

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

Document Section:	<b>3. Interoperability Guidelines</b>	Radio TOC Recommendation
Sub-Section:	<b>METRO 3.17.5</b>	Date: 03/22/17
Procedure Title:	<b>Criteria for Certification as an Incident Tactical Dispatcher (INTD)</b>	
Date Established:	<b>05/10/2017</b>	MESB Approval - Signature:
Replaces Document Dated:		05/10/2017
Date Revised:		

**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
<p align="center"><b>Name of Trainee</b> _____</p> <p><input type="checkbox"/> The tasks initialed &amp; dated by me have been performed under my supervision in a satisfactory manner by the above-named trainee.</p> <p><input type="checkbox"/> I recommend the following for further development of this trainee.</p> <p><input type="checkbox"/> The individual has successfully performed all tasks for the position and should be considered for certification.</p> <p><input type="checkbox"/> The individual was not able to complete certain tasks (comments below) or additional guidance is required.</p> <p><input type="checkbox"/> Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p><input type="checkbox"/> The individual is severely deficient in the performance of tasks for the position and needs further training (both required &amp; knowledge and skills needed) prior to additional assignment(s) as a trainee.</p> <p><b>Recommendations:</b> _____</p> <p><b>Date:</b> _____ <b>Evaluator's initials:</b> _____</p> <p><b>Evaluator's relevant agency certification` rating:</b> _____</p>				

# 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

\_\_\_\_\_  
(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)

**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 INCIDENT TACTICAL DISPATCHER INTD

## 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 INTD Task Book