency response operations, communications among multiple jurisdictions and disciplines, including emergency medical, fire, and law enforcement services, is essential. Unfortunately, the absence of on-scene communications coordination has often compromised critical operations. To close this capability gap, the Department of Homeland Security's (DHS) Office of Emergency Communications (OEC) in partnership with the Office for Interoperability and Compatibility (OIC), the Federal Emergency Management Agency (FEMA), National Integration Center (NIC), and practitioners from across the country developed performance and training standards for the all-hazards Radio Operator (RADO) as well as formulated a curriculum and comprehensive All-Hazards TRG-RADO course.

The responsibilities of an All-Hazard RADO includes support staffing for the Incident Communications Center, monitoring radio traffic and base station operations for emergency operations centers, hospitals, dispatch centers and non-governmental organizations supporting civil emergency response at the state, local or regional level. The RADO position, in contrast to the Incident Tactical Dispatcher, is designed for emergency response professionals and support personnel in all disciplines who have a basic understanding of the all-hazard ICS communications unit. Experienced dispatch personnel should consider the more comprehensive RADO position.

As representatives of the Minnesota public safety community complete RADO, the federal government has left it up to each state as to determine how the RADO will be certified. This standard will lay out the certification process for Minnesota.

3. Recommended Procedure:

The following procedure shall be followed in order to be initially certified as a RADO, and in order to be recertified:

Prerequisite Experience/Training:

- Awareness of fundamental public safety communications technology
- Completion of the OEC Communications Unit Awareness web-based course
- Completion of IS-100.b, IS-200.b, IS-700.a, and IS-800.b

Certification Process:

1. Attend and successfully complete a two-day DHS-OEC all-hazards RADO (TRG-RADO) training session taught by a DHS-OEC certified RADO instructor. Personnel that can demonstrate successful completion of the DHS-OEC TRG-AUXCOMM course shall be considered as having fulfilled this requirement.
2. Complete the RADO Task Book by demonstrating satisfactory performance of each of the tasks as witnessed by qualified evaluator(s) within three years of RADO training. It is acceptable to use an incident that occurred up to three years prior to the RADO training. (See attachment "A" Evaluation Form).
3. Participate as a RADO in at least one NIMS Type III training drill, functional exercise, full scale exercise, incident or preplanned event. Provide a copy of one of the following: (1) Incident Action Plan; (2) Incident Communications Plan; or (3) After Action Report.
4. Obtain the "Final Evaluator's Verification" from one of the following: (1) A NIMS trained COML; (2) A Designated Agency Head; or (3) An Incident Commander. (See attachment "D" Verification / Certification of completed task book Form)
5. Obtain "Agency Certification" from the Designated Agency Head employing the candidate indicating that the candidate has met all qualifications for RADO certification. (See attachment "C" Agency Certification Form)
6. Submit the signed-off Task Book, NIMS course certificates (a printout from the Homeland Security Emergency Management (HSEM) training repository will suffice) and copies of relevant IAPs, ICPs, and AARs to your Regional Interoperability Coordinator (RIC). For the Metropolitan Emergency Services Board (MESB) Region, the documents will be submitted to the Regional Radio Services Coordinator and be brought before the MESB Radio Technical Operations Committee (RTOC) for approval.
7. The RIC or the Regional Radio Services Coordinator will review the qualification documents to make sure they meet the requirements set forth in this certification process. They will then go before the Regional Advisory Committee (RAC), Regional Radio Board (RRB), Emergency Services Board (ESB) or the MESB RTOC, presenting the RADO candidate's credentials to request a resolution that the COMT candidate be recommended to the Statewide Interoperability Program Manager for final review and certification. (See attachment "B," check-off template.)
8. The Statewide Interoperability Program Manager will review the qualification documents, copy the Task Book and relevant documents for filing and sign off on the original Task Book and return it to the RADO. This will serve as State Certification of the RADO and will be good for three years. (Submitting these documents by mail is acceptable. If the documents are lost, a copy will be deemed the original and marked as such).

RECERTIFICATION

Submission of Attachment E, along with a dated ICS 205 or AAR will recertify the participant for three years from their previous certification date. If these items are not available, Attachment E, along with a letter signed by an active incident COML or the event or exercise planner indicating the candidate acted in the role of a RADO during an event will be sufficient for recertification.

Once the candidate has participated in an acceptable function and submits the necessary paperwork for recertification, their renewal month and date remains the same as their original certification date unless other arrangements have been made.

It is the candidate's responsibility to provide the appropriate paperwork to the Emergency Communication Networks' (ECN) Standards & Training Coordinator for recertification prior to their certification expiration date.

ECN's Standards & Training Coordinator may send out a reminder at least six months in advance notifying each candidate that they are coming up for recertification if no paperwork has been submitted for renewal within that three-year period.

4. Management

The Statewide Interoperability Program Manager will manage the RADO certification and recertification process in Minnesota.

1. All certifications will be recorded and kept on file by the Emergency Communication Networks' (ECN) Standards & Training Coordinator. A list of certified RADO's with their certification expiration date will be maintained on the Statewide Emergency Communications Board (SECB) website under the ARMER tab.

This form must be filled out by evaluators, when sign offs are done for RADO Task book

Evaluation # 1 - ?? (write over)	Name of Evaluator:	Title:	Agency:
Evaluator's Address			

Name & Location of Incident - Agency and Area	Kind of Incident	Number and Type of Communication Resources	Duration of Incident	Management Level or Complexity Level

Name of Trainee_____

- ☐ **The tasks initialed & 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.**
- ☐ **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 needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a trainee.**

Recommendations:_____

Date:_____ **Evaluator's initials:**_____

Evaluator's relevant agency certification` rating:_____

Minnesota COML Team
Metro Region Radio Operator
(RADO) CERTIFICATION CHECK OFF

The following items checked are included in this packet

☐ All Prerequisite Training Completed

- ☐ ICS 100 (Printout attached)
- ☐ ICS 200 (Printout attached)
- ☐ ICS 700 (Printout attached)
- ☐ ICS 800 (Printout attached)
- ☐ OEC Communications Unit Awareness (Web Based)

If you are part of the Minnesota training Website, A print of the HSEM Certification Record Completed courses main page with the above courses listed will be sufficient.

☐ Copy of Certificate from RADO training

☐ Agency Certification (attached)

☐ Completed Task Book (with evaluator reviews)

☐ Copy of an Incident Action Plan, Incident Communications Plan, or After Action Plan (only one needed)

☐ Final Evaluator Certification (attached)

☐ Regional Interoperability Coordinator review

_____ **Troy Tretter**
(Signature) (Printed Name)

☐ Regional Radio Board – Technical Operations Committee Review

_____ **Scott Haas**
(Chair of Radio-TOC Signature) (Printed Name)

☐ Statewide Interoperability Program Manager Review

_____ **Jim Stromberg**
(Statewide Interoperability Program Manager Signature) (Printed Name)

MESB

VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK
FOR THE POSTION OF TYPE III RADO (All Hazards)

Agency Certification

I certify that _____ has met all requirements for qualifications in this position and that such qualification has been issued.

Certifying Official's Signature _____ Date_____

Printed Name _____ Agency _____

Title _____ Phone Number _____

Pre Qualifications for RADO Training are but not limited to:

- **A public safety communications background with exposure to field operations; this experience should be validated by the authority who supervised the student.**
- **Fundamental public safety communications technology, supervisory, and personnel management skills. These must be validated by the authority who supervised the student and include, but are not limited to:**
    - **Knowledge of local communications systems**
        - **Frequencies and spectrum**
        - **Technologies**
    - **Knowledge of local topography**
    - **Knowledge of system site locations**
    - **Knowledge of local, regional, and state communications plans**
    - **Knowledge of local and regional Tactical Interoperable Communications Plans, if available**
    - **Knowledge of local, regional and national communications and resource contacts**
- **Completion of the following training courses:**
    - **RADO, IS-700, IS-800b, ICS-100, ICS-200 and OEC Communication Awareness**

TO BE ATTACHED TO COMPLETED TYPE III RADO (ALL HAZARDS) TASK BOOK

VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK
FOR THE POSTION OF TYPE III RADO (All Hazards)

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 certification in this position.

Final Evaluators Signature _____ Date_____

Printed Name _____ Agency _____

Highest NIMS Qualification _____

Phone Number _____ email address _____

Compiled training information:

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 the inclusive dated during which the trainee was evaluated.

Management Level or Fire Complexity Level: _____
Indicates ICS organization level, i.e., Type 5, Type 4, Type 3, Type 2, Type 1, Area Command.

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 Qualification Record.

To be attached to completed Type III RADO (All Hazards) Task Book

METRO REGION
800 MHz Trunked Regional Public Safety Radio System
Standards, Protocols, Procedures

Document Section: Sub-Section: Procedure Title: Date Established: Replaces Document Dated: Date Revised:	**3. Interoperability Guidelines** **METRO 3.17.7** **Criteria for Certification as an Incident Communication Center Manager (INCM)**	Radio TOC Recommendation Date: 03/22/17 MESB Approval - Signature:

1. Purpose or Objective

The intent of this standard is to establish protocols and procedures to be used for certification and re-certification of the Incident Communication Center Manager (INCM) in Minnesota.

2. Background:

During all-hazards emergency response operations, communications among multiple jurisdictions and disciplines, including emergency medical, fire, and law enforcement services, is essential. Unfortunately, the absence of on-scene communications coordination has often compromised critical operations. To close this capability gap, the Department of Homeland Security's (DHS) Office of Emergency Communications (OEC) in partnership with the Office for Interoperability and Compatibility (OIC), the Federal Emergency Management Agency (FEMA), National Integration Center (NIC), and practitioners from across the country developed performance and training standards for the all-hazards Incident Dispatcher as well as formulated a curriculum and comprehensive All-Hazards TRG-INCM course.

For some incidents, the COML establishes an Incident Communications Center staffed with Incident Tactical Dispatchers and/or Radio Operators to provide communications support for operations. However, as the incident expands, it may become important for an Incident Communications Center Manager (INCM) to be assigned for coordination purposes and to avoid span-of-control issues. The All-Hazard Incident Communications Center Manager is then responsible for managing all functions in the Incident Communications Center, reporting to the COML.

As representatives of the Minnesota public safety community complete INCM, the federal government has left it up to each state as to determine how the INCM will be certified. This standard will lay out the certification process for Minnesota.

3. Recommended Procedure:

The following procedure shall be followed in order to be initially certified as an Incident Tactical Dispatcher and in order to be recertified:

Prerequisite Experience/Training:

- State of Minnesota INCM Certification
- ICS-300, Intermediate Incident Command System (ICS) for Expanding Incidents, is recommended.

Certification Process:

1. Attend and successfully complete a three day DHS-OEC all-hazards INCM (TRG-INCM) training session taught by a DHS-OEC certified INCM instructor.
2. Complete the INCM Task Book by demonstrating satisfactory performance of each of the tasks as witnessed by qualified evaluator(s) within three years of INCM training. It is acceptable to use an incident that occurred up to three years prior to the INCM training. (See attachment "A" Evaluation Form). Experienced Incident Dispatchers, previously trained before the formal DHS-OEC TRG-INCM was available can use tasks completed since recognized IDT training was completed.
3. Participate as an INCM in at least one NIMS Type III training drill, functional exercise, full scale exercise, incident or preplanned event. Provide a copy of one of the following: (1) Incident Action Plan; (2) Incident Communications Plan; or (3) After Action Report.
4. Obtain the "Final Evaluator's Verification" from one of the following: (1) A NIMS trained COML; (2) A Designated Agency Head; or (3) An Incident Commander. (See attachment "D" Verification / Certification of completed task book Form)
5. Obtain "Agency Certification" from the Designated Agency Head employing the candidate indicating that the candidate has met all qualifications for IDT certification. (See attachment "C" Agency Certification Form)
6. Submit the signed-off Task Book, NIMS course certificates (a printout from the Homeland Security Emergency Management (HSEM) training repository will suffice) and copies of relevant IAPs, ICPs, and AARs to your Regional Interoperability Coordinator (RIC). For the Metropolitan Emergency Services Board (MESB) Region, the documents will be submitted to the Regional Radio Services Coordinator and be brought before the MESB Radio Technical Operations Committee (RTOC) for approval.
7. The RIC or the Regional Radio Services Coordinator will review the qualification documents to make sure they meet the requirements set forth in this certification process. They will then go before the Regional Advisory Committee (RAC), Regional Radio Board (RRB), Emergency Services Board (ESB) or the MESB RTOC, presenting the INCM candidate's credentials to request a resolution that the COMT candidate be recommended to the Statewide Interoperability Program Manager for final review and certification. (See attachment "B," check-off template.)
8. The Statewide Interoperability Program Manager will review the qualification documents, copy the Task Book and relevant documents for filing and sign off on the original Task Book and return it to the INCM. This will serve as State Certification of the INCM and will be good for three years. (Submitting these documents by mail is acceptable. If the documents are lost, a copy will be deemed the original and marked as such).

RECERTIFICATION

Submission of Attachment E, along with a dated ICS 205 or AAR will recertify the participant for three years from their previous certification date. If these items are not available, Attachment E, along with a letter signed by an active incident COML or the event or exercise planner indicating the candidate acted in the role of a INCM during an event will be sufficient for recertification.

Once the candidate has participated in an acceptable function and submits the necessary paperwork for recertification, their renewal month and date remains the same as their original certification date unless other arrangements have been made.

It is the candidate's responsibility to provide the appropriate paperwork to the Emergency Communication Networks' (ECN) Standards & Training Coordinator for recertification prior to their certification expiration date.

ECN's Standards & Training Coordinator may send out a reminder at least six months in advance notifying each candidate that they are coming up for recertification if no paperwork has been submitted for renewal within that three-year period.

4. Management

The Statewide Interoperability Program Manager will manage the INCM certification and recertification process in Minnesota.

1. All certifications will be recorded and kept on file by the Emergency Communication Networks' (ECN) Standards & Training Coordinator. A list of certified INCMs with their certification expiration date will be maintained on the Statewide Emergency Communications Board (SECB) website under the ARMER tab.

This form must be filled out by evaluators, when sign offs are done for INCM Task book

Evaluation # 1 - ?? (write over)	Name of Evaluator:	Title:	Agency:
Evaluator's Address			

Name & Location of Incident - Agency and Area	Kind of Incident	Number and Type of Communication Resources	Duration of Incident	Management Level or Complexity Level

Name of Trainee_____

- ☐ **The tasks initialed & 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.**
- ☐ **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 needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a trainee.**

Recommendations:_____

Date:_____ **Evaluator's initials:**_____

Evaluator's relevant agency certification` rating:_____

Minnesota COML Team
Metro Region Incident Communications Center Manager (INCM) CERTIFICATION CHECK OFF

The following items checked are included in this packet

☐ All Prerequisite Training Completed

☐ ICS 300 (Printout attached)

If you are part of the Minnesota training Website, A print of the HSEM Certification Record Completed courses main page with the above courses listed will be sufficient.

☐ Copy of Certificate from INCM training

☐ Agency Certification (attached)

☐ Completed Task Book (with evaluator reviews)

☐ Copy of an Incident Action Plan, Incident Communications Plan, or After Action Plan (only one needed)

☐ Final Evaluator Certification (attached)

☐ Regional Interoperability Coordinator review

_____ **Troy Tretter**
(Signature) (Printed Name)

☐ Regional Radio Board – Technical Operations Committee Review

_____ **Scott Haas**
(Chair of Radio-TOC Signature) (Printed Name)

☐ Statewide Interoperability Program Manager Review

_____ **Jim Stromberg**
(Statewide Interoperability Program Manager Signature) (Printed Name)

MESB

VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK
FOR THE POSTION OF INCM (All Hazards)

Agency Certification

I certify that _____ has met all requirements for qualifications in this position and that such qualification has been issued.

Certifying Official's Signature _____ Date_____

Printed Name _____ Agency _____

Title _____ Phone Number _____

Pre Qualifications for INCM Training are but not limited to:

- **A public safety communications background with exposure to field operations; this experience should be validated by the authority who supervised the student.**
- **Fundamental public safety communications technology, supervisory, and personnel management skills. These must be validated by the authority who supervised the student and include, but are not limited to:**
    - **Knowledge of local communications systems**
        - **Frequencies and spectrum**
        - **Technologies**
    - **Knowledge of local topography**
    - **Knowledge of system site locations**
    - **Knowledge of local, regional, and state communications plans**
    - **Knowledge of local and regional Tactical Interoperable Communications Plans, if available**
    - **Knowledge of local, regional and national communications and resource contacts**
- **Completion of the following training courses:**
    - **ICS-300, TRG-INCM**

TO BE ATTACHED TO COMPLETED INCM (ALL HAZARDS) TASK BOOK

VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK
FOR THE POSTION OF TYPE III INCM (All Hazards)

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 certification in this position.

Final Evaluators Signature _____ Date_____

Printed Name _____ Agency _____

Highest NIMS Qualification _____

Phone Number _____ email address _____

Compiled training information:

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 the inclusive dated during which the trainee was evaluated.

Management Level or Fire Complexity Level: _____
Indicates ICS organization level, i.e., Type 5, Type 4, Type 3, Type 2, Type 1, Area Command.

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 Qualification Record.

To be attached to completed Type III INCM (All Hazards) Task Book

Metropolitan Emergency Services Board - ARMER System

AUTHORIZATION TO USE TALK GROUPS NOT OWNED BY THE REQUESTING AGENCY

Date: March 15, 2017

Requesting Agency: United States Federal Reserve Law Enforcement Division

Authorizing Agency: Metropolitan Emergency Services Board Radio Technical Operations Committee

Reason for Request
- ☐ Add Talk Group(s) to Radios
- ☐ Scan Talk Group(s)
- x Other Grant permission for ME TAC Talk Groups in our radios.

I. Request permission to ADD the following talk groups

Talk Group	**To Be Installed in: (i.e., Portable, Mobile, Command Post)**	**For the following Work Units:**
ME TAC 1-10	2 Mobiles, 10 Portables	Federal Reserve Law Enforcement services.
METCOM	1 Base Station	Law Enforcement Communications Center

II. Request permission to SCAN/ MONITOR the following talk groups

Talk Group	**To Be Installed in: (i.e., Portable, Mobile, Command Post)**	**To be monitored by the following positions:**	**Request for Receive Only**

III. Other Request/ Requirements (Explain)

_____

IVI. Reason for Request

_____

(Attach supporting documentation)

Name of individual completing application: James A. Schnoor

Address: 90 Hennepin Avenue, Minneapolis MN 55401

Phone: 612-204-6000 E-mail address: James.Schnoor@Mpls.FRB.Org

This Side for Authorizing Agency use Only

Metropolitan Emergency Services Board - ARMER System

AUTHORIZATION TO USE TALK GROUPS NOT OWNED BY THE REQUESTING AGENCY

Request Approved_____ Approved with Conditions_____ Denied_____

Conditions:

_____

_____

_____

_____

_____

Authorized Signature: _____

Name of Authorizing Individual _____

Address_____

Phone_____ E-mail address_____

Submit request to: Troy P. Tretter, MESB, 2099 University Avenue West, St. Paul, MN 55104. ttretter@mn-mesb.org or (651) 643-8398.