

PENNSYLVANIA FIRE SERVICE VOLUNTARY CERTIFICATION PROGRAM



FIRE OFFICER I CANDIDATE HANDBOOK

OFFICE OF THE STATE FIRE COMMISSIONER
PENNSYLVANIA STATE FIRE ACADEMY

Dear Certification Candidate,

Welcome to the Pennsylvania Fire Service Voluntary Certification Program. The purpose of this manual is to provide you information that will assist you in successfully participating in the certification test. This manual outlines the pre-requisites, testing and application process, and provides you with a study guide reference list. Tests are conducted under the sanction and approval of the Pennsylvania Office of the State Fire Commissioner with accreditation granted by the National Board on Fire Service Professional Qualifications (National Pro-Board) and the International Fire Service Accreditation Congress (IFSAC)

In accordance with Act 61 of 1995, The State Fire Commissioner Act, the Office of the State Fire Commissioner is the certifying agency within the Commonwealth of Pennsylvania and the Pennsylvania State Fire Academy is the administering agency. Any United States Citizen eighteen (18) years of age or older who resides in Pennsylvania may apply for consideration as a test candidate.

Good luck and thank you for participating in the Pennsylvania Fire Service Voluntary Certification Program.

Application Process

Obtain an application from either the Office of the State Fire Commissioner (OSFC) website www.osfc.pa.gov or an approved test site. You must fill out the form, in full, and provide all required documentation. The completed application and accompanying documents are to be submitted to an approved test site or PA State Fire Academy (PSFA). Your application is then reviewed and either accepted or rejected based on compliance and deficiencies (i.e., lacks pre-requisites, no signatures, etc.).

The general test process is as follows:

1. A candidate must submit a complete application including all supporting documents;
2. After the application is approved, the candidate takes the written and subsequently the skills tests (NOTE: the skills test cannot be taken before the written test);
3. Upon successful completion of the written and skills tests and a review of the application for completeness by the test site and PSFA or Delegated Authority, the candidate can be certified for the level tested. If a candidate should not pass any part of the testing process, a retest can be administered and must be completed within one (1) year of the original test date.

Application Pointers

1. Make sure the application is legible and complete. Applications **MUST** be typed.
2. Social Security Number: you have the option to provide the full nine (9) or just the last four (4) digits.
3. Provide your complete name including suffix (Jr, Sr, III, etc.) **NO** nicknames please.
4. Make sure your mailing address includes street, apartment number, city, state and zip.
5. Make sure all appropriate signatures are obtained and are signed in **BLUE** or **BLACK** ink.
 - a. *Chief Officers CANNOT sign for themselves where a Chief Officer's signature is required;*
 - b. *For this requirement, another Chief Officer MUST sign this section of the application.*
6. Legible copies of all prerequisites must be attached and signed where applicable. **NOTE:** *Copies must include both the front and back of the document where applicable. (i.e. CPR & Medical cards).*
7. Make sure your Prerequisite Verification Form (found in the back of the application) is appropriately marked off and signed in **BLUE** or **BLACK** ink.

Prerequisites

1. Successful completion of Incident Command System Course

The following are the recognized courses:

- a) NIMS ICS for Fire Service
- b) NIMS ICS for EMS
- c) National Fire Academy, Incident Command System Course
- d) NFA ICS 100 and 200 (Independent Study or Facilitated Courses)
- e) Incident Command System and Resource Management for the Fire Service

2. Firefighter II Certification: You **MUST** be certified at the Firefighter II level.

Certification Number: _____ (Pro-Board or IFSAC)

3. Fire Service Instructor I Certification: You **MUST** be certified at the Fire Service Instructor I level

Certification Number: _____ (Pro-Board or IFSAC)

Hazardous Materials Training and/or Certification: Candidates **MUST** be trained or certified at the Hazardous Materials Operations Level in accordance with NFPA 472 (2013) *Standard for Professional Competency of Responders to Hazardous Materials/Weapons of Mass Destruction Incidents*, Chapter 5 (Core Competencies) and Chapter 6 (Mission-Specific), Section 6.2 (PPE) and Section 6.6 (Product Control) **OR** NFPA 1072 (2017) *Standards for Hazardous Material /Weapons of Mass Destruction Emergency Response Personal Professional Qualifications*, Chapter 5 (Operations Level Responders) and Chapter 6 (Mission-Specific), Section 6.2 (PPE) and Section 6.6 (Product Control). Attach a copy of one of the following recognized certificates (Jones & Bartlett curriculum):

- Hazardous Materials Operations Level, **OR**
- Hazardous Materials Operations Level Annual Refresher

The training or certification certificate must be dated within one year of the date of this application. **Any training or certification certificate greater than one year from the date of this application will NOT be accepted in respect to fulfilling this prerequisite.** TO meet this prerequisite, you must show proof of completion of a current course, refresher course, or certification certificate.

Method: Fire Officer I certification is completed through either an open challenge or following (i.e., post) an approved training program.

Post-course Challenge

To certify by this method, you **MUST** successfully complete a Fire Officer I course of instruction approved by the State Fire Academy within one (1) year of the date of this application. You **MUST** also successfully pass the written and practical skills and provide a current certification application. Coordination in filing the application, taking the written test, and completing the required practical skills is coordinated through an approved test-site. If choosing this option, proceed to the end of this application and complete the Prerequisite Verification Form.

NOTE: You will need to attach a copy of your Fire Officer 1 course completion certificate to your application.

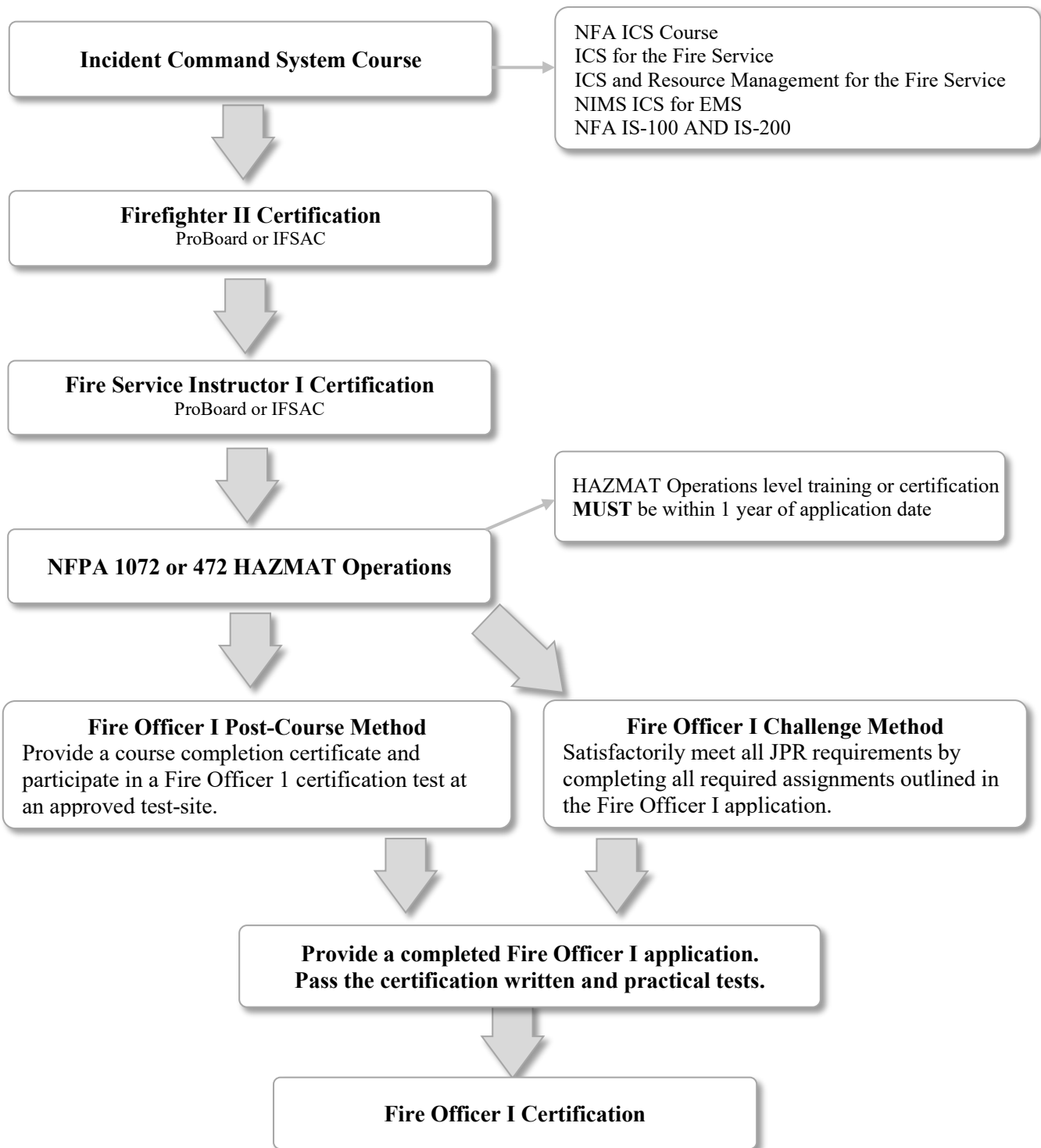
Open Challenge

To certify by this method, you will need to submit the application and practical skills (i.e., practicum). Section VI specifically details what is required for the practicum. You will need to complete, assemble, and submit all required documentation to the State Fire Academy for review. Your materials will be evaluated against the JPR's of the NFPA 1021 Standard. All requisites in Section VI, Parts 1 through 6 **MUST** be submitted.

Documentation used to complete each part as listed on the application **MUST** be properly labeled and logically assembled. All materials submitted **MUST** be the candidate's original work.

NOTE: Contact the certification staff at the Academy prior to starting the open challenge process.

Fire Officer I Certification Pathway



Test Policy

Written Test: The written test consists of one hundred (100) questions and is randomly generated. Candidates have a maximum of two (2) hours to complete the test. Passing score for the written test is seventy percent (70%).

Skills Test: Candidates must pass one hundred percent (100%) of the skill stations offered.

Re-test Policy

Written Test: If you are unsuccessful, you have a total of two (2) retest attempts and have one (1) year to complete the retest. You will need to contact the fire academy or a test site of your choice to schedule a retest.

Skills Test: You must pass 100% of the skill stations offered.

- If you are unsuccessful on three (3) or less skill stations, you may retest the same day (only one retest per skill station);
- If you are unsuccessful on four (4) or more skill stations, you may NOT retest the same day. Skill retests must be scheduled for a later date and time.
- A total of eight (8) retest attempts are permitted and must be completed in one (1) year to successfully complete the testing process.

Appeals

A candidate may request a review of his/her performance records by the State Fire Academy within thirty (30) days of receipt of a failure notice. Appeals **MUST** be in writing and in accordance with the policies and procedures of the Certification Program.

Send to: Pennsylvania State Fire Academy
Attn: Certification Program Manager
1150 Riverside Drive
Lewistown, PA 17044

Accommodations

The Pennsylvania Fire Service Voluntary Certification Program offers reasonable accommodations for the written certification exams for individuals with documented disabilities. Only written requests for accommodations for certification examinations are reviewed and each request is reviewed on a case-by-case basis. Requests must be submitted on the Accommodation Request form. The Pennsylvania Fire Service Voluntary Certification Program provides written notification of its decision to the candidate upon completion of its review and the review by legal counsel of the request for accommodation.

The *Accommodation Request* form is located on Page 8 of this manual or is available from the Pennsylvania State Fire Academy and test site coordinators. Please contact the Certification Program Manager for further information. The candidate who is requesting an accommodation must complete the request form at the time of application submission or as soon as the need for an accommodation is recognized. All requests must be made prior to the scheduled date of the examination. Any request for accommodation not submitted at least twenty (20) working days prior to the scheduled examination will result in a delay in the candidate's date of examination.

Documentation of a specific disability which would impact a candidate's performance on the written examination must be current (within five (5) years of the date of application). Such documentation should include a signed explanation on letterhead stationery from a professional who is familiar with the applicant's disability or a copy of an Individual Education Plan (IEP) from an educational institution. See below comment.

The statement must confirm and describe the disability for which the accommodation is requested. The professional must have expertise in the specific disability for which the accommodation is being requested.

Request for Accommodation Form

Name of Candidate: _____
Last Name
First Name
Middle

Address of Candidate: _____

Telephone Number (area code): _____
[Please list a number you can be reached at during the hours of 8 AM – 4 PM.]

County of Residence: _____ Email Address: _____

Certification Level Requesting Accommodation for: _____ Date of Test: _____

Test Site to which you have submitted your application: _____

I reviewed the NFPA job performance requirements for the level of certification I am seeking; and I am requesting the following accommodation(s) due to my disability related needs:

____ I have attached a statement on letterhead stationery from a professional who is familiar with my disability. I understand that the professional must have expertise in the specific disability for which I am seeking an accommodation for and the statement must confirm and describe the disability for which the accommodation is requested. Statement is signed by the professional.

____ I am submitting a copy of an IEP (Individual Education Plan) which I have obtained from my educational institution.

Signature of individual completing this form Date

Printed or type name of the individual completing this form

Return this form to: Pennsylvania State Fire Academy
Attn: Certification Program Manager
1150 Riverside Drive
Lewistown, PA 17044
(717) 247-3743

Recertification

In the Commonwealth of Pennsylvania, certification is a voluntary process; currently there is no requirement for recertification. Issuance of a certificate indicates the candidate has successfully passed the certification test. The certificate issued indicates the candidate is certified based on the edition and year of the standard under which the candidate certified. Furthermore, issuance of a certification certificate does not imply nor guarantee any indication of future performance because of the testing process.

Safety Policy

A candidate should meet the requirements of NFPA 1582 *Standard on Medical Requirements for Firefighters and information for Fire Department Physicians* prior to participating in any physical test to ensure his/her ability to safely perform the required tasks.

For the safety and protection of all participants, all equipment and Personal Protective Equipment (PPE) used in a test must meet the NFPA standard at the time of manufacturing. PPE will be inspected prior to use in a test.

The facial hair policy states candidates with facial hair which interferes with the operation or use of a Self-Contained Breathing Apparatus (SCBA) will not be permitted to participate in a test that requires use of a SCBA.

Test Results & Release of Results

The Office of the State Fire Commissioner / PA State Fire Academy notifies candidates of their results in writing via US Postal Service (i.e., mail). Only Pass/Fail grades are given.

In accordance with the Federal Education Records and Privacy Act (FERPA) of 1974 (a Federal law that established a minimum standard for the protection of educational records), PSFA requires prior consent from a candidate before any records or other personally identifiable information can be released. In the event a third-party requests test result, a Consent to Release Information form **MUST** be completed, signed, and submitted by the candidate to the PSFA before records are released to the third party.

No show policy

If a candidate is accepted for testing and fails to show up without an acceptable reason, the test site has the right to enforce their no-show policy that could include but is not limited to suspension from testing for an identified period of time and/or financial penalties.

Professional Testing Integrity and Dishonesty

Dishonesty in the professional test environment includes but is not limited to: cheating, plagiarizing, facilitating acts of testing dishonesty by others, having unauthorized possession of examinations, or submitting work of another person. Any instance(s) of testing dishonesty constitutes the need for disciplinary and/or legal actions. All certification candidates shall act with personal integrity, respect others rights and property, and help maintain a professional environment in which all can be successful.

Test Site Coordinators, Assistant Coordinators, Test Proctors, Evaluators and Instructors should take reasonable steps to anticipate and deter acts of dishonesty, reinforce integrity, and support appropriate behavior to protect the rights and trust of honest candidates. At the beginning of each test process, it is the responsibility of those to provide candidates with the "Testing Integrity and Dishonesty" policy and clarify questions that may arise.

Falsification of Documents

Any individual found to have forged, altered, or falsified documentation for the purpose of certification testing will be indefinitely suspended from participating in any certification exam within the Commonwealth of Pennsylvania. Further action may be taken in accordance with the Pennsylvania Crimes Code 18 Pa C.S. 4904, relating to unsworn falsifications.

Cheating on Test

All candidates are expected to work entirely on his/her own while taking any exam. Violations of test integrity consist of any attempt to receive assistance from written or printed aids unless provided by the test proctor for the purpose of a specific test, or any persons, papers or electronic devices, or of any attempt to give assistance

Document Integrity

Certification candidates are expected to complete any and all work individually. For any material obtained from other sources such as plot plans, web maps, etc., a source reference must be given. All essay answers must be the candidate's own work.

Study Reference List

The following list references texts that may be helpful in preparation for the test.

1. National Fire Protection Association NFPA 1021 (2014 Ed) Standard for Fire Officer Professional Qualifications;
2. Jones and Bartlett, Fire Officer: Principles and Practices, 3rd Edition;
3. Jones & Bartlett: Public Safety Group Navigate 2 Test Prep: Fire Officer I & II
<https://www.psglearning.com/fire/officer/productdetails/9781284070798>
4. Skill Sheets are available on the OSFC website www.osfc.pa.gov

Additional Information

1. Applications shall be submitted to the test site by their established deadline or no later than 3 weeks prior to the test date.
2. Please contact the test site of your choice to receive information about testing fees.
3. A Photo ID is required at the time of the written and skills test.

Certification applications and skill sheets, in addition to the test schedule and test site contact information, can be found at www.osfc.pa.gov under < State Fire Academy > link, then the < Certification > sub-link at the top of the webpage. A page will open with information about the certification program and process. Scroll through the page to find the links for certification applications, skill sheets, test schedule, and test site contact information.

If you have additional questions or concerns about the test process, please contact the test site coordinator at the site in which you applied to be tested at or contact the PA State Fire Academy Certification Program Staff.

Skills Completion Information

Post-Course Completion Method

Candidates will participate in a face-to-face skills session for two skills (Skills A and C) given these are mandatory and possibly Skill B (i.e., a random skill) if selected. In addition, candidates will also take a written test at the test-site facilitating the test. Both mandatory and random skills are used in the Fire Officer 1 certification test.

Candidates are required to complete six mandatory and two random skills for a total of eight skills in a Fire Officer 1 certification test. Skill sheets are posted on the Office of the State Fire Commissioner's web-site (www.osfc.pa.gov). Candidates should review all skills, and be prepared to test (i.e., complete) the mandatory skills and any of the six random skills.

For the face-to-face session, Skills A and C are mandatory; therefore, candidates can expect to complete these two skills. Skill B is a random; therefore, candidates **MAY** need to perform this skill if chosen for a test session. Content used in Skills A, B, and C is provided to the test-site by the Academy.

For Skills D, E, F, I, and J, the content needed to complete the skills are contained within this handbook.

For Skills G and K, the content is provided by the Academy to the test-sites, and subsequently to the candidates. The forms and format for competing these skills are provided within this handbook.

For Skills H and L, the facility / topic is chosen by the candidate. Please review the guidance provided in this handbook to assure your selections meet the criteria necessary to successfully complete the skills. Also, the forms and format for competing these skills are provided within this handbook.

NOTE: On test day, **candidates are to have their test packet (i.e., skills) complete and ready to turn in prior to the written test.** This applies for **ALL** skills **EXCEPT** Skills A, B, C (face-to-face format).

Challenge Method

For candidates who choose the challenge method, contact PSFA certification staff for the information needed to complete the stations.

Fire Officer 1

Guide 1

Skill Station A- Emergency Incident (NFPA 1021 - JPRs 4.1.1, 4.1.2, 4.2.1, 4.6.2, 4.6.3)

This skill is evaluated in-person during a scheduled test time. The candidate is given an emergency scenario involving a fire (i.e., single-family dwelling) or other incident type, and is required to manage the incident until the arrival of a command officer and will document the incident using a tactical work sheet (see next page). The candidate will evaluate the situation, determine a course of action, implements the plan, supervises personnel, and evaluates the plan's outcomes. As the first-due command officer, it is essential appropriate aspects (e.g., safety, accountability, RIT) be addressed in coordination with the tactical operations to mitigate the scenario. Safety concerns **MUST** be addressed (per Task 4 on the skill sheet) to pass this skill.

Skill Station B- Non-Emergency Incident (NFPA 1021 - JPRs 4.1.1, 4.1.2, 4.2.2, 4.2.6, 4.6.3)

This skill is evaluated in-person during a scheduled test time. The candidate is given a non-emergency scenario involving a specific work detail and evaluates what needs to be done, determines a course of action, develops a plan, make assignments, and supervises the personnel to complete the objective(s). Safety concerns **MUST** be addressed (per Task 4 on the skill sheet) to pass this skill. The content used for the scenarios is provided by the Academy to the test-site. Test-sites will provide the tasks on the day of the test.

Skill Station C- Directing a Training Evolution (NFPA 1021 - JPRs 4.1.1, 4.1.2, 4.2.3, 4.7.1)

This skill is evaluated in-person during a scheduled test time. The candidate is given a company-level training topic and is asked to deliver a 5 to 10-minute, impromptu training session. The candidate evaluates the training need, the experience, knowledge, and skills of the personnel, determines the appropriate level for instruction and implements the training session. Safety concerns respective of the training conducted **MUST** be addressed (per Task 4 on the skill sheet) to pass this skill. The content used for this skill is determined by the Academy and provided to the test-site. You will be advised to prepare for a select number of potential topics (i.e., 5 – 6) from which one will be selected by the evaluator for you to demonstrate. This skill emulates a “tail-board” training session whereby you as a company officer wants to take a few minutes to review some aspect of operational performance (e.g., positioning a PPV, checking a SCBA cylinder, determining building heights for selecting the correct ground ladder, etc.). It is not one that warrants a lesson plan. Topics are of a basic nature and are ones a fire officer should be able to discuss with company personnel in a proficient manner.

Skill A: Work Sheet.

Candidates may use an alternative command worksheet. The form must be turned in with the skill evaluation form.

FIRE DEPARTMENT TACTICAL WORK SHEET

Incident Location/Address: Command Post Location: Fire Fighting Mode: () Offensive () Defensive Utilities: () Electric () Gas () Water () _____	Alarm Time: _____ Elapse Time: () 10 min. () 20 min. () 30 min. () Search/Rescue () Primary Search () Secondary Search () Fire Spread (V)vert./ (H)orz.	Weather: Wind Speed: _____ Direction: _____ Humidity: _____ Temp.: _____	STAGING/RESOURCES Officer: _____ Radio Chan.: _____ Location: _____
VICTIMS White: _____ Gray: _____ Red: _____ Blue: _____ Green: _____ EMS _____ EMS _____ EMS _____ EMS _____ EMS _____ EMS _____			
ASSIGNMENTS Group/Division Officer/Unit Location Radio Channel Units Assigned	ASSIGNMENTS _____ _____ _____ _____ _____	ASSIGNMENTS _____ _____ _____ _____ _____	ASSIGNMENTS _____ _____ _____ _____ _____

Fire Officer I
Guide 2
Skill Sheet D
Personnel Policy Action

Skill Station D – Personnel Policy Action
(NFPA 1021 - JPRs 4.1.1, 4.1.2, 4.2.4, 4.2.5)

Personnel Policy Action

For this skill, the candidate will assess a personnel situation, apply a course of action in accord with the provided policy, and write a memorandum to their supervisor identifying and documenting the incident, and what actions were taken. The memo must reference the applicable components of the policy and procedures; in addition, the memo must describe how the policy and procedures were applied. The memo shall be coherent and logically structured.

Task

Given the scenario provided below, review the situation, determine your course of action based on the policy, and write a memo to your supervisor identifying and documenting the situation, the course of events, and what actions you implemented to manage the concern. The memo shall reference the appropriate policy(s) and procedures for the situation and how the policy and applicable procedures were applied. The memo may be written on the supplied form or on your agency's letterhead.

NOTE: *Please check your work against Skill Sheet D to ensure you incorporated all required tasks.*

Scenario

Firefighter Kevin Jones arrived at work on time and is conducting the morning equipment/apparatus check. While checking your own PPE, you are talking with Kevin and you are aware his responses are somewhat slower than normal, loud and bordering belligerence, and you noticed that Kevin's behavior (i.e., cannot hold a proper posture) seems to indicate he may be under the influence of alcohol. You call Kevin aside to assess the situation. When questioned, Kevin claims he was at a party last night and someone spilled an alcoholic drink on him. He further states he did not have time to shower before reporting to work. What do you do?

Rules of Conduct MP 102.01 6 / 96-R

The following outlines the Phoenix Fire Department (PFD) philosophy and standard of conduct regarding the members of the PFD. The basis for these regulations is the following policy:

Every member of the Phoenix Fire Department is expected to operate in a highly self-disciplined manner and is responsible to regulate his/her own conduct in a positive manner, and in a productive and mature way. Failure to do so will result in disciplinary action ranging from counseling to dismissal.

All Members Shall

1. Follow the Operations Manuals and written directives of the PFD and the City of Phoenix;
2. Use their training and capabilities to protect the public always - on and off duty;
3. Work competently in their positions to cause all department programs to operate effectively;
4. Always conduct themselves to reflect credit on the Department;
5. Supervisors will manage in an effective, considerate manner, and subordinates will follow instructions in a positive, cooperative manner;
6. Always conduct themselves in a manner that creates good order inside the Department;
7. Keep themselves informed to effectively do their jobs;
8. Be concerned and protective of each member's welfare;
9. Operate safely and use good judgment;
10. Keep physically fit;
11. Observe the work hours of their position;
12. Obey the law;
13. Appropriately use and maintain Department equipment and property.

Members Shall Not

1. Engage in any activity detrimental to the Department;
2. Engage in an activity deemed a conflict of interest to the Department or use their position with the department for personal gain or influence;
3. Fight;
4. Abuse their sick leave;
5. Steal;
6. Use alcoholic beverages, debilitating drugs, or any substance which could impair their physical or mental capacities while on duty, or report to work while under the influence of the same;
7. Engage in any sexual activity while on duty.

Employee Discipline MP 102.05 06 / 94-R

Purpose

Phoenix Fire Department members are required to conduct themselves in a highly self-disciplined manner, obeying the City of Phoenix Personnel Rules and Policies, Fire Department Rules of Conduct (MP 102.01) and Departmental Standard Operating Procedures. In situations where members do not adhere to these expectations, supervisors will take the necessary action to correct the problem.

This procedure will guide Phoenix Fire Department supervisors in dealing with disciplinary problems for which they may encounter. For additional information, the Supervisor's Manual, published by the City of Phoenix Personnel Department, should be consulted. If supervisors have any questions concerning employee discipline, they should be directed to the Department's Personnel Section.

General Information

It is the policy of the PFD that supervisors administer discipline in a corrective, progressive, and lawful manner.

Corrective in the sense the supervisor and member come to an understanding about the causes/ reasons for a member's deficiencies, correct those deficiencies, and restore the member to a productive and positive employment status.

Progressive in that discipline will normally begin with a verbal reprimand or warning and, when circumstances of separate or related incidents warrant, proceed to written reprimand(s), suspension without pay, demotion, and finally to dismissal. An incident of misconduct may require any of these forms of disciplinary action whether a lesser form has preceded that action; this is dependent on the severity of the offense.

Lawful in that discipline and the procedure by which it is administered does not violate City Personnel Rules or Administrative Regulations, Departmental Rules of Conduct, the Memorandum of Understanding between the City and the Union, Departmental Standard Operating Procedures, or the member's constitutional rights.

The principal objective of disciplinary action is to improve (or correct) performance, efficiency, and morale of the member receiving discipline as well as that of the Department. Disciplinary proceedings and the results thereof are confidential. The supervisor is responsible for maintaining this confidentiality. All media inquiries pertaining to disciplinary actions shall be directed to the Fire Chief, Personnel Chief, or Assistant Fire Chief of Corporate Communications. The contents of a reprimand or separation notice are public record and subject to disclosure.

Supervisors should keep in mind all disciplinary actions imposed are reviewed by their superiors, in addition to being subjected to either the grievance process or the Civil Service appeal. It is mandatory that supervisors seek support from their superiors prior to taking disciplinary action, and feel comfortable they can support their actions in a formal review or appeal process. Support from superiors is extremely important when disciplinary action beyond a verbal reprimand is considered. The Department Personnel Section, upon request of the supervisor, is available to provide staff support and guidance in any disciplinary action. Also, the Director of Training shall be notified of all disciplinary actions involving a probationary Firefighter or Firefighter Trainee.

Employee Assistance Program

Occasionally, supervisors may be approached by members who have personal problems and require assistance. Many times just listening and helping the member reason through the problem will be all that is needed. Other times, particularly with serious alcohol, drug, stress, marital, or financial problems, the member may require professional

assistance. This help is available through the Employee Assistance Program (Ref. MP 105.01A). Supervisors must be aware that when a member's personal problems involve violations of City or Departmental Rules or Policies, disciplinary action may be necessary in addition to entering the Employee Assistance Program.

Union Representative

Employees who are members of bargaining units have the right to union representation in disciplinary actions if they so choose. The presence of a Union Representative will require a non-unit supervisor to become involved. If the second level of supervision (or above) is directly involved in the disciplinary action and/or investigation of a member represented by Local 493, the right of Union representation will be stated directly to the member. If a member requests they not to be represented by the Union in a disciplinary action and/or investigation, then that request will be honored and documented.

Legal Representation

Supervisors **MAY** allow legal counsel for the member in disciplinary actions resulting from alleged criminal activity. Legal counsel's function is to advise the member during the process, not to answer for the member.

Programs for Improving Job Performance

In most cases, minor job performance problems can be resolved by the supervisor bringing the issue to the attention of the employee and the employee making the proper modification in their performance. However, when a serious job performance problem is identified, the supervisor must decide whether to solve it through:

- Training
- Employee Assistance Services
- Non-Disciplinary counseling
- Disciplinary Action

Each situation will be considered separately, and it will be the supervisor's responsibility to determine the best course of action to take to resolve the situation.

If the situation is determined to be a training problem, a program for improvement will be developed for the member. This may best be accomplished through use of an Employee Performance Appraisal Report. If a scheduled rating is used, the appropriate section or sections on the forms must be rated. If it is unscheduled, only the applicable section or sections which are unsatisfactory or require improvement are rated.

When utilizing the Employee Performance Appraisal Report to prepare a program for improvement, attachments must be included that clearly identify the member's problem areas(s). These attachments must include measurable objectives for improvement. The program must also indicate a reasonable time frame within which the objectives are to be met. At the completion of the evaluation period, if the member's performance is corrected, another Employee Appraisal Report should be completed indicating compliance with standards in all areas. If the member's performance did not improve sufficiently, the situation should be dealt with as a disciplinary problem.

Investigative Process

Any accusation of misconduct or complaint involving PFD members shall be thoroughly investigated before formal action is taken. The investigation is a fact-finding process, and supervisors must be cautioned not to make judgments until a thorough investigation is concluded.

For accusations and complaints of serious on-duty misconduct an investigative report must be completed. Accusation of complaints involving criminal misconduct will be assigned by the Personnel Chief to the Performance Auditing Section for investigation. Exceptions to this are some misdemeanor infractions of the law, which will be investigated by the appropriate supervisor. The Fire Chief, with approval of the City Manager, has the discretion to suspend the employee (with pay), or reassign an employee pending the outcome of the investigation.

When a supervisor prepares an investigative report, it must include the following information before it will be considered complete:

Summary of the Incident: This should answer the questions: Who, What, When, Where and How? In a criminal situation, a Summary of the police report will be requested through the Performance Auditing Section.

Interviews Conducted: This section must include the interviewee, rank and assignment, date, time, location, those present, and the information discussed. If possible, a signed statement by the interviewee should also be obtained. When an accused member is being interviewed, and the complaint is of a criminal nature, the member shall be advised that:

- He/she has the right to Union representation;
- The questions asked will be narrowly and specifically related to employment issues;
- Statements will not be used against the member in criminal proceedings. If a subpoena is received for any of the information contained in the investigation, the City of Phoenix will use all legal resources available to suppress the subpoena;
- Failure to cooperate is a violation of Personnel Rule 21B16 and serves as a separate basis for disciplinary action, including dismissal.

Employee History: This is a summary of commendations, performance rating, and previous disciplinary actions concerning the employee. The Departmental Personnel file and the District File shall be reviewed. If the investigation involves criminal activity, a background check must be requested through the Performance Auditing Section.

Conclusion: From the information available, the supervisor must make a determination of responsibility. Extenuating circumstances may be discussed in this section.

Recommendations: State the recommended disciplinary action or alternate course of action, if any.

Attachments: Provide relevant documents the supervisor feels should be a part of the investigative report. The complete report shall be forwarded to the Fire Department Personnel Chief via the appropriate Division Head. The investigative report is CONFIDENTIAL and for administrative use only. Care will be taken to maintain the confidentiality of the report.

Questions concerning legal issues pertaining to administrative investigations should be directed to the Fire Department Personnel Section. The following are legal issues supervisors should keep in mind when conducting administrative investigations.

- A member may be compelled by supervisors to answer questions related to their duties or fitness for duty. Failure to answer such questions completely and truthfully may form the basis for disciplinary action, including dismissal. A member under investigation should be so advised of this potential prior to an administrative interview. In an investigation involving a criminal matter, the member should be advised of the following:
 - He/she has the right to Union Representation;
 - Questions asked will be narrowly and specifically related to employment issues;
 - Statements will not be used against a member in criminal proceedings. If a subpoena is received for any of the information contained in the investigation, the City of Phoenix will use all available legal resources to suppress the subpoena;
 - Failure to cooperate is violation of Personnel Rule 21B16 and serves as a separate basis for disciplinary actions including dismissal;
- If an attorney is permitted, and the matter is of a criminal nature, the attorney's function is to advise the member, not to answer for him/her;
- Lockers, desks, etc., furnished by the Department for the use of members are subject to inspection and if reasonable grounds for suspicion exist, may be searched by supervisors without a search warrant. Items found may be used in a disciplinary proceeding;
- If reasonable ground for suspicion exists, a member may be required by supervisors to submit to blood or urine test to determine whether he/she is under the influence of alcohol, drugs, or other controlled substances while on duty. These tests must be performed under medical supervision.

Suspected On-Duty Substance Abuse

Reporting for work under the influence of alcohol or drugs, or any substance which impairs any employee's mental or physical capacity, will not be tolerated. The unauthorized use, sale, purchase, or possession of alcohol or controlled substances at the work site is prohibited and shall be grounds for discipline up to and including dismissal. When there exist reasonable grounds to believe an employee is under the influence of alcohol, drugs, or other controlled substances, the supervisor may direct the employee to submit to a drug screening and /or blood alcohol test. Refusal to submit to such a test will subject the employee to disciplinary action up to and including dismissal. Any employee using medication or prescribed drugs which may impair job performance shall report this fact to his/her supervisor.

Supervisory Responsibilities

If a supervisor has reasonable grounds to believe an employee is under the influence of alcohol, drugs, or other controlled substances when reporting for work or during the work shift, the supervisor has the obligation to verify the employee's condition and relieve the employee of his/her duties. The second level supervisor must be notified of the situation and must respond to the workstation. A union representative shall be contacted to respond in case the employee requests representation.

The possibility of liability to the City and to the supervisor exists if an employee who is under the influence of alcohol, drugs, or other controlled substances can remain working, to operate or drive vehicles or equipment on the job, or to drive a private vehicle from the work site. An employee who is believed to be under the influence must not be allowed to operate or drive a vehicle, including a private vehicle, until the condition of the employee is determined.

Observation

If a supervisor observes an employee who seems to be under the influence of alcohol, drugs, or other controlled substances, he/she should, if practical, seek the opinion of the least one additional supervisor. Reasonable grounds should exist before requesting the employee to take a drug screening and/or blood alcohol test. Reasonable grounds would include a combination of various factors such as slurred speech, red eyes, dilated pupils, incoherence, unsteadiness of feet, smell of alcohol or marijuana emanating from the employee's body, inability to carry on a rational conversation increasing carelessness, erratic behavior, inability to perform the job, or other unexplained behavioral changes. The supervisor shall document these observations in writing. A copy of this document will be provided to the employee upon request.

Referral for Testing

If the supervisor determines that reasonable suspicion of impairment exists, the employee should be directed to accompany the supervisor to the O.M.P. facility, 1551 West Van Buren during the hours of 8 AM to 5 PM. If after normal business hours, employees can be taken to O.M.C. Airport Urgent Care, 2502 East Washington Street for drug screening or blood alcohol test to determine fitness for duty. All required releases and/or forms will be filled out and signed by the employee at O.M.C before a sample is obtained. The employee should be informed that tests will be conducted on City time, paid for by the City, and are part of his/her job responsibilities. The employee should be informed that refusal to take a drug screening and/or blood alcohol test or sign a release of information form may face disciplinary action up to and including dismissal.

A drug screening or blood alcohol test found to be positive would be verified by an additional test. O.M.C. will ensure adequate chain of custody for sample collection and testing. Upon request, a separate sample will be provided to the employee for independent testing at his/her expenses.

Test Results

Employees who test positive, refuse the test of release, or refuse the release of information shall be considered unfit for work and will be relieved from duty that day. The employee should not be allowed to drive to the hospital or home. If the employee submits to the test and signs the release of information, he/she will be placed on paid leave or "city business" until the status of the tests and the circumstances surrounding the impairment are determined.

Determining the Proper Disciplinary Action

After an incident or complaint is thoroughly investigated, and the need for disciplinary action determined, the supervisor must decide what will be the most effective course of action. Factors to consider in the decision include:

- Seriousness of the offence;
- Member's past history with the Department;
- Past PFD practice in dealing with similar offenses. Supervisors may have to consult the Fire Department Personnel Section for this information.

Consistency is critical to any disciplinary system. Although disciplinary action for the same offenses should be "similar," the final decision to determine the exact action will be made after considering the factors previously listed, and applying them to the particular situations.

Supervisory Counseling

Verbal

This is the most often used and least severe of the formal group of corrective actions. It is a verbal warning. When properly administered, it serves to notify employees that certain behaviors or performance deficiencies need changing/improving or that discipline will take place. The supervisor should keep notes of the counseling session for future reference and guidance. Notes or records should be placed in the supervisor's file.

Written

A supervisor may elect to document with a memo of counseling. This memo of counseling may be placed in the Employee's District or Personnel File.

Written Reprimand

Supervisors may elect to use formal written reprimands to document a repeat offense of a minor infraction, or a more serious single infraction for which suspension, demotion, or dismissal is not appropriate. The form used for issuing a formal written reprimand is Form 1408D.

City of Phoenix Written Reprimand (Form 1408D Revised 4/91): When the supervisor decides to issue a formal written reprimand he/she will prepare a Written Reprimand Form. The distribution of the document is the white copy to the employee and the canary and pink copies are forwarded to the Personnel Control Officer for inclusion in member's department personnel file and City personnel file. In a case involving the performance of probationary firefighter, a photocopy of the document is forwarded to the Director of Training.

Preparation of Memos of Counseling and Written Reprimands

A memo of counseling that documents a verbal reprimand, or a formal written reprimand shall be provided by the supervisor to the member. Either document should be written in a conversational manner, that is as if the member was in a conversation with the supervisor.

The following must be included in either document:

- Date of preparation;
- Description of the incident;
- Rule(s) and /or policy violation;
- Explanation of what is expected of the member in the future and written as a clearly stated objective(s);
- Disposition of the document;
- Review date for possible removal from his/her personnel file in accordance with P-10511;
- Signature of both supervisor and member, as an indication the employee understands (albeit not necessarily agrees with) the content of the document and has received a copy.

If a member refuses to sign a formal written reprimand, the supervisor must obtain a witness signature on the document indicating that refusal. The document is then forwarded as previously described. A member's refusal to sign is not grounds for separate disciplinary action.

If, as a result of the disciplinary action, a formal grievance is filed, the Department will be represented in the grievance hearing by the appropriate Division Head or a designated representative. A date for review or a time at which the member may request the removal of the document from the personnel file may be indicated. For information relating to removal of documents, see MP 105.11 "Removal of Documentation from Personnel Files".

Suspension, Demotion or Dismissal

Suspensions, demotions, and dismissals are utilized as punitive, yet corrective measures taken for numerous repeated incidents of a rule infraction or a single major infraction by a member. It is the responsibility of the supervisor to stabilize a situation in which immediate action is necessary. This may require relieving the member from duty (with pay) until a decision is made concerning the official action taken. Supervisors should not prematurely commit themselves to a specific form of disciplinary action.

The Fire Chief will make the final decision concerning suspensions, demotions, or dismissal. This will ensure the consistency of serious discipline administered throughout the Department. When the final decision is made concerning the proper course of action, a Discipline Notice (Form 60-21 Revised 1/91) will be prepared by the Personnel Section and disciplinary action will be administered.

Any suspension, demotion, or dismissal is subject to an appeal with the Civil Service Board within fourteen days of serving the notice or twenty-one days from the date of certified mailing. If a formal appeal is filed, the Department will be represented in the Civil Service hearing by the appropriate Division Head or a designated representative. The Department Personnel Section will furnish staff assistance.

**PHX Fire Department
City of PHX**

DATE:

TO:

FROM:

RE:

DESCRIPTION: *(Use as many pages as needed to ensure all items and actions are documented).*

ACTION(S) TAKEN:

EMPLOYEE SIGNATURE: _____

COMPANY OFFICER'S SIGNATURE: _____

Fire Officer I
Guide 3
Skill Sheet E
Community Relations Concerns & Inquires

Community Relations - Concerns and Inquires (NFPA 1021 - JPR's 4.1.1, 4.1.2, 4.3.1, 4.3.3, 4.4.2)

The candidate is provided a scenario describing a citizen's inquiry or concern. The candidate will complete the forms and provide a narrative documenting the citizen's request according to the authority having jurisdiction's policy and procedures. Please use additional paper as needed. Also, it is recommended the forms be typed.

NOTE: Any document submitted that is not legible (readable) will be returned to the candidate for correction.

Task

Given policies and procedures, an inquiry or concern from a citizen, and forms and a record management system, the candidate will respond to the request, initiate action, and document the inquiry or concern in accordance with the current NFPA 1021 standard so that the following are addressed:

1. The request is answered accurately and courteously;
2. The request is answered or referred to the appropriate individual for action;
3. All policies and procedures are complied with and actions are in accord with the policies and procedures;
4. All reports and logs are complete and files are maintained in accordance with policies and procedures.

The following documents must be provided:

1. Community Relations Request
2. Community Relations Candidate Response
3. Daily Station Shift Log
4. Memo to Person-in-Charge

NOTE: Please check your work against Skill Sheet E to ensure you have completed all tasks required. Be sure to provide a clear description of how the inquiry would be handled (i.e., reporting chain) once received.

Scenario

It is an early fall day and schools in your neighborhood are back in session. You are assigned to cover the watch desk at the station for the afternoon shift. Given the watch station is at the main entrance, you are the first individual visitors meet upon entering the station. A little after 3 PM, Ms. Marianna Potter, Deputy Director for the Mountainside Childcare Center enters and request a fire prevention program be scheduled for her center. She indicates that since childcare scheduling varies during the day, that there be two sessions: one in the morning around 9 AM, and the other in the afternoon around 2 PM. Ms. Potter leaves her name and phone number (provided below) and indicates she will be the point-of-contact to schedule the sessions. She also requests she be contacted as soon as possible to schedule the sessions and asks you if you have any questions. She thanks you for your time and leaves the station.

Ms. Marianna Potter, Deputy Director
Mountainside Childcare Center
1717 Morningside Road
Anytown, PA 00000
111-323-5454
mpotter@mccpotter.amnot

Community Relations Request

Date: _____ Request Type: _____

Point-of-Contact / Name: _____

Contact Information: _____

Address: _____

Best Time to Contact: _____

Facility Type / Occupancy: _____

Special Concerns / Considerations: _____

Other Information: _____

Person Taking Request (please print)

Signature

Date

Date Request Filed: _____

Community Relations – Candidate Response

What form (i.e., hardcopy / softcopy) is the documentation initiated?

What are the essential pieces of information needed?

Per procedure, explain how the inquiry is handled once you have completed the initial forms. Make sure to include to whom it is routed, timeliness of response, if additional copies are needed, and how the request is filed.

DAILY STATION SHIFT LOG

Date:		Station:		Shift:	
-------	--	----------	--	--------	--

Activity Log:

Name	Start Time	End Time	Description / Comments	Signature

Incident Responses:

Alarm #	Time Out	Time In	Incident Type	Incident Location	Signature

Correspondence Log:

Type	Message / Request	Time Received	Action Taken	Signature

Candidate Signature: _____ **Date:** _____

**MNO Fire Department
City of MNO**

DATE:

TO:

FROM:

RE:

DESCRIPTION: *(Describe the request / concern).*

ACTION TAKEN:

EMPLOYEE SIGNATURE: _____

COMPANY OFFICER'S SIGNATURE: _____

Fire Officer I
Guide 4
Skill Sheet F
Personnel Policy Implementation

Personnel Policy Implementation

(NFPA 1021 - JPRs 4.1.1, 4.1.2, 4.4.1, 4.4.2)

For this skill, the candidate reviews the personnel policy below (or using their organization's policy) and writes a memorandum explaining how they would implement the policy. Be sure to explain how the policy is communicated and how you confirmed all members understand the policy. Be sure to address all tasks from Skill Sheet F in the memorandum.

NOTE: If you are using your organization's policy, then a copy of the policy **MUST** be provided along with your memorandum.

Task: Given a new department personnel policy, implement the policy at the unit level in accordance with the current NFPA 1021.

Sexual Harassment Policy

Purpose

The Anytown Emergency Services Training Center assumes an affirmative posture to prevent and eliminate sexual harassment by any faculty, employee, student, or visitor in any work unit or educational experience. It is the policy of this training center that any practice or behavior which constitutes sexual harassment will not be tolerated. Sexual harassment involves the behavior of a person from either sex against a person of the opposite sex or same sex when that behavior falls within the definition outlined below.

Definition

Sexual harassment of any faculty, employee, student, or visitor at Anytown Emergency Services Training Center is defined as any unwelcome sexual advances, request for sexual favors, or other verbal, physical, written, or visually implied conduct or behavior of a sexual nature when:

- Submission to such conduct is made explicitly or implicitly as a term or condition of an individual's employment;
- Submission to or rejection of such conduct is used as the basis for employment decisions affecting an individual;
- Such conduct creates an effect of unreasonably interfering with an individual's work performance, or educational experience, or creates an intimidating, hostile, or offensive work or educational environment.

Such conduct includes, but is not limited to:

1. verbal harassment or abuse;
2. subtle pressure for sexual activity;
3. sexist remarks about a person's clothing, body or sexual activities;
4. unnecessary touching;
5. leering at or ogling of a person's body;
6. constant brushing of another person's body;
7. demanding sexual favors accompanied by implied or overt threats;
8. physical assault.

Resolve

Anyone who feels that he/she has been sexually harassed under the definition presented herein and wishes additional information or assistance in filing a complaint should contact the Director, who is the Anytown Equal Opportunity Employment Officer at telephone (555) 555-5555.

Fire Officer I

Guide 5

Skill Sheet G

Inspection & Investigation Cause Determination

Inspection & Investigation: Cause Determination

(NFPA 1021 – JPRs 4.5, 4.5.3, 4.5.2, 4.1.2)

Given a scenario and images of a fire scene, the candidate will describe how the scene is secured and how evidence is preserved in accordance with the authority having jurisdiction's policy and procedures. Additionally, the candidate shall provide a written report or narrative of the fire scene investigation. A candidate worksheet is provided to assist in constructing the report or narrative.

Task: Given a fire incident, resources to secure a fire scene, interview information from first responders and other individuals involved in the incident, and scene observations, demonstrate the ability to secure an incident and preserve the scene or any evidence. Once secured, explain how you would conduct a preliminary investigation; be sure to address the following:

- procedures for contacting the fire marshal and local police;
- how you would communicate your findings to the investigators;
- what individuals were interviewed and what information was provided;
- an overview of potential causes and your assessment of the cause;
- noticeable patterns or other relevant information that informs the investigation as to cause.

The candidate will provide responses to the above in the form of a report. This report can be an incident report or a written narrative; regardless of which format used, all relevant information must be included and is in accord with skills requirement of NFPA 1021. A work sheet is provided to assist candidates in organizing the data in the collection process.

NOTE: Please check your work against Skill Sheet G to ensure you have completed all tasks required.

In addition, the following question can be used to assist in writing the report or narrative.

1. What aspects of the fire scene should be considered in investigating the fire and determining its cause?
2. What indications do you see that may explain how the fire started?
3. Where do you think was the location/origin of this fire?
4. How do you think this fire started?
5. Who needs to be interviewed and what information should be solicited?
6. How is the scene secured until the fire investigation is complete?

Completion Method

Post-Course Completion Method

The scenario for this skill is provide by the Academy to the test-site for distribute to the candidates in adequate time to complete the skill prior to the test date.

Challenge Method

For candidates who choose the challenge method, contact PSFA certification staff for the scenario information needed to complete this station.

Candidate Work Sheet

Discarded Container

--

Witnesses _____

During Suppression Activities

Unusual colors or odors:	Abnormal fire behavior:	Empty structures:	Obstacles hindering suppression:	Structural alterations:

After Extinguishment:

Maintain scene security	Document all events and personnel

Support Services:

Police	Detained anyone for questioning	EMS	Treatment on scene or hospital

Key Holder

Person(s) in structure at time of incident	What were they doing?
Where were they doing it?	Persons arriving after incident?

Contractors

Was any work being done on the structure, or had any work just been completed?

Narrative: _____

Fire Officer I
Guide 6
Skill Sheet H
Emergency Services Delivery
Pre-Incident Plan

Emergency Services Delivery: Pre-Incident Plan
(NFPA 1021 – JPRs 4.5.1, 4.5.2, 4.1.1, 4.1.2)

Using the forms provided, prepare a preplan of a commercial building. The preplan packet shall include the:

- Preplan form (provided below)
- Building plan
- Plot plan and any other significant information.

Task: Given a facility and criteria per NFPA 1021 (JPRs 4.5.1 & 4.5.2), preplan policies and procedures, size-up information for an incident and emergency response resources, and the provided forms, prepare a preplan for a commercial building which includes a plot plan, a floor plan, and all other significant information in accordance with the current NFPA 1021 standard.

The candidate selects the facility to preplan; however, please read Notes 1 and 2 below.

NOTE - 1: Please check your work against Skill Sheet H to ensure you have completed the all tasks. You **MUST** use the forms provided in this handbook.

NOTE - 2: Aerial imagery cannot be used for the plot plan. However, use of existing digital maps, architectural floor plans (for the floor plan), site plans and/or Graphic Information System (GIS) maps will be accepted, however the required details **MUST** be drawn/diagramed by hand by the candidate (e.g., utilities, hazards, fire suppression/smoke detectors, hydrants, water supply distances, large obstacles [furniture, office desk/equipment, machinery], orientation directional symbol, fire department connections [FDC], and fire alarm control panels). This preplan **CANNOT** be the same facility used in for your Firefighter 2 certification test. In addition, the facility selected **MUST** be an occupied commercial structure, have some form of fire protection system (i.e., detectors, suppression system, standpipes) or infrastructure (i.e., fire walls, fire rated doors, etc.). Furthermore, the facility **CANNOT** be a fire, EMS, or other first responder facility nor a facility designated as secure/classified by a governing authority (i.e., state or Federal).

Be sure the preplan is complete, accurate, and legible.

Candidate Name: _____ Social Security # _____ (Page 1 of 3)

PRE-INCIDENT PLANNING FORM OF TARGET BUILDING

Building Name: _____ Occupant: _____
 Address: _____ City, State, Zip: _____
 Owner Name: _____ Emergency Contact: _____
 Owner Phone #: _____ Emergency Contact #: _____
 Primary Entrance/Side: _____ Forcible Entry Points: _____
 Secondary Entrance/Side: _____ Key Box Location: _____

BUILDING INFORMATION (DATA)

Type of Occupancy ___ Assembly ___ Business ___ Education ___ Factory ___ High-Hazard
 ___ Institution ___ Mercantile ___ Residential ___ Storage ___ Multi-Occupancy

Processes: _____
 Population During Business Hours: _____ Population After Hours: _____
 Special Population Targets and Locations: _____
 Salvage Targets & Locations: _____
 Occupancy Hazards: _____

HAZARDOUS MATERIALS

Hazardous Materials: Yes No N/A MSDS Location: _____
 SARA (Tier II) Facility: Yes No N/A Chemical Inventory List Provided: Yes No If No, Location: _____

CHEMICAL NAME (List 3 of the Highest Hazard Potentials)	UN ID#	QUANTITY (lbs. / gals)	LOCATION
1.			
2.			
3.			

BUILDING CONSTRUCTION

Type of Construction ___ Type I ___ Type II ___ Type III ___ Type IV ___ Type V
 Dimensions Length _____ ft. Width _____ ft. Total Sq. Ft. _____
 Number of stories Above Ground _____ Below Ground _____ Approximate Height: _____ ft.

Construction Details:

<p><u>Wall Construction</u></p> <p><input type="checkbox"/> Wood <input type="checkbox"/> Metal <input type="checkbox"/> Concrete <input type="checkbox"/> Masonry (Brick / Block) <input type="checkbox"/> Other: _____</p>	<p><u>Floor Construction</u></p> <p><input type="checkbox"/> Truss (Yes/No) <input type="checkbox"/> Lightweight Construction <input type="checkbox"/> Wood <input type="checkbox"/> Metal <input type="checkbox"/> Concrete <input type="checkbox"/> Other: _____</p>	<p><u>Roof Construction</u></p> <p><input type="checkbox"/> Truss (Yes/No) <input type="checkbox"/> Lightweight Construction <input type="checkbox"/> Wood <input type="checkbox"/> Metal <input type="checkbox"/> Concrete <input type="checkbox"/> Other: _____</p>	
<p><u>Roof Type</u></p> <p><input type="checkbox"/> Pitched <input type="checkbox"/> Shed <input type="checkbox"/> Flat <input type="checkbox"/> Mansard <input type="checkbox"/> Arched <input type="checkbox"/> Gambrel <input type="checkbox"/> Hip <input type="checkbox"/> Lantern <input type="checkbox"/> Other: _____</p>	<p><u>Wall Covering</u></p> <p><input type="checkbox"/> Sheetrock (Drywall) <input type="checkbox"/> Plaster <input type="checkbox"/> Wood / Paneling <input type="checkbox"/> Ceramic Tile <input type="checkbox"/> Masonry <input type="checkbox"/> Other: _____</p>	<p><u>Floor Decking</u></p> <p><input type="checkbox"/> Wood <input type="checkbox"/> Concrete <input type="checkbox"/> Concrete (reinforced) <input type="checkbox"/> Metal <input type="checkbox"/> Other: _____</p>	<p><u>Roof Covering</u></p> <p><input type="checkbox"/> Wood Shingles <input type="checkbox"/> Tile (clay, slate, cement) <input type="checkbox"/> Composite Shingles (asphalt) <input type="checkbox"/> Metal <input type="checkbox"/> Build Up (rubber) <input type="checkbox"/> Other: _____</p>

Basement: Full dimensions of building Partial If partial, Side _____ N/A
 Basement Access: Interior: Side _____ Exterior: Side _____ N/A
 Crawl Space Access Interior: Side _____ Exterior: Side _____ N/A

Number of Stairways, Type & Locations: _____ (Page 2 of 3)

Number of Elevator(s): _____ N/A Elevator Key Location: _____

Elevator # _____

Floors Served _____

Elevator Mach. Room _____

Other Vertical Openings, Type & Locations: _____

Heating System: Electric Natural Gas (LNG) LPG Oil Combination Gas/Oil Other: _____

Emergency Shut-Off: Division # _____ Side _____ Roof Level _____ Mechanical Equip. Room: _____

Within Room Area On-Unit Side: _____

System Inspected: Yes No Safely Arranged Yes No Area Clear of Obstructions Yes No

FIREGROUND EXPOSURES

Side-A (address) _____ Distance (ft.) _____

Side-B (left) _____ Distance (ft.) _____

Side-C (rear) _____ Distance (ft.) _____

Side-D (right) _____ Distance (ft.) _____

BUILDING UTILITIES

<u>Utility</u>	<u>Utility Main Shut-Offs Locations</u>			<u>Supplier</u>	<u>Contact Phone #</u>
Electric	Division # _____	Side _____	<input type="checkbox"/> N/A	_____	_____
Emergency Generator	Division # _____	Side _____	<input type="checkbox"/> N/A	_____	_____
Water	Division # _____	Side _____	<input type="checkbox"/> N/A	_____	_____
Gas/LPG/Oil	Division # _____	Side _____	<input type="checkbox"/> N/A	_____	_____
Alternative Energy	Division # _____	Side _____	<input type="checkbox"/> N/A	Type: _____	_____

WATER SUPPLY

Hydrant(s) Primary Location: _____ Capacity(GPM): _____
Secondary Location: _____ Capacity(GPM): _____

Rural Area Main drafting water supply: Lake Pond River Pool Other _____
Drafting Location: _____ Travel Distance: _____

Private Type: _____ Location: _____
Type: _____ Location: _____

BUILDING FIRE PROTECTION SYSTEM

Fire Alarm System: Yes No System Operational: Yes No Monitored System: Yes No

Detector Types: None Smoke Combination Thermal Carbon Monoxide Pull Stations
Monitoring Co: _____
Contact Phone #: _____

Fire Alarm System (FAS) Panel Location: _____ Division # _____ Side _____ N/A

Remote FAS Panel Location: _____ Division # _____ Side _____ N/A

FDC Connections Sprinkler(SPKR) Standpipe (STDP) Combination (SPKR/STDP) N/A

FDC Location(s): Side-A Side-B Side-C Side-D Connection Type & Size: _____ N/A

Fire Pump(s): Location: _____ GPM _____ N/A

Sprinkler System: Wet Dry Deluge Pre-Action Limited Area (20 SPKR Heads) N/A
 Full Building Partial Building If Partial, Location _____
 System Pressure: _____ PSI Water Pressure: _____ PSI Air Pressure: _____ PSI
 Sprinkler Room Location: _____ Division # _____ Side _____
 Sprinkler System Tested: Yes No Date: _____

Standpipe (STDP) & Hose System: Class I Class II Class III N/A
 Standpipe Riser & Hose Connections: Locations: _____

OS&Y Valves: Side-A Side-B Side-C Side-D N/A

Chemical Ext. System Clean Agent CO2 Dry Chemical Halon Wet Chemical N/A
 Location: _____ Side _____ Division # _____
 System Inspected: Yes No Date: _____

ADDITIONAL COMMENTS

Other Information: _____

Inspector's Name _____ Inspector's Signature _____ Date _____

Permission to conduct this inspection was granted by:

Name (please print) _____ Title _____ Phone _____ Date _____

The information requested is for training and validation purposes only. All information is confidential.

Floor/Plot Plan: Candidate Name _____ **SSN#** _____ **(last 4-digits)**

Candidate Signature _____ **Date of Inspection:** _____

Preplan Criteria: Commercial Floor Plan & Plot Plan

1. A complete Pre-Incident Planning Form (3 pages)
2. Diagrams/sketches of the building floor plan (each floor of the building must be included)
3. A plot plan of the target building and surrounding area (separate from floor plan)
4. An Index Key
5. A directional symbol indicating North and the address side indicated (Side A, B, C, D)
6. All hazards identified (utilities – gas, water, electric, overhead wires, transformers, hazardous materials, etc.)
7. Indicate fire detection system(s) and/or suppression system(s)
8. Hydrant & Water Supply Source identified
9. Distance from water supply to target building noted on plot plan (300', etc.)
10. All surrounding structures identified (target building, all exposures, etc.)
11. Distances to all exposure(s)
12. Dimensions of structures noted
13. All roadways labeled
14. Products are candidate's original work, no photo copies (*See Note Below*)
- 15. Plans and details are clearly labeled, well drawn, and legible.**

NOTE

The use of existing base maps, architectural floor plans, site plans and/or Graphic Information System (GIS) mapping programs will be accepted, however the required details noted above **MUST** be hand-drawn by the candidate. Also, Google images or other **aerial imagery CANNOT** be used for either plan.

Additional information for this section can be referenced in the following text:

- IFSTA Essentials of Fire Fighting 4th Edition, pages 662-666
- Jones & Bartlett Fundamentals of Fire Fighting Skills, Chapter 2, pages 651- 653, 658
- IFSTA Essentials of Fire Fighting 5th Edition, Chapter 20 pages 973-975
- Jones & Bartlett, Fire Officer Principles & Practice, 2nd Edition Chapter Pages 215-240
- IFSTA, Fire & Emergency Services Company Officer, 4th Edition Pages 379-409
- IFSTA, Essentials of Firefighting, 5th Edition, Pages 970-982
- NFPA 1620, Recommended Practices for Pre-Incident Planning
- NFPA 220, Standard on Types of Building Construction
- NFPA 170, Standard for Fire Safety & Emergency Symbols

Fire Officer I
Guide 7
Skill Sheet I
Emergency Service Delivery
Action Plan

Emergency Service Delivery: Action Plan
(NFPA 1021 JPRs 4.6.1, 4.6.2, 4.1.1, 4.1.2)

For this skill station, the candidate utilizes an action plan to deploy resources and control the emergency for the given scenario. The plan will include strategic goals, tactical objectives, and resources needed. The candidate, using the plan, will describe how it will be implemented so that the goals are achieved.

Task: Given an assigned facility, preplanning policies and procedures, size-up information for an incident, and assigned emergency response resources, develop and implement an action plan in accordance with the current NFPA 1021 standard. **Use of ICS forms in plan development is preferred**, however a written report (narrative) is also acceptable. If using a report format, all pertinent information regarding the size-up information, strategic goals, tactical objectives, assignments, resources, and other operational information must be included and be clearly labeled and legible.

For the ICS-201 form, click on the following link: <https://training.fema.gov/icsresource/icsforms.aspx> and scroll down to the first sub-link for the current form.

NOTE: Please check your work against Skill Sheet I to ensure you have completed all tasks required. In addition, the following question can be used to assist in writing the report or narrative.

1. What factors should be considered in the size-up of this incident?
2. Based on the scene and size-up, what are the priorities for this incident?
3. What strategic goals would be used in managing this incident?
4. What are the tactical objectives?
5. What safety concerns exist for this incident and how should they be managed?
6. What resources are needed to handle this incident?
7. What are your tactical assignments?
8. What is your ICS/IMS structure?

NOTE: Two scenarios for this skill are provided in this handbook (next page). You **MUST** use one of them for this skill.

Scenario 1

Scene Description

The building is a two-story wood frame construction with brick veneer on the first floor and aluminum siding on the second-floor exterior walls. The roof is pitched trussed and is covered with asphalt shingles. The building has an interior open stairway from the first to second floor. There is one exposure forty-feet to the east.

The fire originated in the kitchen and spread into the dinette area and involves about 15% of the first-floor. Smoke and flames are visible on the south side of the structure. Smoke is visible through the living room windows. Smoke is heavy in the kitchen and dinette areas and is quickly spreading into the den and living room areas.

Strategy

Strategic considerations for this incident based on the Incident Priorities indicate the following:

Life Safety: Primary search of the first and second floor areas. Termination of the utilities if they present a safety hazard.

Incident Stabilization: Aggressive interior fire attack.

Property Conservation: Salvage work on the first floor.

Scenario 2

Scene Description

The building is a one-story school with cement block exterior and interior walls. The roof is pitched with a tar and white rock covering. The school is in a remote setting, nonetheless the area does have hydrants. There are no exposures. It is 9:35 AM on Monday in the month of April, however school is not in session given a teacher's workshop.

The fire originated in the office area and it is spreading into the hallway. The fire involves about 15% of the building. Light smoke is visible coming out of the windows of the two offices on the west side of the building (side A). Smoke is spreading into the hallway, adjacent classrooms, and library.

Strategy

Strategic considerations for this incident based on the Incident Priorities indicate the following:

Life Safety: Primary search for occupants. Termination of the utilities if they present a safety hazard.

Incident Stabilization: Aggressive interior fire attack

Property Conservation: Salvage

Fire Officer I
Guide 8
Skill Sheet J
Safety Accident Investigation

Safety Investigation of an Accident/Incident (NFPA 1021 JPRs 4.7.2, 4.7.1, 4.1.1, 4.1.2)

For this skill, the candidate is provided an accident scenario and will document all relevant, appropriate information concerning the incident.

Task: Given an incident, analyze the situation, conduct a basic accident investigation involving personnel, apparatus, and equipment, and using the forms provided document the accident; be sure to fill in all appropriate information.

NOTE: Please check your work against Skill Sheet J to ensure you have completed all tasks required. Two accident investigation forms are provided – **please use one of the forms to document the incident.** Also, be sure to include a detailed narrative with your documentation explaining what occurred.

Forms:

Forms are provided in this handbook, but can also be downloaded from:

VFIS Accident Investigation Form

<http://www.vfis.com/portals/vfis/documents/communiques/Vehicle-Accident-Loss-Investigation-Report-VFIS.pdf>

Commonwealth of Pennsylvania Form AA-600 (11-09)

<https://www.dot.state.pa.us/Public/DVSPubsForms/BMV/BMV%20Forms/AA-600.pdf>

Accident Investigation Scenario

It is a clear, sunny day in mid-summer and your department is responding to an automatic alarm at an adult assisted living facility. The facility is west/southwest of your station. The call was received at 20:03 hours. You and your driver are responding west-bound but the glare from the low-setting sun is a distraction. You are the captain of Engine 241 driven by Driver/Engineer Clemons. As you go through a controlled intersection with a green light indicated for your direction of travel, you are struck in the back by a pickup truck traveling south to north. The Driver/Engineer Clemons stopped the apparatus. You advised dispatch of the incident and check your personnel. As you get out to examine the situation you notice two individuals on the northeast corner of the intersection waiting to cross the street. The driver of the pickup is still in his vehicle but seems to be OK.

Vehicle 1:

Engine 214: Captain [FO-1 Candidate], Driver/Engineer Clemons, Firefighter/EMTs Patterson and Clark.

Vehicle 2:

2012 Chevy 1500 Pickup, Driver Cody Smith, License KGB-1111

Situation Status

The area of the incident is a four-lane business road in the business district of your response area. Several controlled intersections exist along the route as there are many cross-streets. The speed limit in the area is posted for 35 miles per hour. In accordance with your department's policy, you are traveling at your permitted speed for a response and are maintaining the appropriate distance from other vehicles. You are operating with lights and siren per department protocol.

Dispatch was notified, a reassignment for the call was handled, and law enforcement is on the scene.

Weather: It was a mid-summer evening, skies were clear and the temperature was warm. The road was dry. No obstructions were present at the intersection that could have potentially created a line-of-sight issue for either driver.

All personnel on Engine 241 were wearing their passenger restraints (i.e., seatbelts) and hearing protection. There are no injuries to your personnel. Engine 241 has minor damage to the equipment compartment on the driver's back corner and the tailboard area; yet the apparatus is drivable once the compartment door is secured. Your department is insured through VFIS.

The driver of the pickup, Cody Smith, was wearing his seatbelt and is not complaining of any medical/trauma issues. You have your personnel do a patient survey and obtained a release form. However, the impact of the crash caused the right front fender area to fold back into part of the engine compartment and into the tire-well area thus deflating the right front tire. He is not able to drive the pickup away. The pickup is insured through General Travelers Insurance Company.

NOTE: For information needed not specifically indicated in the narrative above, please use your own resources to provide this information (e.g., addresses, contact numbers, policy numbers, registration numbers, date, etc.)



Vehicle Accident/Loss Investigation Report

(This is not a claim form)

Fire Department _____ Date _____

Address _____

Name of Driver _____ Vehicle ID/Unit Number _____

Type of Vehicle _____

Date Driver Last Certified On Above Vehicle _____

Date of Accident _____ Time _____ Date Reported _____

Location of Accident _____

Roadway

- | | |
|--|--|
| <input type="checkbox"/> Straight _____ | <input type="checkbox"/> 2-lane |
| <input type="checkbox"/> Curve _____ | <input type="checkbox"/> 3-lane |
| <input type="checkbox"/> On Grade _____ | <input type="checkbox"/> 4-lane |
| <input type="checkbox"/> Level _____ | <input type="checkbox"/> Divided |
| <input type="checkbox"/> Hillcrest _____ | <input type="checkbox"/> Rural |
| <input type="checkbox"/> Dry _____ | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Wet _____ | <input type="checkbox"/> Lanes marked |
| <input type="checkbox"/> Muddy _____ | <input type="checkbox"/> Lanes unmarked |
| <input type="checkbox"/> Snowy _____ | <input type="checkbox"/> No road detects |
| <input type="checkbox"/> Icy _____ | <input type="checkbox"/> Holes, ruts, etc. |
| <input type="checkbox"/> Oily _____ | <input type="checkbox"/> Loose material |
| | <input type="checkbox"/> Other |

Accident Occurred:

- At station
- Responding to emergency
- At emergency scene
- Returning from emergency
- Training
- Convention or parade
- Other _____
- Sleet

Type of Loss

- Personal injury
- Property damage
- Vehicle damage

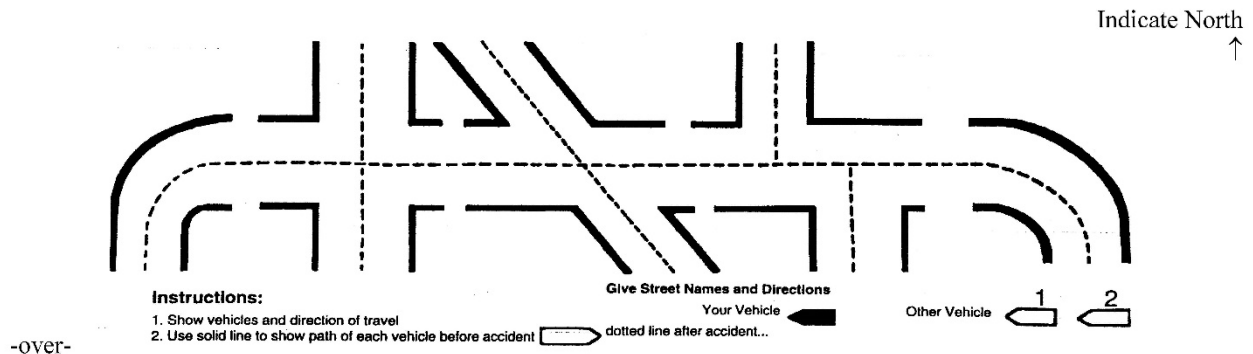
Weather

- Clear
- Rain
- Snow
- Fog
- Other _____

Description Of Accident _____

Motor Vehicle Diagram

Complete the following diagram showing direction and positions of automobiles involved, designating clearly point of contact.



Safety Analysis

What acts, failures to act and/or conditions contributed most directly to this accident? (Immediate Cause)

What are the basic or fundamental reasons for the existence of these acts and/or conditions? (Fundamental Cause)

What action has or will be taken to prevent recurrence? Place "X" by items completed.

Safety Supervisor's Comments

Driver's Signature _____

Date _____

Supervisor's Signature _____

Date _____

Safety Supervisor's Signature _____

Date _____

COMMONWEALTH OF PENNSYLVANIA Driver's Accident Report




FORWARD THIS REPORT WITHIN 5 DAYS TO THE PENNSYLVANIA DEPARTMENT OF TRANSPORTATION,
BUREAU OF HIGHWAY SAFETY AND TRAFFIC ENGINEERING, P.O. Box 2047, HARRISBURG, PA 17105-2047
Pennsylvania Vehicle Code, Section 3747 states: All reports are confidential, not available as trial evidence

TIME	Date of Accident (Month - Day - Year)	County	Day of Week	Hour (AM - PM)	Check if Hit-Run <input type="checkbox"/>
	SEVERITY : Was Towing Required? UNIT 1: <input type="checkbox"/> YES <input type="checkbox"/> NO UNIT2: <input type="checkbox"/> YES <input type="checkbox"/> NO		Number of Vehicles Involved	Number Injured	Number Killed
LOCATION	TO PROPERLY LOCATE ACCIDENTS, USE AS LANDMARKS; SR SEGMENT NUMBERS, MILEPOSTS; INTERSECTION OF TWO HIGHWAYS; CITY, BOROUGH, TOWNSHIP, OR COUNTY LINES.		City - Borough - Township	On: (Street Name or Highway Number)	
			At Intersection With:	If Not At Intersection : Feet N S E W Of Station Marker - Intersection - Etc...	
MY VEHICLE - NO 1	Operator's Name (First, Middle, Last) Mr. Mrs. Miss		Date of Birth	Operator's License Number and State	
	Address (Street, City, State, Zip Code)		Vehicle License Number and State		
	Owner's Name (First, Middle, Last) Mr. Mrs. Miss		Year	Make	Model
	Address (Street, City, State, Zip Code)		PA TITLE OR OUT-OF-STATE VIN		

USE THE FOLLOWING SECTION TO RECORD VEHICLE NUMBER 2, PEDESTRIAN, OR OTHER PROPERTY

OTHER	Operator's Name (First, Middle, Last) Mr. Mrs. Miss		Date of Birth	Operator's License Number and State	
	Address (Street, City, State, Zip Code)		Vehicle License Number and State		
	Owner's Name (First, Middle, Last) Mr. Mrs. Miss		Year	Make	Model
	Address (Street, City, State, Zip Code)		PA TITLE OR OUT-OF-STATE VIN		
Description of Damaged Property		Check If State Owned Property <input type="checkbox"/>			

IF MORE VEHICLES/PEDESTRIANS/OCCUPANTS ARE INVOLVED USE ADDITIONAL REPORTS.

PERSONS INVOLVED	NAME	AGE	SEX	VEH.NO.	INJURY CLASS	ACTIVE RESTRAINT	INJURY TYPE	SEATING POSITION	ACTIVE RESTRAINT	PASSIVE RESTRAINT
						0 - NO INJURY 1 - DEATH 2 - MAJOR INJURY 3 - MODERATE INJURY 4 - MINOR INJURY 9 - UNKNOWN	0 - NONE 1 - SHOULDER HARNESS ONLY 2 - SEAT BELT ONLY 3 - COMBINATION (HARNES & BELT) 4 - CHILD RESTRAINT 7 - MOTORCYCLE HELMET 8 - OTHER 9 - UNKNOWN			
					POSITION 1 - DRIVER 2-6 - PASSENGER 7 - PEDESTRIAN 8 - OTHER	PASSIVE RESTRAINT 0 - NONE OR PEDESTRIAN 1 - AIRBAG (DEPLOYED) 2 - AIRBAG (NOT DEPLOYED) 3 - AUTOMATIC SEAT BELT 8 - OTHER 9 - UNKNOWN				
										

Insurance Information	Company	Insurance Information	Company
Unit 1	Policy No.	Unit 2	Policy No.

COMMONWEALTH OF PENNSYLVANIA

Driver's Accident Report



This Form is to be completed only in the event that the accident was not investigated by a policy agency.

The Driver's Accident Report Form is required to be completed by **ALL** drivers involved in motor vehicle traffic accidents occurring within the Commonwealth of Pennsylvania and involves:

- (1) **injury** to or **death** of any person; or
- (2) damage to any vehicle involved to the extent that it cannot be driven under its own power in its customary manner without further damage or hazard to the vehicle, other traffic elements, or the roadway, and therefore requires **towing**.

Section 3747(a) of Title 75, Pennsylvania Consolidated Statutes of the Vehicle Code requires that if a police officer does not investigate an accident required to be investigated by section 3746 (relating to immediate notice of accident to police department), the driver of a vehicle which is in any manner involved in the accident shall, within five days of the accident, forward a written report of the accident to the department.

A Form, supplied by the Department of Transportation, has been designed for this purpose. That Form is the attached AA-600, **Commonwealth of Pennsylvania Driver's Accident Report**.

The primary objective of this Form is to obtain information which can be used to develop accident prevention and reduction programs aimed at reducing accidents and accident losses. In order for these programs to succeed, every attempt must be made to obtain the information for all items listed on the Report Form. Compliance with the following instructions will help to assure that the Report is filled out completely and accurately.

A copy of the completed Accident Report should be retained for your records. If copies are requested from the Department of Transportation, a fee of \$5.00 per copy will be required to cover our processing costs.

Please send completed Forms to the following address:

**Pennsylvania Department of Transportation
Bureau of Highway Safety and Traffic Engineering
P.O. Box 2047 Harrisburg,
Pennsylvania 17105-2047**

GENERAL INSTRUCTIONS FOR COMPLETING DRIVER'S ACCIDENT REPORT

Use a ballpoint pen and print all required information. Fill in every block applicable. The Form is self-explanatory. However, the following guidelines should be utilized:

- 1. For the Accident Location** - - - Be sure to indicate the name of the City, Borough, or Township where the accident occurred as well as the Street name or Highway Route Number. If the accident occurred at an intersection, identify the name of the Street or Highway Route Number of the intersecting Roadway.

If the accident did not occur at an Intersection, please use the nearest Cross Street, Mile Posts, or Segment Markers. Segment Markers are signs erected along the roadside. Where possible, the signs are placed at physical features such as bridges, pipes, or intersections. Mile Posts are generally erected along the roadside of Interstates. Do not use House Numbers, Utility Poles, etc. as reference points.
- 2. For the Vehicles, Drivers and Pedestrians** - - - Copy information about drivers and vehicles directly from the official **Driver's License, Vehicle Registration Card, and Proof of Financial Responsibility Card.**
- 3. Persons Involved** - - - Record the names and addresses of all occupants (including Drivers) in the vehicles involved and **ALL INVOLVED PEDESTRIANS** regardless of injury severity. Begin with the Driver of Unit 1, then list the other occupants of Unit 1, if any. Repeat the procedure with any other units.
- 4. Injury, Seating Position, Safety Restraints** - - - If applicable, select the appropriate codes for all occupants and pedestrians for the type of injury incurred, seating positions of all occupants, and the type of safety device used.
- 5. Damage Area of Vehicle** - - - Select the appropriate code for the Initial Impact Point for each vehicle involved. To indicate the impact area, use clock points as shown at the vehicle representation on the back of the report.
- 6. Speed Limit and Travel Speed** - - - Enter the speed limit of the roadway at the accident site. If the speed limit is not posted, write NP.
Enter your estimate of the travel speed of each vehicle immediately before the accident.
- 7. For the Accident Diagram** - - - The diagram is a visual representation of the accident location and the events that occurred. Show the movement of the vehicles, identify the roadways and be sure to include the North Arrow displayed on the back of the Report Form.
- 8. For the Narrative** - - - Describe the actions of all involved persons and vehicles before, during and after the collision. Be as factual as possible and use the same Unit Numbers as those on the front of the Report to identify the vehicles and pedestrians. Avoid such brief narratives as "Unit 1 hit Unit 2".

IF MORE THAN TWO (2) VEHICLES ARE INVOLVED, OR ADDITIONAL SPACE IS NEEDED FOR OCCUPANTS, PLEASE USE ANOTHER FORM TO CAPTURE THE REQUIRED INFORMATION. IN THESE CASES, STAPLE REPORTS TOGETHER BEFORE SUBMISSION.

Fire Officer I
Guide 9
Skill Sheet K
Emergency Service Delivery:
Strategy, Tactics, & Safety

Emergency Service Delivery: Post-Incident Analysis (NFPA 1021 JPRs 4.7.1, 4.6.3)

In this skill station, the candidate is expected to develop and conduct a Post-Incident Analysis (PIA). Given a single unit incident, demonstrate the ability to develop and conduct a PIA which addresses the strategy and tactics employed, and safety factors so that all required critical elements are identified and communicated. The PIA will include a narrative processed in accord with the department's policy and procedures. The scenario can be from the incident used in Skill A. If another scenario is used, the candidate must provide all background documents (i.e., a complete incident report or narrative, ICS/IAP forms, SOPs / SOGs, department policies, or other operational documents) to the Academy so that a review of activities for the PIA can be completed.

Task:

Given a department policy and procedures and a single unit incident, develop a Post Incident Analysis (PIA) to determine strengths, weaknesses, and lessons learned from the incident in accord with the Department's response and operations criteria. The post-incident analysis is fact-based and does not contain unsubstantiated information. The PIA document shall clearly narrate all relevant information (i.e., shall label each topic or component) in addition to the incident report, and be processed in accordance with the department's policy and procedures.

NOTE: Please check your work against Skill Sheet K to ensure you have completed the tasks required. Also, a single-unit is considered one apparatus staffed with a company officer and personnel, therefore by extension, a single-unit incident is an operation or task managed or controlled by a single-apparatus. The operation, however, may be part of a larger incident, yet the candidate is accountable to the functions of the single-unit task.

Completion Method

Post-Course Completion Method

The scenario for this skill is provide by the Academy to the test-site for distribute to the candidates in adequate time to complete the skill prior to the test date.

Challenge Method

For candidates who choose the challenge method, contact PSFA certification staff for the scenario information needed to complete this station.

The following table provides some general topics to consider for a small-scale, single-unit PIA; not all items may be applicable to your narrative:

<p>Scene Management Scene organized Hazards controlled Traffic controlled</p>	<p>Incident Command ICS established Operational plan per procedure used Accountability maintained</p>
<p>Communications Information provided to the team Command officer effective Orders clear and concise Dispatch updated</p>	<p>Safety Operations conducted safely Full PPE/SCBA used (as applicable) Hazards eliminated</p>
<p>Exposures Exposures protected Control implemented in a timely manner Occupant exposure controlled</p>	<p>Ventilation Ventilation timely, correctly, and effective Correct ventilation used for the incident If roof scenario, operations done safely</p>
<p>Confinement Fire confined quickly with minimal extension Protection features effective and Protection features used in accord with tactics</p>	<p>Extinguishment Water supply adequate and timely established Hose line management effective Attack technique appropriate and effective</p>
<p>Rescue Patient management appropriate and effective Rescue operations completed in a timely manor Patient transfer managed well</p>	<p>Overhaul/Salvage: Contents protected during operations Overhaul done effectively without additional significant damage</p>
<p>Equipment Equipment perform as expected Damage to any equipment /how damaged Personnel knew how to use the equipment</p>	<p>Other Agencies: Interact well with the Police Interact well with other fire/EMS agencies Interact well with home owner /property owner / public</p>

XYZ Fire Department Policy & Procedure Manual

POLICY: POST INCIDENT ANALYSIS
POLICY #: 7.211(a)

SECTION: 7.300 Fire Ground Operations
EFFECTIVE DATE: February 1, 2017

Introduction:

It is the expectation of the XYZ Fire Department that all incidents will be reviewed for effective operations. Therefore, all officer will analyze each incident, single-unit to multi-unit, to promote improvements of the Department's personnel, units, and service delivery performance.

After each incident, the Incident Commander or incident command team **MUST** develop a Post Incident Analysis (PIA) to determine strengths, weaknesses, and lessons learned about the incident and the Department's response and operations. The post-incident analysis is a fact-based analysis and shall not contain unsubstantiated information.

PIAs are managed at two levels: Small scale (i.e., single-unit) incidents, and Large scale / Multi-unit incidents. The depth and complexity of the PIA shall be in accord with the size and nature of the incident. Small scale incidents (i.e., single unit response) shall be completed immediately after the termination of the incident or close thereafter should other response needs exists. The outcomes of these PIAs shall be included in the incident report and filed through normal department procedures. Large-scale, multi-unit incidents shall be conducted soon after the incident and when all information is collected, analyzed, and documented. Preparation and implementation of the large-scale incident PIA shall occur no later than 75 days after the incident. Furthermore, the PIA for any significant emergency incident shall be forwarded to the Fire Chief through the appropriate Chain of Command prior and receive approval prior to conducting the PIA.

Purpose:

The purpose of this policy is to establish the procedure for conducting a Post Incident Analysis (PIA) in response to incidents. The PIA assesses the operational effectiveness of on-scene activities and all functions related to the response, management, and recovery from incidents. Each PIA conducted will address and reinforce positive performance and focus on lessons learned.

Discussion:

A 'significant emergency incident' is defined as any emergency meeting any criteria listed below:

1. Incidents involving any fatality, or serious injury to a civilian or Fire Department personnel;
2. A building fire in which 3 or more rooms are severely damaged by fire;
3. Incident involving unusual extinguishing problems;
4. Fires that exceed a predetermined dollar loss;
5. Any Hazardous Materials Incidents;
6. Any Mass Casualty incident involving 8 or more victims;
7. Rescue incidents involving the extrication of two (2) or more victims,
8. Technical rescues incidents;
9. At the Incident Commander's discretion, or at the direction of a senior officer.
10. Incidents involving a 'Near-Miss'.

Policy:

- A. When a significant incident type described above occurs, it shall be the responsibility of the on-scene Incident Commander to conduct a PIA as soon as possible after completion of incident. At the latest, said PIA should be conducted no later than the six days after the incident has concluded.
- B. The PIA should allow input from all fire department members and other on-scene agencies and/or resources. One suggested method is to have companies provide input into the PIA process based upon their order of arrival and subsequent tasks or assignments.
- C. The Incident Commander or designee will take comprehensive notes during the PIA, to insure strengths and weaknesses are recorded; The above noted information, along with diagrams of the scene, apparatus placement, and other relevant factors should be included with the PIA narrative. The narrative shall follow the PIA Topical Outline. The analysis, based on the review, should include lessons learned.
- D. Once the PIA is complete, the draft PIA and lessons learned shall be provided to the Chief or designee for review. A departmental review will assess the outcomes and as needed provide any recommendations to procedures, guidelines, or training.
- E. Post the final PIA; copies shall be routed to all affected stations and companies, all command officers, the Fire Chief, and the Chief of Training.

XYZ Fire Department Policy & Procedure Manual

POLICY: POST INCIDENT ANALYSIS
POLICY #: 7.211

SECTION: 7.300 Fire Ground Operations
EFFECTIVE DATE: February 1, 2017

POST INCIDENT ANALYSIS - STRUCTURAL FIRE

PIA Informational Worksheet:

The following list provides common information referenced when developing a PIA. Provide relevant information as it relates to the incident. Not all the criteria may be relevant to the incident; therefore, use the content relevant.

1. Introduction (General overview, Basic NFRIS, weather, time of day, diagrams, photos)
2. Building Structure/Site Layout (type, occupancy, protection systems, fuel load, hazards)
3. Fire Code History (Inspections and/or violations)
4. Communications (Dispatch, Fire ground, proper procedures & etiquette, timely updates)
5. Pre-Incident Planning (Available, Useable and Current)
6. On Scene Operations (size-up, strategy/tactics effectiveness, resources, risks)
7. Support Functions (personnel rehab and replacements, logistics, outside agencies)
8. Safety Group (RIT, EMS, Operational SOPs, fire personnel safety)
9. Accountability (Personnel, Controlled and Monitored)
10. Investigations (Origin, Cause, Fire Growth & Behavior, Interviews, Contributing Factors)
11. Lessons Learned (Training, Operational SOPs, Recommendations)
12. Overall Analysis of Incident (Good? Bad? Why?)

Fire Officer I
Guide 10
Skill Sheet L
Budget Request

Budget Request
(NFPA 1021 JPR 4.4.3)

Directions: From a company officer's level, prepare a budget request based on an identified need (e.g., a recommendation identified in Skill K, a resource addressing a life safety risk identified from a community needs assessment, etc.) using a budget form and memo so that the request is in the proper format with supporting data. The topic for this skill is chosen by the candidate.

In developing the budget request, the candidate should address the following criteria in the memo and reflect the cost associated in the budget request:

- A need with justification (what information or data supports the need);
- A solution or mitigation method that defines an expected outcome and the concern if no action occurs;
- A narration of what resources (supplies, personnel, etc.) are needed and the associated cost;
- The budget type where the resources costs would be allocated (e.g., operational, capital, etc.);
- A short narrative overviewing the budget process used within the respective AHJ;
- A brief narrative of the revenue process (i.e., how monies are generated – taxes, grants, fund drives, etc.);
- A short explanation of how items or services are procured (bought) as occurs within their AHJ;
- A short explanation of how expenditures are tracked within their budgeting process.

A budget and memo forms are provided on the following pages.

Budget Form

			Current Year	
		Item	Budget	Actual
Revenues				
Fees				
Others				
	Total			
Expenditures				
Personnel – (salaries, wages, OT overhead cost)				
	<i>Subtotal</i>			
Operational – utilities (electric, gas, phone, wireless, etc.)				
	<i>Subtotal</i>			
Operational - Service				
		Marketing		
		Other		
	<i>Subtotal</i>			
Operational - Maintenance				
		Equipment		
		Buildings		
		Repair		
		Other		
	<i>Subtotal</i>			
Operational - Other Expenses				
		Office supplies		
		Clothing		
		Postage & Handling		
		Fuel		
		Travel		
		Training		
		Lodging		
		Meals		
	<i>Subtotal</i>			
Capital Projects				
		Station		
		Technical Support		
		Consulting		
		Training - Personnel		
		Other		
	<i>Subtotal</i>			
	Totals			

**Anyplace Fire Department
City of Anyplace**

DATE:

TO:

FROM:

SUBJECT:

DESCRIPTION / BUDGET SUMMARY:

- Needs Assessment
- Solution / Mitigation
- Resources
- Revenue streams
- Procurement process
- Expenditure tracking
- Budget type

JUSTIFICATION:

SIGNATURE: _____

DATE: _____

Firefighter Code of Ethics

I understand that I have the responsibility to conduct myself in a manner that reflects proper ethical behavior and integrity. In so doing, I will help foster a continuing positive public perception of the fire service. Therefore, I pledge the following...

- Always conduct myself, on and off duty, in a manner that reflects positively on myself, my department and the fire service in general.
- Accept responsibility for my actions and for the consequences of my actions.
- Support the concept of fairness and the value of diverse thoughts and opinions.
- Avoid situations that would adversely affect the credibility or public perception of the fire service profession.
- Be truthful and honest at all times and report instances of cheating or other dishonest acts that compromise the integrity of the fire service.
- Conduct my personal affairs in a manner that does not improperly influence the performance of my duties, or bring discredit to my organization.
- Be respectful and conscious of each member's safety and welfare.
- Recognize that I serve in a position of public trust that requires stewardship in the honest and efficient use of publicly owned resources, including uniforms, facilities, vehicle and equipment and that these are protected from misuse and theft.
- Exercise professionalism, competence, respect and loyalty in the performance of my duties and use information, confidential or otherwise, gained by virtue of my position, only to benefit those I am entrusted to serve.
- Avoid financial investments, outside employment, outside business interests or activities that conflict with or are enhanced by my official position or have the potential to create the perception of impropriety.
- Never propose or accept personal rewards, special privileges, benefits, advancement, honors or gifts that may create a conflict of interest, or the appearance thereof.
- Never engage in activities involving alcohol or other substance use or abuse that can impair my mental state or the performance of my duties and compromise safety.
- Never discriminate on the basis of race, religion, color, creed, age, marital status, national origin, ancestry, gender, sexual preference, medical condition or handicap.
- Never harass, intimidate or threaten fellow members of the service or the public and stop or report the actions of other firefighters who engage in such behaviors.
- Responsibly use social networking, electronic communications, or other media technology opportunities in a manner that does not discredit, dishonor or embarrass my organization, the fire service and the public. I also understand that failure to resolve or report inappropriate use of this media equates to condoning this behavior.

Developed by the National Society of Executive Fire Officers