Planning Section Chief (PSC3)

State of Alaska

All-Hazards

Position Task Book

Assessment and Guide

Planning Section

Type 3

The Planning Section Chief (PSC3) will be used as assigned by the Incident Commander or designee.

May 2018

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State of Alaska (SOA)

Type 3 Position Task Book (PTB)

State of Alaska (SOA) Type 3 Position Task Books (PTBs) have been created for designated National Incident Management System (NIMS) positions. Each PTB lists the competencies, tasks, and behaviors required to be successful in a specific position. Trainees must complete all competencies, tasks, and behaviors and demonstrate acceptable performance during the completion of this PTB.

Evaluator(s) will complete an Evaluation Record documenting the trainee's progress after each evaluation opportunity. Trainees will be observed and evaluated by qualified evaluators during a qualifying event and their performance will be documented in the PTB for each task by entering the Evaluation Record number, date of completion, and the evaluator's initials. Evaluation and confirmation of the trainee's performance on all tasks may require more than one qualifying event and may involve more than one evaluator during each opportunity.

After the trainee has met all the requirements in the State of Alaska (SOA) Type 3 Position Task Book (PTB), the home Agency will complete the final agency certification verifying the trainee is qualified in the position and will submit the Agency-certified PTB to the Alaska Interstate Mutual Aid Committee/ Credentialing Subcommittee for approval and issuance of an SOA Type 3 All Hazards Credential.

Position Task Book Timeline

1. Emergency management experience must include a minimum of three (3) events.
   - Emergency management events may include one (1) tabletop exercise and at least two (2) emergency management events.
   - Additional events may be required to complete the qualification process.
2. The three (3) emergency management events must occur within a five (5) year period.
3. All qualifying events must be completed within a five (5) year period with no more than three (3) years between each event.

Training Specialist/Certifying Official Responsibilities

1. Be authorized by the AHJ.
2. Maintain PTBs and training records for agency staff.
3. Initiate or issue PTBs and blank Evaluation Records to trainees when they are deployed on a Type 3 assignment.
4. Meet with the Evaluator and Trainee to discuss training and experience needs.
5. As the Trainee completes required training, enter the information into the Required Training section on page 2 of the PTB.

6. Once a Trainee completes all the requirements of a Position Task Book (PTB) and is approved by the AHJ, submit a Nomination Package to the DHS&EM for processing, which includes fully completed:
   - PTB and associated Evaluation Records
   - "Agency Certification" (last page of PTB)
   - State of Alaska Type 3 Nomination Application
7. Provide a report to the DHS&EM Training Section once a year showing how individuals maintained their currency for All-Hazards credentialing (see page 16 of the All Hazard Qualification Guide).

Trainee Responsibilities

1. Review and understand the assigned PTB.
2. Share training and experience with the Evaluator and Training Specialist.
3. After each assignment, meet with the evaluator to review and discuss overall performance and the continued expectations to successfully perform all competencies, tasks, and behaviors for the assigned position.
4. Return the PTB and Evaluation Record to your home agency.
5. Understand that PTBs do NOT replace the standard performance appraisal process by your home agency.
6. Coordinate with the AHJ to find opportunities to maintain currency once Type 3 All-Hazards credentialing has been obtained.

Evaluator Responsibilities
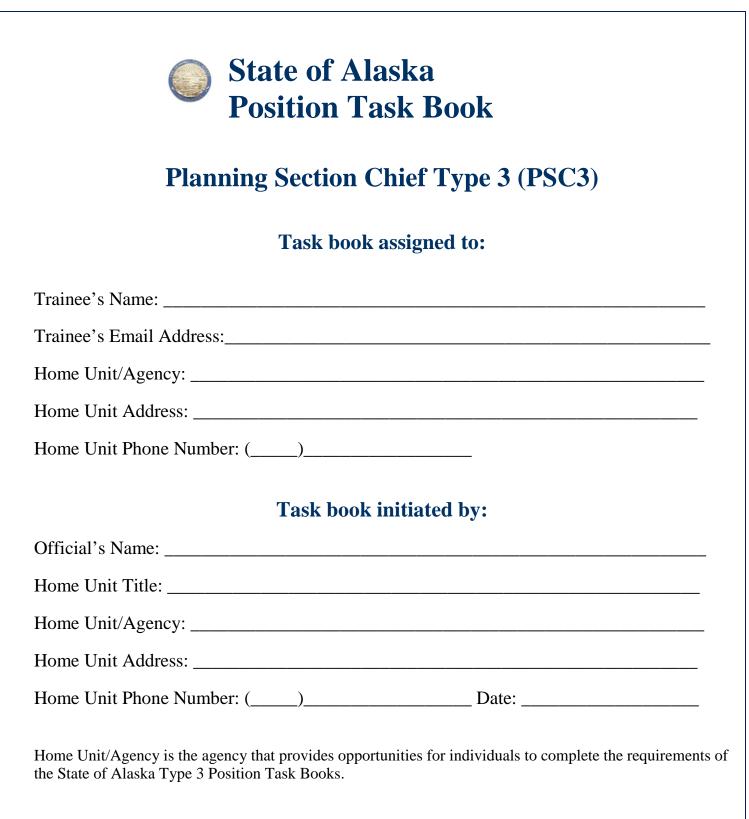
1. Be qualified in the position for which they are evaluating a trainee.
2. Review the competencies, tasks, and behaviors listed in the PTB, so you know what to observe while the trainee performs his/her duties.
3. Fully complete an Evaluation Record form for each qualifying event the trainee has participated.
   - The evaluation records should be numbered sequentially.
   - The evaluator must sign and date the Evaluation Record form, which validates the trainee's experience.
4. For the current Type 3 qualifying event:
   - Enter the evaluation record number, date, and initials into the PTB, if the trainee performed the task **OR**
   - Enter N/A, date and initials, if the task was not performed by the trainee.
5. Conduct the PTB review meeting in a private setting.
   - Begin by asking the individual to comment on his or her performance, including strengths, areas needing improvement, and any thoughts for training.
   - Provide a summary of the trainee's overall performance demonstrated during the assigned event.
   - Review the completed assessment with the trainee.
   - Return the PTB and Evaluation Record to the trainee, so they can return it his/her home agency.
6. Once a trainee completes all the requirements of the PTB, review the evaluation records and PTB entries to ensure they are completed correctly.
   - On the trainee's final assignment, complete the Final Evaluator's Verification section and submit the completed PTB to the AHJ Training Specialist recommending Type 3 All-Hazards Credentialing.

State of Alaska
Position Task Book

Evaluation Record #:_____

Trainee Information

Printed Name:_____

Position: **Planning Section Chief Type 3 (PSC3)**

Agency Name:_____

Agency Address:_____

_____

Home Unit Phone Number: (_____)_____

Evaluator Information

Printed Name:_____

Evaluator position:_____

Agency Name:_____

Agency Address:_____

_____

Home Unit Phone Number: (_____)_____

Incident/Event Information

Incident/Event Name:_____

Incident # and/or Code:_____ Duration:_____

Training Start Date:_____ End Date:_____

Incident Kind: ❒ Flood ❒ Fire ❒ Ground Failure/Avalanche/Landslide ❒ Planned Event

❒ Other All Hazard (specify):_____

Location (include governmental/geographic area):_____

Management Type (check one): ❒ Type 5 ❒ Type 4 ❒ Type 3 ❒ Type 2 ❒ Type 1 ❒ Area Command

Evaluator's Recommendation (initial only one line as appropriate):

_____ **1)** 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)** 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)** Trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.

_____ **4)** Trainee 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 attach an additional page to this evaluation record.

Evaluator's Signature:_____ Date:_____

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

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State of Alaska
Position Task Book

Planning Section Chief Type 3 (PSC3)

Task book assigned to:

Trainee's Name: _____

Trainee's Email Address:_____

Home Unit/Agency: _____

Home Unit Address: _____

Home Unit Phone Number: (_____)_____

Task book initiated by:

Official's Name: _____

Home Unit Title: _____

Home Unit/Agency: _____

Home Unit Address: _____

Home Unit Phone Number: (_____)_____ Date: _____

Home Unit/Agency is the agency that provides opportunities for individuals to complete the requirements of the State of Alaska Type 3 Position Task Books.

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

Competency: Complete required training documented by the AHJ Training Specialist.

Description: Obtain the required training that will provide an understanding of the duties, responsibilities, and capabilities of an effective **Planning Section Chief (PSC3)** on an All-Hazards Incident Management Team (IMT). Other training may be assigned based upon AHJ guidance.

Behavior: Complete required training for position qualification.	Date Completed	Training Specialist Initials
IS-100.B: Introduction to Incident Command System, ICS-100		
IS-200.B: ICS for Single Resources and Initial Action Incidents		
IS-700.A: National Incident Management System (NIMS) An Introduction		
IS-800.B: National Response Framework, An Introduction		
ICS-300 Intermediate ICS for Expanding Incidents		
ICS-400 Command and General Staff – Complex Incidents		
E0962 NIMS ICS All-Hazards Planning Section Chief Course		

Competency: Assume position responsibilities.

Description: Successfully assume role of Planning Section Chief (PSC3) and initiate position activities at the appropriate time according to the following behaviors.

Behavior: Ensure readiness of assignment.	Evaluation Record #, Evaluator Initials, and Date
1. Obtain valid Resource Order from Dispatching Agency. • Incident information (name, order number, request number, phone numbers, etc.). • Expected reporting time and location • Contact procedures during travel (telephone/radio) • Transportation arrangements/travel routes • Lodging/meal/per diem arrangements • IAP and/or Situation Reports	
2. Obtain pre-assembled kit, which includes, but is not limited to: • Agency-specific and ICS forms. • References appropriate to the incident. • Agency policies & procedures. • Office supplies appropriate to the function. • Home agency PTB.	
3. Obtain the appropriate equipment for the assignment, for example, laptop, printer, cell or satellite phone, weather gear, PPE, etc.	
4. Arrive at assignment and check in.	

Behavior: Gather, update, and apply situational information relevant to the assignment.	Evaluation Record #, Evaluator Initials, and Date

5. Obtain briefing from Agency Administrator and/or outgoing Incident Commander.
  • Incident information (e.g., ICS 201, Incident Briefing; ICS 202, Incident Objectives; decision support documentation; Written Delegation of Authority; copy of most recent ICS 209, Incident Status Summary; map(s) of the incident).
  • Copies of current ICS 260, Resource Orders and resources committed to incident.
  • Key contact list with phone and fax numbers.	

6. Obtain briefing from Incident Commander (one-on-one or in Incident Management Team (IMT) meeting).
  • IC's priorities, goals, and objectives for IMT and the incident.
  • Initial instructions concerning the tasks expected of the Planning Section.
  • Expected timeframes for briefings, planning meetings, and team meetings.	

7. Collect information from outgoing Planning Section Chief or other personnel responsible for incident prior to arrival.
  • Status of incident and assigned resources.
  • Status of existing Planning Section.	

Behavior: Establish effective relationships with relevant personnel.	Evaluation Record #, Evaluator Initials, and Date
8. Establish and maintain positive interpersonal and interagency working relationships.	
Behavior: Establish organization structure, reporting procedures, and chain of command.	Evaluation Record #, Evaluator Initials, and Date

9. Plan and activate section.
  • Identify units within the section to be activated and order resources required for section operation.
  • Identify work space requirements and determine locations.
  • Brief unit leaders on current and anticipated activity.
  • Provide initial operating instructions to section personnel.	

Competency: Lead assigned personnel.

Description: Influence, guide, and direct assigned personnel to accomplish objectives and desired outcomes in a rapidly changing, high-risk environment.

Behavior: Model leadership values and principles.	**Evaluation Record #, Evaluator Initials, and Date**
10. Exhibit principles of duty. • Be proficient in your job, both technically and as a leader. • Make sound and timely decisions. • Ensure tasks are understood, supervised and accomplished. • Develop your subordinates for the future.	
11. Exhibit principles of respect. • Know your subordinates and look out for their well-being. • Keep your subordinates informed. • Build the team. • Employ your subordinates in accordance with their capabilities.	
12. Exhibit principles of integrity. • Know yourself and seek improvement. • Seek responsibility and accept responsibility for your actions. • Set the example.	
Behavior: Ensure the safety, welfare, and accountability of assigned personnel.	**Evaluation Record #, Evaluator Initials, and Date**
13. Manage operational periods to achieve objectives. • Evaluate need for extended operational periods. • Ensure adequate work/rest ratio.	
Behavior: Establish work assignments and performance expectations, monitor performance, and provide feedback.	**Evaluation Record #, Evaluator Initials, and Date**
14. Ensure subordinates understand assignment for operational period.	
15. Continually evaluate performance. • Communicate deficiencies immediately and take corrective action. • Provide training opportunities where available. • Complete personnel performance evaluations according to agency guidelines.	
Behavior: Emphasize teamwork.	**Evaluation Record #, Evaluator Initials, and Date**
16. Establish cohesiveness among assigned resources.	

Behavior: Coordinate interdependent activities.	Evaluation Record #, Evaluator Initials, and Date
17. Establish priorities and coordinate units within the section.	
18. Interact and coordinate with command staff, general staff and appropriate unit leaders. • Receive and transmit current and accurate information. • Communicate changes to the Incident Action Plan (IAP) or relevant plan. • Ensure the Resource Unit Leader is advised of changes in status of resources assigned to the operation. Keep status current.	
19. Coordinate incident rehabilitation needs. • Coordinate with responsible agencies. • Monitor progress • Review rehabilitation needs daily and mobilize/demobilize units in a timely manner.	

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.

Behavior: Ensure relevant information is exchanged during briefings and debriefings.	Evaluation Record #, Evaluator Initials, and Date
19. Facilitate Planning Section meetings and share pertinent information. • Expected duration • Changes in objectives or strategy • Additional responsibilities • Changes in jurisdictional involvement	
20. Schedule and conduct operational period briefings • Complete operational period briefings in 30 minutes or less • Incident objectives (Incident Commander or Planning Section Chief) • Current situation (Operations Section Chief) • Weather information (Incident Meteorologist) • Work assignments (Operations Section Chief) • Air operations summary (Air Operations Branch Director) • Safety message (Safety Officer) • Other applicable information (e.g., Logistics, Finance, Planning, Information, Liaison, Resource Advisors/agency representatives) • Changes from the written IAP • Incident Commander's remarks	
21. Facilitate Agency Administrator close-out/After Action Review (AAR).	

Behavior: Ensure documentation is complete and disposition is appropriate.	Evaluation Record #, Evaluator Initials, and Date
22. Coordinate submission of ICS 209, Incident Status Summary. • Accurate and complete • Priorities and special considerations • Within established timeframes • Incident Commander's signature	
23. Ensure incident documentation is completed as required by the Incident Commander. • ICS 214, Unit Logs • Personnel and equipment time records to Time Unit Leader each operational period. • Incident reports and narrative prior to leaving incident. • Final documentation package to host agency.	
Behavior: Gather, disseminate, and explain information as necessary.	Evaluation Record #, Evaluator Initials, and Date
24. Facilitate and/or participate in preplanning/strategy meetings as appropriate.	
25. Establish, adhere to, and maintain incident planning cycle. • Publish, distribute, and post planning cycle.	
26. Inform identified attendees of planning meeting time, location, and information expected of them. • Define meeting objectives, agenda, and time expectations. • Post agenda at appropriate locations.	
27. Ensure distribution of copies of IAP at the operational briefing.	
28. Update Incident Commander as soon as possible on current accomplishments and/or problems.	
Behavior: Communicate work expectations through the chain of command and across functional areas.	Evaluation Record #, Evaluator Initials, and Date
29. Ensure presenters are aware of and adhere to meeting responsibilities. • Operational briefing • Pre-planning/strategy meeting • Planning meeting	
30. Ensure planning staff has specific assignments and responsibilities to support the incident. • Division of duties • Work parameters	

Behavior: Develop and implement plans and gain concurrence of affected agencies and/or the public.	Evaluation Record #, Evaluator Initials, and Date
31. Conduct planning meetings. • Identify IAP elements required from other sections and time needed by the Planning Section • Review and validate incident objectives (Incident Commander or Planning Section Chief). • Provide current situation (Operations Section Chief). • Present weather information (Incident Meteorologist or Fire Behavior Analyst). • Present work assignments as outlined on ICS 215, Operational Planning Worksheet (Operations Section Chief). • Present air operations summary (Air Operations Branch Director). • Present ICS 215A, Incident Safety Analysis (Safety Officer). • Ensure the proposed plan can be implemented and supported by section chiefs and agency representatives. • Complete meetings in 30 minutes or less.	
32. Ensure planning staff completes and compiles required elements of the IAP within required timeframes. • Obtain elements from other appropriate sections. • Assemble the elements into an IAP. • Ensure the IAP links management and control objectives with strategies and tactics. • Obtain the Incident Commander's approval and signature on IAP. • Identify how many copies of IAP are needed.	
33. Implement demobilization plan. • Ensure realistic release priorities. • Address agency, cooperating/assisting agency and incident requirements. • Minimize contract, transportation, and personnel costs. • Ensure incident and agency demobilization safety and travel procedures are followed.	
34. Develop and implement a plan for transfer of command. • Contains accurate assessment of the situation. • Identify incident needs. • Identify release priorities. • Include date and time of transition and transfer of command. • Complete transition of functional duties in a timely, smooth, and efficient manner. • Facilitate transfer of command meeting. • Brief subordinates.	

	Evaluation Record #, Evaluator Initials, and Date
35. Ensure planning staff completes or supports completion of other relevant plans within required timeframes. • Contingency plan(s) as needed (e.g., evacuation/ sheltering, structure protection) • Demobilization plan • Transfer of command plan	

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.

Behavior: Administer agency policy, contracts, and agreements.	Evaluation Record #, Evaluator Initials, and Date
36. Apply agency policy, legal and fiscal constraints, and political considerations when reviewing and developing plans. • Strategic plans • IAP or other relevant plan • Cost containment	
37. Ensure work/rest guidelines and length of assignments are monitored and followed.	
38. Ensure release priorities address contractual requirements. • Coordinate with Finance/Administration.	
Behavior: Gather, analyze, and validate pertinent information and recommend priorities.	Evaluation Record #, Evaluator Initials, and Date
39. Evaluate and monitor current situation to determine if present plan of action will meet incident objectives. • Use technical specialists, operations personnel, and/or agency personnel. • Advise command and general staff of significant changes in incident status in a timely manner.	
40. Determine if the agency's strategic plan and decision support documentation is appropriate and can be supported.	
Behavior: Take appropriate action based on assessed risks.	Evaluation Record #, Evaluator Initials, and Date
41. Ensure the Risk Management Process is established and maintained.	

Behavior: Modify approach based on evaluation of incident situation.	Evaluation Record #, Evaluator Initials, and Date
42. Modify and present revised incident objectives to command and general staff.	
43. Revise planning cycle when appropriate. • Meeting time and location • Operational periods	

Behavior: Transfer position duties while ensuring continuity of authority, knowledge, and the incident complexity.	Evaluation Record #, Evaluator Initials, and Date
44. Coordinate an efficient transfer of position duties when mobilizing/demobilizing (e.g., incoming Incident Management Team (IMT), host agency). • Inform incoming/outgoing IC, Section Chief, and/or staff. • Ensure there is no adverse impact on safety or productivity. • Document follow-up action needed by relief staff. • If necessary, coordinate with agencies about transfer of command.	

Behavior: Plan and implement demobilization procedures.	Evaluation Record #, Evaluator Initials, and Date
45. . Anticipate demobilization of resources. • Identify excess resources. • Prepare schedule for demobilization	
46. Ensure incident and agency demobilization procedures are followed. • Brief subordinate staff on demobilization procedures and responsibilities. • Demobilize incident resources by predetermined priorities or as work progress dictates.	
47. Demobilize equipment and process any claims. • Prepare equipment/services for release. • Notify contractors/vendors of impending release schedule. • Process any claims for damage, loss, or wear on equipment, leases or facilities.	
48. Ensure PTBs are completed. • Complete a PTB for each individual that gained experience in the Finance/Admin Section. • Ensure your PTB is completed by the Incident Commander (IC).	
49. 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.	

50. Participate in the After-Action Report (AAR) and make recommendations for process improvements which include, but are not limited to:
   • Identify strengths that should be maintained and reinforced.
   • Identify potential areas for improvement and propose solutions.	

State of Alaska Position Task Book
Verification/Certification of Completed Task Book

Planning Section Chief Type 3 (PSC3)

Final Evaluator's Verification

To be completed ONLY when the trainee has fully completed all required assignments and is recommended for credentialing.

I verify that (trainee name) _____ has successfully performed as a trainee by demonstrating all tasks for the position listed above, has completed all required training assignments, and should be considered for credentialing 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: _____

Certifying Official's Email Address: _____

Home Unit/Agency: _____

Home Unit Phone Number: (_____)_____ Date: _____

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