

A Publication of the
National Wildfire
Coordinating Group

**NATIONAL INTERAGENCY
PRESCRIBED FIRE SYSTEM**

Sponsored by
United States
Department of Agriculture

TASK BOOK FOR THE POSITION OF

United States
Department of the Interior

**PRESCRIBED FIRE BURN BOSS TYPE 3
(RXB3)**

National Association of
State Foresters



**(POSITION PERFORMANCE ON A WILDLAND OR
PRESCRIBED FIRE ASSIGNMENT REQUIRED)**

PMS 311-xx

Draft

NFES xxxx

TASK BOOK ASSIGNED TO:

INDIVIDUAL'S NAME, DUTY STATION, AND PHONE NUMBER

TASK BOOK INITIATED BY:

OFFICIAL'S NAME, TITLE, DUTY STATION, AND PHONE NUMBER

LOCATION AND DATE THAT TASK BOOK WAS 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.

EVALUATOR

DO NOT COMPLETE THIS UNLESS YOU ARE RECOMMENDING THE TRAINEE FOR CERTIFICATION

**VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK
FOR THE POSITION OF**

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 EVALUATOR'S SIGNATURE AND DATE

EVALUATOR'S PRINTED NAME, TITLE, DUTY STATION, AND PHONE NUMBER

AGENCY CERTIFICATION

I certify that _____

has met all requirements for qualification in this position and that such qualification has been issued.

CERTIFYING OFFICIAL'S SIGNATURE AND DATE

CERTIFYING OFFICIAL'S NAME, TITLE, DUTY STATION, AND PHONE NUMBER

Additional copies of this publication may be ordered from:

National Interagency Fire Center
ATTN: Supply
3833 S. Development Avenue
Boise, Idaho 83705

NATIONAL WILDFIRE COORDINATING GROUP POSITION TASK BOOK

Position Task Books (PTB) have been developed for designated positions within the National Interagency Incident Management System. 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 to the agency that the trainee be certified in that position.

Evaluation and confirmation of the trainee'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 wildland or prescribed fire. Some positions require that specific tasks be performed on a wildland fire. Performance of these tasks on other kinds of incidents is NOT qualifying.** It is important that performance be critically evaluated and accurately recorded by each evaluator. All tasks must be evaluated before recommending certification. All bullet statements within a task which require an action (contain an action verb) must be demonstrated before that task can be signed off.

A more detailed description of this process, definitions of terms, and responsibilities are included in the Wildland and Prescribed Fire Qualification Guide 310-1. A brief list of responsibilities also appears below.

RESPONSIBILITIES:

1. The **Home Unit** is responsible for:
 - C Selecting trainees based on the needs of the home unit and higher levels.
 - C Ensuring that the trainee meets the training and experience requirements included in the Wildland and Prescribed Fire Qualification Guide 310-1.
 - C Initiating PTBs to document task performance.
 - C Explaining to the trainee the purpose and processes of the PTB as well as the trainee's responsibilities.
 - C Providing opportunities for evaluation and/or making the trainee available for evaluation.
 - C Providing an evaluator for local assignments.
 - C Tracking progress of the trainee.
 - C Confirming PTB completion.
 - C Determining certification per local policy.
 - C Issuing proof of certification.

2. The **Trainee** is responsible for:
 - C Reviewing and understanding instructions in the PTB.
 - C Identifying desired objectives/goals.
 - C Providing background information to an evaluator.
 - C Satisfactorily demonstrating completion of all tasks for an assigned position within three years.
 - C Assuring the Evaluation Record is complete.

- C Notifying home unit personnel when the PTB is completed and providing a copy.
 - C Keeping the original PTB in personal records.
3. The **Evaluator** is responsible for:
- C Understanding the Wildland and Prescribed Fire Qualifications System.
 - C Being qualified and proficient in the position being evaluated.
 - C Meeting with the trainee and determining past experience, current qualifications, and desired objectives/goals.
 - C Reviewing tasks with the trainee.
 - C Explaining to the trainee the evaluation procedures that will be utilized and which objectives may be attained.
 - C Identifying tasks to be performed during the evaluation period.
 - C Accurately evaluating and recording demonstrated performance of tasks. Satisfactory performance shall be documented by dating and initialing completion of the task. Unsatisfactory performance shall be documented in the Evaluation Record.
 - C Completing the Evaluation Record found at the end of this PTB.
4. The **Final Evaluator** is responsible for:
- C Signing the verification statement inside the front cover of the PTB when all tasks have been initialed and if the trainee is recommended for certification.
5. The **Incident Training Specialist** is responsible for:
- C Identifying incident evaluation opportunities.
 - C Assuring that trainees have met prerequisites.
 - C Identifying and assigning a qualified evaluator that can provide a positive experience for the trainee, and making an accurate and honest appraisal of the trainee's performance.
 - C Providing PTBs to approved trainees on the incident when home unit was unable to provide them.
 - C Documenting the assignment.
 - C Conducting progress reviews.
 - C Conducting a close-out interview with the trainee and evaluator and assuring that documentation is proper and complete.
 - C Notifying trainee's home unit.

QUALIFICATION RECORD

POSITION: PRESCRIBED FIRE BURN BOSS TYPE 3

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<u>GENERAL</u>			
1. Review agency procedures, policies and regulations for prescribed fire as related to position through conversations with supervisor, and/or through reading of appropriate agency manuals and handbooks.	O		
2. Identify the relationship of the Prescribed Fire Burn Boss with other prescribed fire positions and agency administrator.	O		
3. Review and understand agency and personal liability issues.	O		
<u>LEADERSHIP</u>			
4. Establish and maintain positive interpersonal and interagency working relationships through effective communication.	O		
5. Conduct an After Action Review that provides opportunities for subordinates to learn from previous event.	O		
6. Demonstrate techniques for advising subordinates. As a minimum, issues that should be addressed include: recognizing and rewarding accomplishments, counseling poor performance, and resolving conflicts within a team/crew.	O		

*Code: O = task can be completed in any situation (classroom, simulation, prescribed fire, daily job, etc.)
 I = task must be performed on an incident (flood, fire, search & rescue, etc.)
 Rx = task must be performed on a prescribed fire.
 Rx/W = task may be performed on a prescribed fire or wildfire, but not on any other type of situations.
 /R = Rare event--the evaluation assignment may not provide opportunities to demonstrate performance. The evaluator may be able to determine skills/knowledge through interview or the home office may need to arrange for another assignment or a situation.

QUALIFICATION RECORD
(Continued)

POSITION: PRESCRIBED FIRE BURN BOSS TYPE 3

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<u>PLANNING</u>			
<p>7. Review the burn plan prior to implementation and ensure all requirements and objectives are addressed.</p> <p>C Ensure regulatory compliance (i.e., Smoke, Threatened & Endangered Species, Cultural Resources) and mitigation actions are addressed.</p> <p>C Independently or with assistance from others validates the kind, number, and placement of equipment and positions are identified verifying that a small organization (8 or fewer people) is needed to successfully conduct the operation.</p> <p>C Determine availability of scheduled resources to effectively meet objectives.</p> <p>C Validate prescription parameters are appropriate to meet burn objectives, and that the fire does not exhibit extreme fire behavior characteristics.</p> <p>C Validate that the plan addresses project hazards and their mitigation actions.</p> <p>C Validate that the plan complies with safety standards.</p> <p>C Review other specific agency guidelines, requirements and/or supporting documents.</p>	Rx		

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QUALIFICATION RECORD
(Continued)

POSITION: PRESCRIBED FIRE BURN BOSS TYPE 3

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<u>PRE-IGNITION OPERATIONS</u>			
8. Recon burn unit to validate burn plan elements, including areas of special concern. C Review and refine the ignition and holding plan in light of current fuel and weather conditions and expected fire behavior. • Validate that little holding action is needed and that there is little or no risk of escape.	Rx		
9. Obtain/review current weather forecasts and special advisories. Document local fire weather. C Document on-site weather observations to validate forecast. C Request and review spot (or other appropriate level) weather forecasts; provide feedback to forecasters as appropriate. C Ensure weather and smoke dispersal forecasts are in hand and analyzed against the prescription.	Rx/W		
10. Ensure that notifications are made in accordance to the burn plan; consider feedback for possible adjustments.	Rx		
11. Ensure informational and hazard warning signs are posted and maintained.	Rx/W		

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QUALIFICATION RECORD
(Continued)

POSITION: PRESCRIBED FIRE BURN BOSS TYPE 3

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
12. Verify resources are adequate to execute the burn. C Confirm availability of scheduled resources to effectively meet objectives. C Follow local policy when ordering additional resources. C Verify qualifications of assigned personnel. C Make tactical assignments and ensure their completion. C Verify that personal protective equipment meets appropriate standards.	Rx/W		
13. Conduct pre-ignition briefing to include objectives, operations, communications and safety issues.	Rx/W		
14. Complete test fire according to the plan. C Document and evaluate results. C Evaluate expected fire behavior and weather conditions.	Rx		
15. Using collected data, make "go/no-go" decision. C Analyze operational situations/factors to determine if burn plan can be implemented. C Notify appropriate personnel of "go/no-go" decision.	Rx		

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QUALIFICATION RECORD
(Continued)

POSITION: PRESCRIBED FIRE BURN BOSS TYPE 3

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<p><u>PRESCRIBED FIRE OPERATIONS</u></p> <p>16. Conduct operations in a safe manner according to the Standard Fire Orders, Watch Out situations, LCES principles, burn plan, and agency specific policies and standards.</p> <p> C Remain in communication with crew members, assigned supervisor, and adjoining forces.</p> <p> C Spot check tactical operations to ensure compliance with safety guidelines.</p> <p> C Take actions to prevent personnel fatigue by rotating duties, adjusting rest periods, etc.</p> <p> C Recognize fire behavior and hazards which could endanger personnel, identify alternative tactics, and implement mitigation measures.</p>	Rx/W		
<p>17. Ignite project area according to ignition plan.</p> <p> C Change or adjust the ignition plan to meet the dynamics of the situations.</p> <p> C Recognize personnel fatigue and smoke exposure symptoms and take corrective actions such as rotating duties, adjusting rest periods.</p> <p> • Maintain accountability for assigned ignition equipment.</p>	Rx/W		

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QUALIFICATION RECORD
(Continued)

POSITION: PRESCRIBED FIRE BURN BOSS TYPE 3

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
18. Identify impacts of ignition on control and desired fire effects. Make needed adjustments. C Monitor rates of spread, flame lengths, fire intensities, spotting, and scorch heights. C Recognize potential for extreme fire behavior conditions and ceases ignition prior to onset of extreme fire behavior. C Recognize and respond to fire behavior/ weather changes on site, e.g., R/H, wind direction, wind speed and adjust ignition.	Rx/W		
19. Coordinate holding resources to safely achieve burn plan objectives. Evaluate and adjust holding operation as appropriate. C Implement the holding plan. C Evaluate the effectiveness of the holding operation relative to smoke, ignition patterns and fire behavior. C Protect capital improvements, and cultural and natural resources.	Rx/W		
20. Terminate burn if prescription parameters or burn objectives can no longer be met and implement contingency plan.	/R		
21. As necessary convert prescribed fires to wildland fires per agency policy.	/R		

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QUALIFICATION RECORD
(Continued)

POSITION: PRESCRIBED FIRE BEHAVIOR ANALYST (RXFA)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
22. Ensure tactical assignments, including mop up and/or patrol, meet standards identified in the burn plan and as conditions warrant.	Rx/W		
23. Declare prescribed fire out per agency policy.	Rx		
<u>POST BURN OPERATIONS</u>			
24. Evaluate and document the results of the burn. C Summarize fire behavior and immediate post-burn fire effects data. C Compare results to burn plan objectives. C Recommend changes to be considered when developing future burn plans.	Rx		
25. Ensure the post-burn narrative, time and equipment records, reports, injury forms, personnel evaluations, unit logs, cost analysis, etc., are completed as necessary.	Rx/W		

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INSTRUCTIONS for EVALUATION RECORD

There are four separate blocks allowing evaluations to be made. These evaluations may be made on incidents, 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.

COMPLETE THESE ITEMS AT THE START OF THE EVALUATION PERIOD:

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

Evaluator's home unit address and phone: Self explanatory

#: The number in the upper left corner of the experience block 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.

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

Incident Kind: Enter kind of incident, e.g., wildland fire, prescribed fire, search and rescue, flood, etc.

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

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 inclusive dates during which the trainee was evaluated. This block may indicate a span of time covering several small and similar incidents if the trainee has been evaluated on that basis, i.e., several initial attack fires in similar fuel types.

Management Level or Prescribed Fire Complexity Level: Indicates ICS organization level, i.e., Type 5, Type 4, Type 3, Type 2, Type 1, Area Command or prescribed fire complexity level (low, moderate, high).

NFFL Fuel Model: For wildland fire and prescribed fire experience, enter number (1-13) of the fuel model(s) in which the incident occurred and under which the trainee was evaluated.

- | | | | |
|--------------------|---------------------------------|---------------------|--------------------------------|
| Grass Group | 1. Short Grass (1 foot) | Timber Group | 8. Closed Timber Litter |
| | 2. Timber (grass & understory) | Group | 9. Hardwood Litter |
| | 3. Tall Grass (2-1/2 feet) | | 10. Timber (litter understory) |
| Brush Group | 4. Chaparral (6 feet) | Slash Group | 11. Light Logging Slash |
| | 5. Brush (2 feet) | Group | 12. Medium Logging Slash |
| | 6. Dormant brush-Hardwood Slash | | 13. Heavy Logging Slash |
| | 7. Southern Rough | | |

Recommendation: Check as appropriate and/or make comments regarding the future needs for development of this trainee.

Date: List the date the record is being completed.

Evaluator's initials: Initial here to authenticate your recommendations and to allow for comparison with initials in the Qualifications Record.

Evaluator's relevant red card rating: List your certification relevant to the trainee position you supervised.

Evaluation Record

 TRAINEE NAME

 TRAINEE POSITION

#1	Evaluator's name: Incident/office title & agency:				
Evaluator's home unit address & phone:					
Name and Location of Incident or Simulation (agency & area)	Incident Kind (wildland fire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Prescribed Fire Complexity Level	NFFL Fuel Model(s)
			to		
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 red card (or agency certification) rating: _____					

#2	Evaluator's name: Incident/office title & agency:				
Evaluator's home unit address & phone:					
Name and Location of Incident or Simulation (agency & area)	Incident Kind (wildland fire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Prescribed Fire Complexity Level	NFFL Fuel Model(s)
			to		
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 red card (or agency certification) rating: _____					

Evaluation Record
(Continuation Sheet)

TRAINEE NAME

TRAINEE POSITION

#3	Evaluator's name: _____ Incident/office title & agency: _____				
Evaluator's home unit address & phone: _____					
Name and Location of Incident or Simulation (agency & area)	Incident Kind (wildland fire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Prescribed Fire Complexity Level	NFFL Fuel Model(s)
			to		
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 red card (or agency certification) rating: _____					

#4	Evaluator's name: _____ Incident/office title & agency: _____				
Evaluator's home unit address & phone: _____					
Name and Location of Incident or Simulation (agency & area)	Incident Kind (wildland fire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Prescribed Fire Complexity Level	NFFL Fuel Model(s)
			to		
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 red card (or agency certification) rating: _____					