

Task Book for the Position of:
ALL HAZARDS RADIO OPERATOR (RADO)

November 2017

Task Book Assigned To:

Trainee's Name: _____

Home Unit/Agency: _____

Home Unit Phone Number: _____

Task Book Initiated By:

Official's Name: _____

Home Unit Title: _____

Home Unit/Agency: _____

Home Unit Phone Number: _____

Home Unit Address: _____

Date Initiated: _____

The material contained in this book accurately defines the performance expected of the position for which it was developed. This task book is approved for use as a position qualification document in accordance with the instructions contained herein.

**Verification/Certification of Completed Task Book
for the Position of:**

ALL HAZARDS RADIO OPERATOR

Final Evaluator's Verification

*To be completed **ONLY** when you are recommending the trainee for certification.*

I verify that (trainee name) _____ has successfully performed as a trainee by demonstrating all tasks for the position listed above and should be considered for certification in this position. All tasks are documented with appropriate initials.

Final Evaluator's Signature: _____

Final Evaluator's Printed Name: _____

Home Unit Title: _____

Home Unit/Agency: _____

Home Unit Phone Number: _____ Date: _____

Agency Certification

I certify that (trainee name) _____ has met all requirements for qualification in the above position and that such qualification has been issued.

Certifying Official's Signature: _____

Certifying Official's Printed Name: _____

Title: _____

Home Unit/Agency: _____

Home Unit Phone Number: _____ Date: _____

POSITION TASK BOOK

Position Task Books (PTBs) have been developed for designated National Interagency Incident Management System (NIIMS) positions. Each PTB lists the competencies, behaviors and tasks required for successful performance in specific positions. Trainees must be observed completing all tasks and show knowledge and competency in their performance during the completion of this PTB.

Trainees are evaluated during this process by qualified evaluators, and the trainee's performance is documented in the PTB for each task by the evaluator's initials and date of completion. An Evaluation Record will be completed by all evaluators documenting the trainee's progress after each evaluation opportunity.

Successful performance of all tasks, as observed and recorded by an evaluator, will result in a recommendation to the agency that the trainee be certified in that position. Evaluation and confirmation of the trainee's performance while completing all tasks may occur on one or more training assignments and may involve more than one evaluator during any opportunity.

INCIDENT/EVENT CODING

Each task has a code associated with the type of training assignment where the task may be completed. The codes are: O = other, I = incident. The codes are defined as:

- O = Task can be completed in any situation (classroom, simulation, daily job, incident, prescribed fire, etc.).
- I = Task must be performed on an incident/event managed under the Incident Command System (ICS). Examples include search and rescue, wildland fire, structural fire, oil spill, hazardous material, and an emergency or non-emergency (planned or unplanned) event.

While tasks can be performed in any situation, they must be evaluated on the specific type of incident/event for which they are coded. Multiple observations for each task are encouraged.

Tasks within the PTB are numbered sequentially; however, the numbering does NOT indicate the order in which the tasks need to be performed or evaluated.

The bullets under each numbered task are examples or indicators of items or actions related to the task. The purpose of the bullets is to assist the evaluator in evaluating the trainee; the bullets are not all-inclusive. Evaluate and initial ONLY the numbered tasks. DO NOT evaluate and initial each individual bullet.

RESPONSIBILITIES

The responsibilities of the Home Unit/Agency, Trainee, Coach, Training Specialist, Evaluator, Final Evaluator and Certifying Official are identified in the *Wildland Fire Qualification System Guide*, PMS 310-1. It is incumbent upon each of these individuals to ensure their responsibilities are met.

INSTRUCTIONS FOR THE POSITION TASK BOOK EVALUATION RECORD

Evaluation Record #

Each evaluator will need to complete an evaluation record. Each evaluation record should be numbered sequentially. Place this number at the top of the evaluation record page and also use it in the column labeled “Evaluation Record #” for each numbered task the trainee has satisfactorily performed.

Trainee Information

Print the trainee’s name, position on the incident/event, home unit/agency, and the home unit/agency address and phone number.

Evaluator Information

Print the Evaluator’s name, position on the incident/event, home unit/agency, and the home unit/agency address and phone number.

Incident/Event Information

Incident/Event Name: Print the incident/event name.

Reference: Enter the incident code.

Duration: Enter inclusive dates during which the trainee was evaluated.

Incident/Event Kind: Enter the kind of incident/event (prescribed fire, search and rescue, flood, hurricane, wildfire, etc.).

Location: Enter the geographic area, agency, and state.

Management Type or Prescribed Fire Complexity Level: Circle the ICS organization level (Type 5, Type 4, Type 3, Type 2, Type 1, Area Command) or the prescribed incident complexity level (Low, Moderate, High).

Evaluator’s Recommendation

For 1 – 4, initial only one line as appropriate; this will allow for comparison with your initials in the Qualifications Record.

Record additional remarks/recommendations on an Individual Performance Evaluation, or by attaching an additional sheet to the evaluation record.

Evaluator’s Signature

Sign here to authenticate your recommendations.

Date

Document the date the Evaluation Record is being completed.

Evaluator’s Relevant Qualification (or agency certification)

List your qualification or certification relevant to the trainee position you supervised.

Note: Evaluators must be either qualified in the position being evaluated or supervise the trainee; Final Evaluators must be qualified in the trainee position they are evaluating.

All Hazards Radio Operator (RADO)

Competency: Assume position responsibilities.

Description: Successfully assume role of Radio Operator and initiate position activities at the appropriate time according to the following behaviors.

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
Behavior: Ensure readiness for assignment.			
1. Obtain and assemble information and materials needed for assignment. Suggested items: <ul style="list-style-type: none"> • <i>Personal gear</i> • <i>Personal protective equipment (PPE) (See sample)</i> • <i>Appropriate office supplies</i> 	O		
2. Obtain complete information from dispatch upon assignment. <ul style="list-style-type: none"> • <i>Incident name</i> • <i>Incident order number</i> • <i>Request number</i> • <i>Incident phone number</i> • <i>Reporting time</i> • <i>Reporting location</i> • <i>Transportation arrangements/travel routes</i> • <i>Contact procedures during travel (telephone/radio)</i> 	O		
3. Arrive at incident and check in. <ul style="list-style-type: none"> • <i>Arrive properly equipped at assigned location within acceptable time limits.</i> 	I		
Behavior: Ensure availability, qualifications, and capabilities of resources to complete assignment.			
4. Coordinate obtaining work materials and equipment. <ul style="list-style-type: none"> • <i>Tables</i> • <i>Chairs</i> • <i>Lights</i> • <i>Office supplies</i> 	I		

Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.

All Hazards Radio Operator (RADO)

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
5. Demonstrate familiarity with communications equipment, procedures, and basic functions/capabilities <ul style="list-style-type: none"> • <i>Hand-held, portable, multi-channel radios.</i> • <i>Radio check-in/out procedures (e.g., respond with proper frequency when requested; use accountability forms for radio check-in/out; issue new/replacement batteries; check-in/out appropriate radio accessories).</i> • <i>Remote phone system (base to line, base to camp, base to helibase).</i> • <i>Facsimile machine.</i> 	I		

Behavior: Gather, update, and apply situational information relevant to the assignment.

6. Obtain initial briefing from Incident Communications Center Manager or immediate supervisor. <ul style="list-style-type: none"> • <i>Location of functional units at incident base camp and Incident Command Post (ICP)</i> • <i>Time of first work period and work schedule</i> • <i>Specifics of Incident Action Plan (IAP) or other relevant plan(s)</i> • <i>ICS 204, Assignment List</i> • <i>Specifics of ICS 203, Organization Assignment List</i> • <i>Specifics of ICS 205, Incident Radio Communication Plan</i> • <i>Specifics of ICS 206, Medical Plan and medevac process</i> • <i>Allocation of phones to units and existence of a phone directory</i> • <i>Procedure for processing supply orders from Operations</i> • <i>Message protocols</i> • <i>Current situation</i> 	I		
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Behavior: Establish effective relationships with relevant personnel.

7. Conduct self in a professional manner. <ul style="list-style-type: none"> • <i>Respectful and courteous</i> • <i>Respectful of public and private property</i> 	I		
8. Establish and maintain positive interpersonal and interagency working relationships.	I		

Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.

All Hazards Radio Operator (RADO)

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
Behavior: Understand and comply with ICS concepts and principles.			
9. Apply the ICS. <ul style="list-style-type: none"> • <i>Follow chain of command.</i> • <i>Maintain appropriate span of control.</i> • <i>Use appropriate ICS forms.</i> • <i>Use appropriate ICS terminology.</i> 	I		

Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.

All Hazards Radio Operator (RADO)

Competency: Communicate effectively.

Description: Use suitable communication techniques to share relevant information with appropriate personnel on a timely basis to accomplish objectives in a rapidly changing, high-risk environment.

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
Behavior: Ensure relevant information is exchanged during briefings and debriefings.			
10. Participate in daily Communications Unit briefings and meetings. <ul style="list-style-type: none"> • <i>Provide information on communication issues (e.g., radio equipment performance).</i> 	I		
Behavior: Ensure documentation is complete and disposition is appropriate.			
11. Correctly fill out and process appropriate forms. <ul style="list-style-type: none"> • <i>ICS 213, General Message</i> • <i>ICS 210, Status Change Card</i> • <i>ICS 309, Radio Logs</i> • <i>Telephone Logs</i> 	O		
12. Correctly file communications paperwork. <ul style="list-style-type: none"> • <i>ICS 309, Radio logs</i> • <i>Telephone logs</i> • <i>ICS 213, General Message</i> • <i>Radio check-in/out information</i> 	O		
Behavior: Gather, produce and distribute information as required by established guidelines and ensure understanding by recipient.			
13. Communicate information effectively to incident personnel. <ul style="list-style-type: none"> • <i>Use correct radio/telephone protocols.</i> • <i>Speak clearly and write legibly.</i> • <i>Use standard terminology, symbols, designators, and acronyms.</i> • <i>Acknowledge requests and provide feedback.</i> 	I		

Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.

All Hazards Radio Operator (RADO)

Competency: Ensure completion of assigned actions to meet identified objectives.

Description: Identify, analyze, and apply relevant situational information and evaluate actions to complete assignments safely and meet identified objectives. Complete actions within established timeframe.

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
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Behavior: Take appropriate action based on assessed risks.

14. Use appropriate communication protocol when responding to emergency situations. <ul style="list-style-type: none"> • <i>Medical transport request</i> • <i>Medevac request</i> • <i>Aircraft emergency</i> • <i>Evacuation</i> • <i>Search and Rescue</i> • <i>Fatality</i> 	I		
15. Use appropriate communication protocol when responding to routine requests/information. <ul style="list-style-type: none"> • <i>Supply orders (e.g., Operations, camps, helibase)</i> • <i>Locating personnel on the incident</i> • <i>Routing Logistics and Command radio traffic</i> • <i>Phone calls</i> 	I		

Behavior: Transfer position duties while ensuring continuity of authority and knowledge and taking into account the increasing or decreasing incident complexity.

16. Coordinate an efficient transfer of position duties when mobilizing/demobilizing. <ul style="list-style-type: none"> • <i>Document follow-up action needed and submit to supervisor.</i> 	I		
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Behavior: Plan for demobilization and ensure demobilization procedures are followed.

17. Demobilize and check out. <ul style="list-style-type: none"> • <i>Receive demobilization instructions from incident supervisor.</i> • <i>If required, complete ICS 221, Demobilization Checkout and submit completed form to the appropriate person.</i> 	I		
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Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.

Trainee Information

Printed Name:
 Trainee Position on Incident/Event:
 Home Unit/Agency:
 Home Unit /Agency Address and Phone Number:

Evaluator Information

Printed Name:
 Evaluator Position on Incident/Event:
 Home Unit/Agency:
 Home Unit /Agency Address and Phone Number:

Incident/Event Information

Incident/Event Name: _____ Reference (Incident Number/Fire Code): _____
 Duration: _____
 Incident Kind: Wildfire, Prescribed Fire, All Hazard, Other (specify): _____
 Location (include Geographic Area, Agency, and State): _____
 Management Type (circle one): Type 5, Type 4, Type 3, Type 2, Type 1, Area Command
OR Incident Complexity Level (circle one): Low, Moderate, High

Evaluator's Recommendation
 (Initial only one line as appropriate)

- _____ 1) The tasks initialed and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. The trainee has successfully performed all tasks in the PTB for the position. I have completed the Final Evaluator's Verification section and recommend the trainee be considered for agency certification.
- _____ 2) The tasks initialed and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. However, opportunities were not available for all tasks (or all uncompleted tasks) to be performed and evaluated on this assignment. An additional assignment is needed to complete the evaluation.
- _____ 3) The trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.
- _____ 4) The individual is severely deficient in the performance of tasks in the PTB for the position and additional training, guidance, or experience is recommended prior to another training assignment.

Record additional remarks/recommendations on an Individual Performance Evaluation, or by attaching an additional sheet to the evaluation record.

Evaluator's Signature: _____ Date: _____
 Evaluator's Relevant Qualification (or agency certification): _____

Trainee Information

Printed Name:
 Trainee Position on Incident/Event:
 Home Unit/Agency:
 Home Unit /Agency Address and Phone Number:

Evaluator Information

Printed Name:
 Evaluator Position on Incident/Event:
 Home Unit/Agency:
 Home Unit /Agency Address and Phone Number:

Incident/Event Information

Incident/Event Name: _____ Reference (Incident Number/Fire Code): _____
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 Incident Kind: Wildfire, Prescribed Fire, All Hazard, Other (specify): _____
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 Management Type (circle one): Type 5, Type 4, Type 3, Type 2, Type 1, Area Command
OR Incident Complexity Level (circle one): Low, Moderate, High

Evaluator's Recommendation
 (Initial only one line as appropriate)

- _____ **1)** The tasks initialed and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. The trainee has successfully performed all tasks in the PTB for the position. I have completed the Final Evaluator's Verification section and recommend the trainee be considered for agency certification.
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- _____ **3)** The trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.
- _____ **4)** The individual is severely deficient in the performance of tasks in the PTB for the position and additional training, guidance, or experience is recommended prior to another training assignment.

Record additional remarks/recommendations on an Individual Performance Evaluation, or by attaching an additional sheet to the evaluation record.

Evaluator's Signature: _____ Date: _____
 Evaluator's Relevant Qualification (or agency certification): _____

Trainee Information

Printed Name:
 Trainee Position on Incident/Event:
 Home Unit/Agency:
 Home Unit /Agency Address and Phone Number:

Evaluator Information

Printed Name:
 Evaluator Position on Incident/Event:
 Home Unit/Agency:
 Home Unit /Agency Address and Phone Number:

Incident/Event Information

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Evaluator's Recommendation
 (Initial only one line as appropriate)

- _____ **1)** The tasks initialed and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. The trainee has successfully performed all tasks in the PTB for the position. I have completed the Final Evaluator's Verification section and recommend the trainee be considered for agency certification.
- _____ **2)** The tasks initialed and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. However, opportunities were not available for all tasks (or all uncompleted tasks) to be performed and evaluated on this assignment. An additional assignment is needed to complete the evaluation.
- _____ **3)** The trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.
- _____ **4)** The individual is severely deficient in the performance of tasks in the PTB for the position and additional training, guidance, or experience is recommended prior to another training assignment.

Record additional remarks/recommendations on an Individual Performance Evaluation, or by attaching an additional sheet to the evaluation record.

Evaluator's Signature: _____ Date: _____
 Evaluator's Relevant Qualification (or agency certification): _____

(Make extra copies as needed)

Sample Personal Equipment / Go Bag from Task 1 (Personalize as needed)

Area Maps (i.e. Delorme AZ Map Book)

Cell-Phone charger (portable backup packs)

Clipboard night light,

Clipboard note paper,

Clipboard: (suggest putting reflective tape on the back of clip board)

Clothing (Seasonal Dependent):

Ball cap

Change of socks/underwear

Gloves,

Knit cap

Long Pants

Parka,

Sweatshirt

Compass

Digital Camera (if not in your phone)

Dust and wind goggles

Fanny pack

Chap stick,

Pen (i.e. Fisher Space Pen),

Pocket knife small (Swiss Army Style),

Radio earphone,

Small writing pad

Spare batteries (AA/AAA as needed)

Sun screen

First-aid kit (i.e. antibiotic cream, anti-itch cream, band-aids, earplugs, emergency cash, insect repellent, pain reliever, personal meds, protective gloves, safety pins, scissors)

Flashlights (i.e. LED Headlamp, Mag-Lite, large and small) & matching batteries

Forms

Comm Plan (ICS 205)

Comm Log (ICS 309)

Message form (ICS 213)

Garbage bags (two 55 gallon and a couple large Ziplock style bags)

GPS Unit (Set for WGS 84,)

Hand-Held Radio w/ spare batteries/Charging Cord

Light sticks, four or more (12-hour, green preferred)

Multifunction Tool (i.e. Leatherman, Gerber, SOG)

Parachute cord (two 50-foot lengths)

Roll of black electrical tape

Sleeping Bag

Snacks: (i.e. Power Bars, Jerky, Beanie Weenies)

Space blanket

Spare Batteries for your gear (i.e. AA, AAA, C, D)

Strobe-marker light

Toilet paper, Tissue

Towel (small)

Water (2 quarts)

Waterproof matches, butane lighters

Whistle