A Publication of the
National Wildfire Coordinating Group

NWCG Task Book for the Positions of:

AIRCRAFT BASE RADIO OPERATOR (ABRO)

TAKEOFF AND LANDING COORDINATOR (TOLC)

PMS 311-86 **JUNE 2011**

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:

AIRCRAFT BASE RADIO OPERATOR

(position title)

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: _____

This document is posted at the NWCG website:
http://www.nwcg.gov/publications/position-taskbooks

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

TAKEOFF AND LANDING COORDINATOR
(position title)

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: _____

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NATIONAL WILDFIRE COORDINATING GROUP (NWCG)
POSITION TASK BOOK

NWCG 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, W = wildfire, RX = prescribed fire, W/RX = wildfire OR prescribed fire and R = rare event. 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 managed under the Incident Command System (ICS). Examples include wildland fire, structural fire, oil spill, search and rescue, hazardous material, and an emergency or non-emergency (planned or unplanned) event.
W	=	Task must be performed on a wildfire incident.
RX	=	Task must be performed on a prescribed fire incident.
W/RX	=	Task must be performed on a wildfire OR prescribed fire incident.
R	=	Rare events such as accidents, injuries, vehicle or aircraft crashes occur infrequently and opportunities to evaluate performance in a real setting are limited. The evaluator should determine, through interview, if the trainee would be able to perform the task in a real situation.

While tasks can be performed in any situation, they must be evaluated on the specific type of incident/event for which they are coded. For example, tasks coded W must be evaluated on a wildfire; tasks coded RX must be evaluated on prescribed fire and so on. Performance of any task on other than the designated assignment is not valid for qualification.

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.

A more detailed description of this process and definitions of terms are included in the *Wildland Fire Qualification System Guide*, PMS 310-1. This document can be found at http://www.nwcg.gov/publications/310-1.

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 and/or fire code.
Duration: Enter inclusive dates during which the trainee was evaluated.
Incident Kind: Enter the kind of incident (wildfire, prescribed fire, search and rescue, flood, hurricane, 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) <u>or</u> the prescribed fire complexity level (Low, Moderate, High).

Fire Behavior Prediction System (FBPS) Fuel Model Group: Circle the Fuel Model Group letter that corresponds to the predominant fuel type in which the incident/event occurred.

G = Grass Group (includes FBPS Fuel Models 1 – 3):
1 = short grass (1 foot); 2 = timber with grass understory; 3 = tall grass (1½ - 2 feet)

B = Brush Group (includes FBPS Fuel Models 4 – 6):
4 = Chaparral (6 feet); 5 = Brush (2 feet); 6 = dormant brush/hardwood slash;
7 = Southern rough

T = Timber Group (includes FBPS Fuel Models 8 – 10)
8 = closed timber litter; 9 = hardwood litter; 10 = timber (with litter understory)

S = Slash Group (includes FBPS Fuel Models 11 – 13)
11 = light logging slash; 12 = medium logging slash; 13 = heavy logging slash

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.

ABRO/TOLC Common Tasks

This task book contains the tasks for both Aircraft Base Radio Operator (ABRO) and Takeoff Landing Coordinator (TOLC). The common tasks for both positions are listed first. The tasks specific to Takeoff Landing Coordinator are listed following the common tasks. The ABRO tasks only need to be completed once. The ABRO and TOLC PTBs cannot be initiated at the same time; the tasks must be completed for the ABRO before the TOLC PTB can be initiated. A Verification/Certification page is included in this PTB for each position.

Common Tasks	**pages 7 – 12**	**(Tasks 1 – 21)**
TOLC Specific Tasks	**page 13**	**(Tasks 22 – 24)**

Competency: Assume position responsibilities.

Description: Successfully assume role of Aircraft Base Radio Operator and/or Takeoff Landing Coordinator and initiate position activities at the appropriate time according to the following behaviors.

TASK	CODE	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
Behavior: Ensure readiness for assignment.			
1. Obtain complete information from dispatch upon assignment. • *Incident name* • *Incident order number* • *Request number* • *Reporting location* • *Reporting time* • *Transportation arrangements/travel routes* • *Contact procedures (telephone/radio)*	O		
2. Arrive at incident and check in. • *Arrive properly equipped at assigned location within acceptable time limits.*	O		
Behavior: Gather, update, and apply situational information relevant to the assignment.			
3. Obtain initial briefing from assignment supervisor. • *Organizational structure* • *Weather* • *Fire behavior* • *Communications* • *Resources* • *Safety*	I		

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

ABRO/TOLC Common Tasks

TASK	CODE	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
Behavior: Establish effective relationships with relevant personnel.			
4. Conduct self in a professional manner. • *Respectful and courteous.* • *Respectful of public and private property.*	I		
5. Establish and maintain positive interpersonal and interagency working relationships.	I		
Behavior: Understand and comply with ICS concepts and principles.			
6. Apply the ICS. • *Follow chain of command.* • *Maintain appropriate span of control.* • *Use appropriate ICS forms.* • *Use appropriate ICS terminology.*	I		

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

ABRO/TOLC Common Tasks

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	CODE	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
Behavior: Ensure relevant information is exchanged during briefings and debriefings.			
7. Obtain briefing from Helibase Manager or supervisor. • *ICS 220, Air Operations Summary* • *Assigned radio frequencies and function* • *Forms needed to perform duties (e.g., flight following; timekeeping; ICS 214, Unit Log)* • *Individual aircraft information assigned to incident (e.g., type, tail number, capabilities, and crew information)* • *Medevac Plan(s)* • *ICS 205, Incident Radio Communication Plan* • *Incident's (or jurisdictional agency's) overdue aircraft emergency response procedures* • *Helibase layout*	I		
8. Participate in functional area briefings and After Actions Reviews (AARs).	I		
Behavior: Ensure documentation is complete and disposition is appropriate.			
9. Maintain necessary forms/logs appropriate to assignment complexity. • *Flight Following Log* • *Mission Request Log* • *Radio Log* • *Aircraft Timekeeping Form*	O		
10. Post ICS 205, Incident Radio Communication Plan and other necessary documents in work area for reference.	O		
Behavior: Communicate and ensure understanding of work expectations within the chain of command and across functional areas.			
11. Communicate clearly and concisely.	O		

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

ABRO/TOLC Common Tasks

TASK	CODE	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
12. Maintain radio or message links with appropriate incident functions. • *Logistics, operations, command, incident aircraft* • *Helispots, pads, deck, cargo*	I		

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

ABRO/TOLC Common Tasks

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	CODE	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
Behavior: Take appropriate action based on assessed risks.			
13. Apply the Risk Management Process found in the IRPG and Fireline Handbook. • *Step 1: Situation Awareness* • *Step 2: Hazard Assessment* • *Step 3: Hazard Control* • *Step 4: Decision Point* • *Step 5: Evaluate*	I		
Behavior: Follow established procedures and/or safety procedures relevant to given assignment.			
14. Review and understand crash-rescue and medevac plans and procedures. • *Notify incident aircraft of changes in helibase operation as directed.*	O		
15. Notify Helibase Manager immediately of any overdue or missing aircraft. • *Implement emergency response procedures as identified in Overdue Aircraft Plan as directed.*	R		
16. Perform flight following procedures. • *Maintain log of aircraft takeoffs and landings, Estimated Time of Arrival (ETA), Estimated Time of Departure (ETD), and flight route check-ins.* • *Follow procedures for unannounced or unscheduled aircraft.*	I		
17. Coordinate aircraft departures from helibase with Aerial Supervision.	I		
18. Notify Takeoff and Landing Coordinator of incoming aircraft.	I		

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

ABRO/TOLC Common Tasks

TASK	CODE	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
Behavior: Coordinate and manage the use of multiple frequencies.			
19. Verify radio frequencies daily with supervisor. • *Request additional frequencies (as needed) by contacting Helibase Manager or supervisor.*	O		
Behavior: Ensure functionality of equipment.			
20. Check assigned radios prior to daily operations. • *Check/change batteries.* • *Perform radio check with other personnel or aircraft on the deck.*	O		
Behavior: Plan for demobilization and ensure demobilization procedures are followed.			
21. Demobilize and check out. • *Receive demobilization instructions from incident supervisor.* • *If required, complete ICS 221, Demobilization Checkout and submit completed form to the appropriate person.*	O		

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

TOLC Specific Tasks

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	CODE	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
Behavior: Gather, produce and distribute information as required by established guidelines and ensure understanding by recipient.			
22. Provide advisory information and coordination to incoming and outgoing aircraft. • *Wind direction and speed(s)* • *Deck activity* • *Landing site information* • *Frequency information* • *Hazard advisory*	I		
Behavior: Communicate and ensure understanding of work expectations within the chain of command and across functional areas.			
23. Coordinate with the Deck Coordinator and parking tenders before and during daily operations.	I		
24. Coordinate movement of aircraft with Aircraft Base Radio Operator. • *Flight routes and patterns at the helibase.* • *Movement of helicopters in hover lanes.* • *Routes and patterns.*	I		

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

Evaluation Record # _____

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 Prescribed Fire Complexity Level (circle one): Low, Moderate, High

FBPS Fuel Model Letter: G = Grass, B = Brush, T = Timber, S = Slash

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): _____

Additional Evaluation Record Sheets can be downloaded at http://www.nwcg.gov/publications/position-taskbooks

Evaluation Record # _____

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):

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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.

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Evaluator's Signature: _____ Date: _____

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