

# Fire Officer II

## Certification Procedures Guide



This Certification Procedure Guide reflects the requirements of  
**NFPA 1021: Standard for Fire Officer  
Professional Qualifications, 2014 Edition**

# Foundation of the FSTB Certification System

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## Equal Access for All

Registrations for certification will be accepted from any candidate meeting the criteria listed in the appropriate certification document. Applications will be accepted without regard to race, color, creed, gender, marital status, or status as a military veteran. Applications will be accepted without regard to age as long as the applicant is at least 18 years of age, and disability as long as that disability does not hinder the applicant's ability to perform the necessary skills and practices required by the National Fire Protection Association's Professional Qualifications Standards. If you have questions or comments regarding the certification, training, or other services provided by the Fire Service Training Bureau (FSTB), please call 515-294-6817.

## Legal Authority

Legislative authority for fire service certification was granted to the Fire Service Institute, Iowa State University Extension by the Iowa legislature in 1986. With the passing of HF 2492 and the permission of the governing International Fire Service Accreditation Congress, authority for fire service certification was granted to the Fire Service Training Bureau, Division of the State Fire Marshal effective July 1, 2000.

## Accreditation

The FSTB certification system has been accredited by the IFSAC to certify fire service personnel to accepted national standards. Through this process, Iowa fire service personnel achieve international certification. Accreditation of the FSTB certification system assures the Iowa fire service that programs and standards used within this system adhere to the most current recognized and adopted national standards. The assurances gained through the accreditation process provide credibility and prestige for every firefighter participating in the certification process. Firefighters certified through the Iowa system are recognized throughout the United States (and the world) as qualified and meeting the standards set forth by the National Fire Protection Association (NFPA).

## Certification

After participants within the FSTB certification system have met the performance requirements and successfully completed an objective evaluation process, the FSTB awards National Certification. Upon awarding National Certification, the individual's name is entered in the Iowa certification data bank as well as the national certification data bank maintained by the IFSAC at Oklahoma State University. An official seal from the IFSAC is attached to every certificate and includes an individual national certification number.

## Standards

NFPA Professional Qualifications Standards are used by the entities accredited by the IFSAC. To maintain accreditation, entities must certify fire service personnel to the latest edition of the "Professional Qualifications Standards" adopted by the issuing jurisdiction.

## System Integrity

The requirements, criteria, and processes explained in this document are used to ensure the highest possible credibility and stature for participants in the FSTB certification system. These processes help ensure that Iowa trained and certified fire service personnel are among the most highly qualified firefighters in the world.

## Entering the System

Qualified personnel within the Iowa fire service may enter the certification system for the purpose of seeking certification by contacting the FSTB. Upon receipt of a request, the FSTB will forward appropriate information to members of the fire service about any of the levels of certification available.

## Application & Fees

Every individual seeking certification within the FSTB certification system must submit an [Online Certification Testing Registration Form](#) and a \$50 Registration Fee to secure entrance into the system. Approved methods of payment are: Cash, Purchase Order, Check, Money Order, Credit Card, or Bill to Fire Department. Candidates must submit their Online Certification Registration Form and payment at least three (3) weeks prior to the requested exam date to be accepted and allow for processing.

**NO "WALK-IN" OR LATE REGISTRATIONS WILL BE ACCEPTED AT ANY TEST SITE!**

## Refunds of Registration Fees

Registration fees may be refunded only within the first two (2) months after being received by the FSTB. Registration fees will only be refunded if the individual has not taken any action towards certification, other than the submission of the registration and fee payment. Registration fees will not be refunded if any of the steps of the certification process have been initiated (e.g., submitting local documentation form, taking written or practical exams).

## Certification Process Timeline

Candidates testing for ALL LEVELS (Firefighter I and/or II, Hazardous Material Awareness and Operations, Driver/Operator - Pumper and/or Aerial, Fire Service Instructor I and/or II, Fire Officer I and/or II, Inspector I, and Fire Investigator) will be given twelve (12) months to complete the certification process. The twelve (12) month time limit begins when the application is entered into the database by the FSTB Certification and Accreditation Unit staff. The FSTB will NOT accept any documentation requirements until the candidate's registration has been entered into the certification database. After the twelve (12) month time period has expired, candidates not completing the certification process will be required to start the process over by submitting a NEW registration form and fee payment. Candidates will also be required to retake the written and practical exams (regardless of the pass/fail status from the previous exams) and re-submit all required documentation. All information and paperwork from expired certification attempts will be removed from the FSTB database.

## Certification Exam Availability

Every qualified individual seeking certification will be allowed access to the certification exam process (see "Certification Requirements"). Certification exams are offered in numerous locations throughout Iowa every year. They are conducted on a regional basis at many of the Iowa Community College regional fire schools, select fire departments, and at the Annual State Fire School conducted by the FSTB. A **Certification Schedule** is posted on the Certification Page of the FSTB website, [www.dps.state.ia.us/fm/fstb](http://www.dps.state.ia.us/fm/fstb). Each candidate seeking certification within the Iowa FSTB Certification System must submit the [Online Certification Testing Registration Form](#). Restricted test sites are also conducted for fire departments having enough candidates to "fill" a test site. Fire departments wishing to schedule a restricted test site should contact the FSTB for more information.

# Certification Requirements

## Facial Hair Policy

Persons with beards or facial hair in the area of the SCBA face piece seal (including full-face beards, mutton-chops, goatees, etc.) will **NOT** be allowed to participate in the skills exam for any certification level. This policy will be enforced regardless of the skills being tested at any site. No exceptions to this policy will be granted. This is in conjunction with 29 CFR 1910.134, Respiratory Protection Standard.

## Exam Results

After candidates have completed the exam process, the FSTB begins the process of scoring and processing the test results. As soon as scoring and documentation are completed, the results are sent to the candidate via regular mail. To ensure candidate confidentiality, certification exam scores will not be released over the telephone or any other mechanism. The candidate should receive test results within 30 working days of the exam. If candidates do not receive their test results within 30 working days, they should notify the FSTB. Exam scores will still not be released by phone, but the FSTB will begin a trace of the notification and/or explain the delay.

**Please DO NOT contact the FSTB Certification and Accreditation Unit prior to the 30-working day timeframe.**

## Certification

Upon successful completion of the certification process, the applicant's name will be entered into the Iowa certification database and the National Certification Database maintained by the IFSAC. Candidates will also receive (at no additional cost), an "Iowa/Nationally Certified" patch, a certification level bar, and an individualized certificate awarding National Certification from the FSTB. This certificate will bear a numbered seal from the IFSAC. When you have completed all of the necessary steps for your certification level, please allow 60 working days for the completed certificate. If you have not received your certification within that time period, please contact the FSTB to verify all materials are completed and received.

**Please keep a copy of all your documentation for your records.**

## Reciprocity

Individuals in possession of certifications from out-of-state/other IFSAC entities may request reciprocity from the FSTB. The FSTB will only grant reciprocity for the levels of certification that the FSTB is accredited to by the IFSAC. Individuals must complete and submit the [Online Request for Reciprocity Form](#), available on the FSTB website along with a \$50 Reciprocity Fee. Once the provided IFSAC seal has been verified, the certificate information will be entered into the Iowa certification database and the FSTB will recognize the individual as having attained national certification at the requested level. The FSTB will not provide a new IFSAC certification seal number or certificate as the individual has already attained national certification and recognition at said level. If the individual or their affiliated organization specifically desires or requires an Iowa certification for the level in question, they must complete the steps for Certification Testing Registration, as described previously, and complete the written and practical exams, along with payment of the Certification Registration Fee.

## Denial and Revocation of Certification

The FSTB may deny or revoke a candidate's certification if the candidate submits false, copied, or plagiarized information to the FSTB or is found to be cheating during any phase of the certification process.

## Testing Accommodations

The Americans with Disabilities Act (ADA) requires that reasonable accommodations be provided to qualified individuals with disabilities. This law defines disabilities as physical or mental impairments that substantially limit one or more of a person's major life activities (e.g., walking, hearing, speaking, seeing, reading, or writing). The FSTB will provide reasonable and appropriate accommodations to qualified candidates who have documented disabilities and demonstrate a need for accommodations during the examination. A candidate must initiate a request for accommodation by completing the FSTB [Request for Accommodation Form](#), available on the FSTB website. In addition to submitting the on-line request form, a candidate must provide documentation from a qualified health professional, to include:

1. A statement of the specific diagnosis of the disability.
2. Cite the diagnostic criteria and tests given, with dates, results, and interpretations. Cite how the results support the diagnosis.
3. Describe the candidate's functional limitations due to the disability, and the impact of those limitations on physical, perceptual and cognitive abilities.
4. Recommend specific accommodation(s) and for each accommodation, provide a rationale as to how it will reduce the impact of the functional limitation(s).
5. State your professional credentials, training, work experience and any licenses you hold that support your qualifications to diagnose and/or treat this candidate's disabilities.
6. If no prior accommodations have been made for this candidate, explain why. If they have - state what was done and provide past documentation of prior accommodations.

**Please note:** The aforementioned supporting documentation provided by a qualified health professional must be received at the FSTB at least 10 calendar days prior to the test date.

### **Please mail supporting documentation to:**

Certification Unit  
Fire Service Training Bureau  
1015 Haber Road  
Ames, IA 50011

## Appeal Process

If certification is denied or revoked, the individual is entitled to due process, including an appeal and hearing. Any person believing that they have not received fair treatment within the certification process is also entitled to the appeal process.

The first step in the appeal process is for the individual to contact the Certification Manager at the FSTB. This initial contact is intended to be an informal review of the specific details. The official appeal process must be initiated in writing by email within 30 days of the action being appealed. The appeal must include the following:

- Individual's FSTB Identification number.
- Current address, phone number and email address.
- Statement of the issue(s) involved & date incident took place.
- Remedy requested.

The Certification Manager shall, within 21 working days from the date the appeal is received, provide a written response by email to the individual requesting the appeal. If the appeal is not resolved during this step, the individual appealing may move to the second step and appeal to the Bureau Chief of the FSTB. This appeal must be submitted in writing by email to the Bureau Chief within 7 working days from the Certification Manager's response. An individual may request a formal review of the appeal through an in-person meeting with the Bureau Chief. The Bureau Chief shall within 21 working days after the 2nd step appeal is received, provide a response in writing by email to the individual requesting the appeal. The decision of the Bureau Chief will be final.

**Please keep a copy of all your certification documentation for your records.**

**Certification Questions may be directed to:**

**[fstbcert@dps.state.ia.us](mailto:fstbcert@dps.state.ia.us)**

**515-294-6818**

# Introduction to Fire Officer II Certification

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## [Online Certification Testing Registration Form](#)

Certification Unit email: [fstbcert@dps.state.ia.us](mailto:fstbcert@dps.state.ia.us)

FSTB website: [www.dps.state.ia.us/fm/fstb](http://www.dps.state.ia.us/fm/fstb)

FSTB Certification phone number: 515-294-6817

Each individual seeking certification within the Iowa Fire Service Training Bureau Certification System must submit the online [Certification Testing Registration Form](#), and a \$50 Registration Fee, to secure entrance into the system.



The form is available on the Certification Page of our website at [www.dps.state.ia.us/fm/fstb](http://www.dps.state.ia.us/fm/fstb) or scan the code to go directly to the registration form.

A **Certification Schedule** (located on the Certification web page) is updated regularly to reflect a current list of available written and practical test sites.

Candidates are given twelve (12) months in which to complete the certification process. This time limit starts when the candidate's FIRST registration to test form is submitted and entered into the FSTB database.

Certification candidates are given two (2) attempts to pass each component, written and practical, of the examination process for each \$50 registration fee paid within the twelve (12) month time limit.

Candidates failing the written exam are responsible for notifying the FSTB of their desire to retest by registering for another scheduled exam on the FSTB Certification web page. Candidates may not take the written exam more than once per day. If the candidate has failed both attempts at the written exam, they must submit another \$50 registration fee, which will allow them two (2) more attempts.

Candidates will be required to submit a Practical Skills Project for this certification level. This project involves completing various scenarios that reflect the daily duties of a Supervisory Company Officer. These scenarios include: developing inter-agency programs, personnel supervision, accident investigation, budget, and administrative functions. This Practical Skills Project relates objectives from NFPA 1021: these objectives are detailed in the included Skill Set evaluation forms. Once completed, all components of this project must be submitted electronically to the FSTB for review and approval within the twelve (12) month time limit.

If the twelve (12) month time limit expires and the candidate has not successfully completed all the requirements for the certification process, the candidate will have to restart the process. All information and documentation relating to the previous certification attempt will be removed from the FSTB database.

Projects must be submitted and approved within the twelve (12) months from when the candidate's certification application was entered into the FSTB database.

**An official picture ID (e.g., driver's license, state-issued identification card, military ID, etc.) must be presented for admittance to ALL written and practical exams.**

# Fire Officer II Certification Requirements

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## Prerequisite:

Candidates seeking certification for Fire Officer II within the Iowa Fire Service Training Bureau Certification System must successfully complete all parts of the Fire Officer II certification exam to achieve national certification as Fire Officer Level II.

1. Be a current member of an Iowa fire, emergency or rescue organization. In addition to the membership requirement, all persons must be at least 18 years of age.
2. Must be previously certified NFPA 472 HazMat Operations, NFPA 1001 Firefighter I, NFPA 1001 Firefighter II, NFPA 1041 Instructor I, and NFPA 1021 Fire Officer I.
3. Submit the **Fire Officer II- Local Verification Form**, signed by the **Fire Chief** or **Training Officer**.
4. Candidate must be competent in all objectives listed in NFPA 1021, *Standard for Fire Officer Professional Qualifications, 2014 Edition*.

## Written Examination:

The Fire Service Officer II written certification exam is based on the Requisite Knowledge objectives listed in NFPA 1021, *Standard for Fire Officer Professional Qualifications, 2014 Edition*.

- Candidates are required to score a minimum of 70% on the written examination.
- The written certification exam contains one hundred (75) true/false and multiple choice questions covering Fire Officer Level II.

Number of Questions	Time
25	30 Minutes
50	60 Minutes
75	90 Minutes
100	120 Minutes

## Practical Examination Project:

The Fire Officer II certification practical examination project is based on Requisite Knowledge and Requisite Skills objectives listed in NFPA 1021, *Standard for Fire Officer Professional Qualifications, 2014 Edition*.

- Candidates are required to complete all skills in the project, which are graded on a Pass/Fail basis.

## Evaluated Project Skills:

- ☐ Develop an Inter-Agency Program
- ☐ Personnel Supervision
- ☐ Accident Investigation
- ☐ Budget



**Evaluated Project Skills(continued):**

☐ Fire Cause & Determination / Post Analysis

☐ Oral Interview



The different activities contained in the Fire Officer I and Fire Officer II Project serve the purpose to allow the candidate to become familiar and proficient in different activities that relate to being a Company Officer. It is the goal of these activities to ensure that the candidate is prepared and demonstrates qualities and abilities of a professional Company Officer. Many of the activities will be experienced on a regular basis by a Company Officer while other activities may occur infrequently during the course of a year or a career. Regardless, the activities will be evaluated to specific JPR's found in NFPA 1021: Standard for Fire Officer Professional Qualifications.

The FSTB has the expectation that all activities will contain a significant amount of professionalism and seriousness in that each individual activity is clearly explained, contains proper grammar and spelling, and has good flow within the document. Although these activities are for the FSTB, the basis of the different activities have the potential to be used at the candidate's actual fire department in legal or disciplinary situations, future justification for services to city officials, or even published in local newspapers when issues arise within the fire department.

Lastly, if the candidate is having difficulty understanding the basis of an activity or is struggling to demonstrate information professionally or in greater detail, it is recommended that the candidate works with a chief officer to better develop activities to ensure a complete project. Additionally, the oral interview portion of the project is another opportunity for the chief officer to review the different activities and provide final suggestions or communications to the candidate before the project is submitted to the FSTB for review.

**References/Textbooks:**

- IFSTA, *Fire and Emergency Services Company Officer*, 5th Edition

# Fire Officer II - Local Verification Form

NFPA 1021 - 2014

Candidate's Name: \_\_\_\_\_

Candidate's Fire Department: \_\_\_\_\_

FSTB ID # \_\_\_\_\_ Date of Birth \_\_\_\_\_

*(First 5 letters of last name & last 4 digits of SS #)*

## Local Verification Requirements

### 1. NFA 1021 - 2014, JPR 5.6.1, Produce Operational Plans:

The candidate has successfully demonstrated the ability to implement an incident management system.

The candidate has successfully demonstrated the ability to effectively communicate orally.

The candidate has successfully demonstrated the ability to supervise and account for assigned personnel under emergency conditions.

The candidate has successfully demonstrated the ability to serve in command staff and unit supervision positions within the Incident Management System.

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### This section is to be completed by the Fire Chief or Training Officer ONLY

I have supervised or witnessed the candidate operate at the scene of an emergency in my department and affirm that the candidate identified above has met the requirements listed above. All requirements have been successfully demonstrated per local department protocol. All information listed above can be validated by a written and/or hard copy of the documents maintained by the department.

\_\_\_\_\_  
Typed or Printed Name of Fire Department Chief or Training Chief

\_\_\_\_\_  
Signature

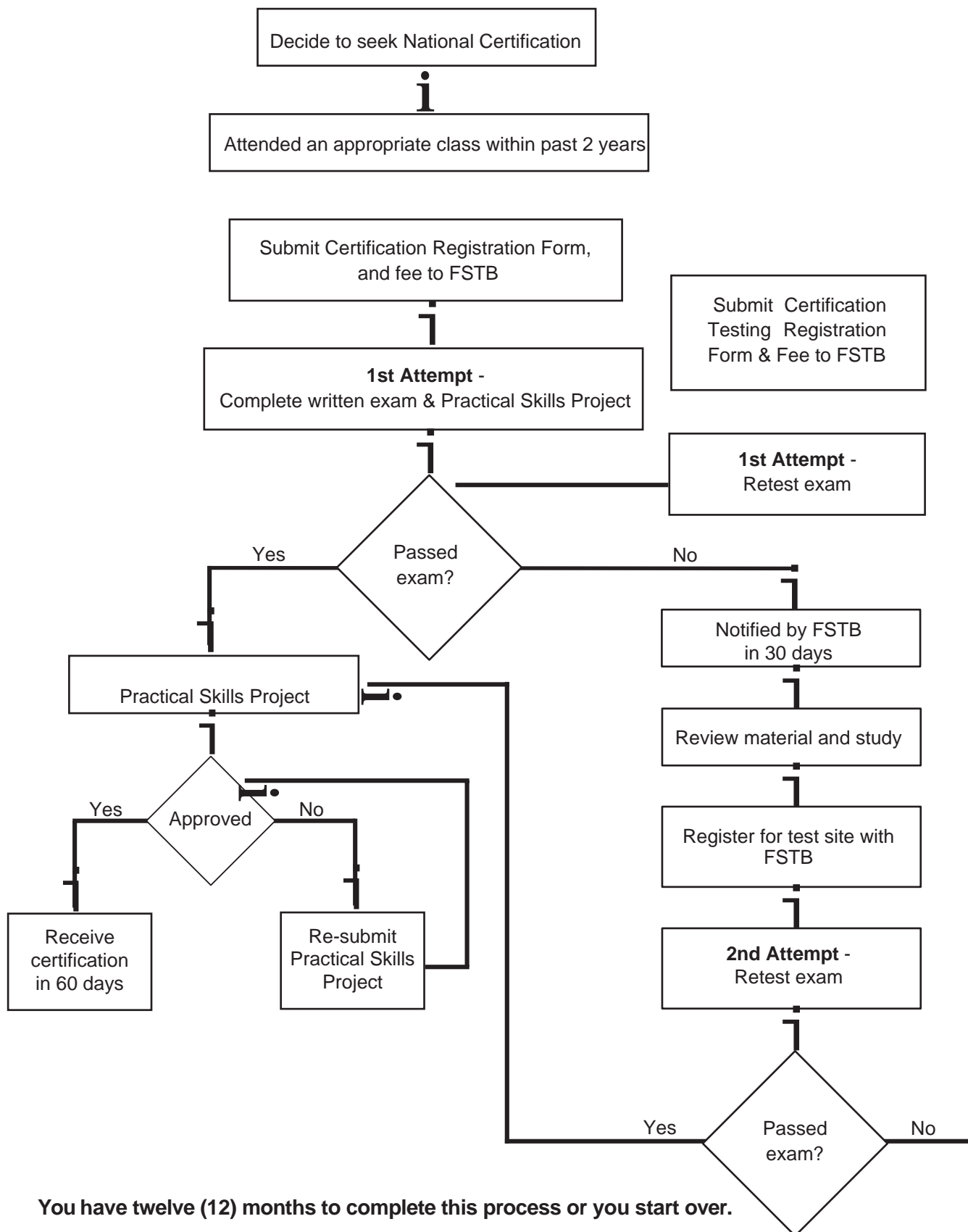
Date: \_\_\_\_\_ Fire Department: \_\_\_\_\_

FD Phone Number: \_\_\_\_\_ FD Email: \_\_\_\_\_

**This form can ONLY be submitted after the candidate's Certification Testing Registration Form has been received by the FSTB and entered into the Certification database.**

**Scan completed document and email to: [fstbcert@dps.state.ia.us](mailto:fstbcert@dps.state.ia.us)**

# Certification Flow Chart for Fire Officer II



## Skill Set: Develop an Inter-Agency Program

**Reference:** NFPA 1021-2014, Chapter 5, Sections 5.1.2, 5.3.1, 5.4.1, 5.4.5, and 5.6.3

**Candidate Equipment Required:** Station uniform, writing instruments

### Instructions to the Candidate

At this station, as a take home project, you will be required to develop an inter-agency policy or procedure involving your fire department and another non-fire, governmental agency or department whose jurisdiction or area of responsibility overlaps your department's jurisdiction.

You must identify an issue or a need in your department's jurisdiction and the appropriate agency or agencies with which your department will jointly address the issue or need. You will then prepare a transmittal report of at least two pages to your chief explaining the need for the new policy or procedure. This report should concisely explain the need, what is being done to solve the issue, and why you have involved the other government agency or agencies that you have selected. As part of this transmittal report, you must provide the data upon which you established the need or identified the original issue.

The answers you submit must be your own work. You will be graded on your assignment of tasks and/or responsibilities, clarity of expression, and completeness of answer.

This project must be **YOUR OWN ORIGINAL WORK.**

***To pass this station, you must successfully complete 100% of the steps.***

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	<b>Section 5.1.2 – General prerequisite skills</b>				
1.	Intergovernmental and interagency cooperation.				
	<b>Section 5.3.1- Explain the benefits to the organization of cooperating with allied organizations</b>				
2.	Ability to develop interpersonal relationships.				
3.	Ability to communicate orally.				
4.	Ability to communicate in writing.				
	<b>Section 5.4.1 – Develop a policy or procedure.</b>				
5.	Ability to communicate in writing.				
6.	Ability to solve problems.				

*(Continued)*

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	<b>Section 5.4.5 – Prepare a concise report for transmittal to a supervisor</b>				
7.	Ability to communicate in writing.				
8.	Ability to interpret data.				
	<b>Section 5.6.3 – Prepare a written report</b>				
9.	Ability to write clearly.				
10.	Ability to interpret response data correctly to identify the reasons for service demands.				

## Skill Set: Personnel Supervision

**Reference:** NFPA 1021-2014, Chapter 5, Sections 5.2.1, 5.2.2, 5.2.3, 5.4.6, and 5.7.1

**Candidate Equipment Required:** Station uniform, writing instruments

### Instructions to the Candidate

At this station, as a take home project, you will be required to review a trend and develop a personnel action program.

You will be given a scenario regarding a personnel issue that is requiring your intervention as a company officer. You will research and use your own department's regulations, SOPs/SOGs, policies, and procedures in dealing with this firefighter. You will initiate appropriate personnel actions, provide appropriate counseling, complete a personnel evaluation, and create a personal development plan for the member to correct the issue and prevent its reoccurrence over the long term.

Your answers should be thorough and complete. The answers you submit must be your own work. You will be graded on your assignment of tasks and/or responsibilities, clarity of expression, and completeness of answer.

This project must be **YOUR OWN ORIGINAL WORK.**

***To pass this station, you must successfully complete 100% of the steps.***

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	<b>Section 5.2.1 – Initiate actions to maximize member performance and/or correct unacceptable performance</b>				
1.	Ability to communicate orally.				
2.	Ability to communicate in writing.				
3.	Ability to solve problems.				
4.	Ability to increase teamwork.				
5.	Ability to counsel members.				
	<b>Section 5.2.2 – Evaluate job performance of assigned members</b>				
6.	Ability to communicate orally.				
7.	Ability to communicate in writing.				
8.	Ability to plan and conduct evaluations.				
	<b>Section 5.2.3 – Create a professional development plan for a member of the organization</b>				
9.	Ability to communicate orally.				
10.	Ability to communicate in writing.				
	<b>Section 5.4.6 – Develop a plan to accomplish change in the organization</b>				
11.	Ability to communicate orally.				
12.	Ability to communicate in writing.				

## **Skill #2 Scenario**

You are the Company Officer on a crew containing an 18-year veteran as the driver operator, a 7-year veteran as a firefighter, and a 5 month probationary firefighter. You have been the supervisor for the veteran members for two years and received the Probationary Firefighter when he graduated the Fire Department Academy. The Probationary Firefighter, Damien Keefe had no previous firefighter knowledge before entering the Fire Department Academy and graduated with average to below average scores in Firefighter I and EMT. During his first 5 months, you are noticing different issues with Probationary Firefighter Keefe that are needing to be addressed through different personnel actions, counseling, evaluations, and development plans. Below are the three largest issues you have observed:

1. With Probationary Firefighter Keefe having no previous firefighter knowledge, he had a large uphill challenge learning all the information contained in Firefighter I and EMT. The academy completed the State of Iowa Program for both programs that involved a blend of classroom and hands on portions. When reviewing his file, you have found that Probationary Firefighter Keefe scored average with his class in the EMT and below average with his class in Firefighter I. As the Company Officer, you are required to complete a daily company level training activity that lasts longer than two hours. During this time, yourself and the veteran members of the crew have attempted to train Probationary Firefighter Keefe. During the training, you have found that he doesn't understand different equipment names and locations on the apparatus, is slow to don his PPE and SCBA during training and incidents, and makes constant mistakes during different evolutions that make(s) it appear that he doesn't understand the components of the evolution.

2. You have noticed that Probationary Firefighter Keefe is having a difficult time relating to other members of your crew and has difficulty self-starting tasks or conversations with others. As with no having no previous firefighter knowledge, Probationary Firefighter Keefe doesn't understand the importance of teamwork when doing different tasks around the stations such as maintenance or cleaning. He is typically found doing an unrelated task while others are working together or will wait until someone else tells him how to complete the task step by step. Probationary Firefighter Keefe is a reserved individual in that he hasn't talked much about his personal life, background, or goals and can be typically be found eating alone or looking at his cell phone during slow times.

3. During the probationary year, all probationary firefighters are required to obtain their Firefighter II certification within 6 months of graduating the Fire Department Academy. You have reminded Probationary Firefighter Keefe about the requirement and have been told he is working on the project portion but haven't seen him physically working on it. While cleaning the office area that the station, you observe two sets of Firefighter II projects laying on the table. One set is Probationary Firefighter Keefe's and the other set is a different probationary firefighter assigned to a different shift. When quickly reviewing the information, it appears that the information on the projects has been plagiarized but you are unsure of which work is the original copy and which one is the plagiarized copy.

As mentioned above, you are required to initiate personnel actions, provide counseling, personnel evaluation, and development of a personal action plan according to your own department's regulations, SOPs/SOGs, policies, and procedures.

## **Personnel Action Information**



## **Counseling Information**

## **Personnel Evaluation Information**

## **Personnel Development Plan Information**

## Skill Set: Accident Investigation

**Reference:** NFPA 1021-2014, Chapter 5, Sections 5.2.1, 5.4.6, and 5.7.1

**Candidate Equipment Required:** Station uniform, writing instruments

### Instructions to the Candidate

At this station, as a take home project, you will be required to research an incident and conduct/develop appropriate action.

**Health, Safety, Accident:** You will be given a scenario regarding a member's accident, injury, or health exposure. You will research and use your own department's regulations, SOPs/SOGs, policies, or procedures in dealing with this scenario. You will complete an investigation of the occurrence, along with completing a summary report of your investigation. You will then develop an appropriate plan with supporting documentation to cause a positive change in your organization. This plan should include all appropriate support documents, messages, policies, etc., and be directed to the fire chief. This document should explain targeted training, policy or procedure development, and other ways to prevent similar incidents.

Your answers should be thorough and complete. The answers you submit must be your own work. You will be graded on your assignment of tasks and/or responsibilities, clarity of expression, and completeness of answer.

This project must be **YOUR OWN ORIGINAL WORK.**

***To pass this station, you must successfully complete 100% of the steps.***

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	<b>Section 5.2.1 – Initiate actions to maximize member performance and/or correct unacceptable performance</b>				
1.	Ability to communicate orally.				
2.	Ability to communicate in writing.				
3.	Ability to solve problems.				
4.	Ability to increase teamwork.				
5.	Ability to counsel members.				
	<b>Section 5.4.6 – Develop a plan to accomplish change in the organization</b>				
6.	Ability to communicate orally.				
7.	Ability to communicate in writing.				
	<b>Section 5.7.1 – Analyze a member's accident, injury, or health exposure history</b>				
8.	Ability to communicate orally.				
9.	Ability to interpret accidents, injuries, occupational illnesses, or death reports.				

### **Skill #3 Scenario**

You are a company officer of the Anytown Fire Department assigned to Fire Station 7, A Shift. Fire Station 7 is located near a large housing development, over three square miles (7.8 km<sup>2</sup>) in size, and is situated in a wildland/interface environment. Anticipating an emergency threat posed by the possibility of brush and forest fire potential, the fire department stationed Brush Unit 7 in Fire Station 7.

David Dent is the senior firefighter on your shift and is the designated D/O for BU-7. He has been trained to operate fire department engines and aerial devices. Though national statistics indicate that brush units suffer the same accident rate as other fire apparatus, BU-7 has been involved in three accidents with only a small number of emergency calls. Firefighter Dent has been the operator in all three accidents. No other accidents have been reported when other Driver/Operators are assigned to the vehicle. Though none have resulted in an injury, you believe that additional investigation and analysis are needed. The vehicle accidents have occurred often enough that you have become very concerned and believe that a more serious event could happen.

During the time that BU-7 has been in service, it has responded to 317 emergency calls. These calls by shift are:

102 - A Shift

99 - B Shift

116 - C Shift

Of the 102 emergency calls that BU-7 has responded to during A Shift, Firefighter Dent has been on duty and assigned to this vehicle for 95. Each of the other operators of BU-7 has as many responses in the unit as Dent.

D/O Dent is approximately 5'5" in height, and wears glasses but his vision is corrected to 20/20. The other drivers assigned to BU-7 are each over six feet tall.

BU-7 is a four-wheel drive vehicle on a standard pickup truck frame that has had a commercial fire body installed on the back. The cab is slightly higher than a normal pickup truck and due to the size of the fire body, oversized mirrors have been installed. These mirrors are of the type used on large trucks. The mirrors can be adjusted inward and outward, but will not move up or down.

Anytown Fire Department  
**Vehicle Accident Report 1**

<b>Date:</b> 03/04/18	<b>Vehicle Assigned Location &amp; Address:</b> Fire Station 7 15673 Hatfield Road
<b>Vehicle Designation:</b> BU-7	
<b>Name of Operator:</b> D/O Dent	<b>Vehicle Type:</b> Brush Unit
<b>Driver's License Number:</b> 12345678	<b>Shift:</b> A
<b>Incident Number:</b> 05-030434769	<b>Fire Incident Type &amp; Location:</b> Wildland Interface fire. Clear Wood Estates Development
<b>Police Department Accident Report Number:</b> 05-030434769	<b>Injuries:</b> No injuries
<b>Accident Description Narrative:</b> While responding to a reported field fire D/O David Dent struck a parked car as he tried to drive around a vehicle pulled to the side of the road. The front right side of BU-7 struck the left front quarter panel of the vehicle. D/O Dent was traveling about 35 miles per hour at the time of the accident and was trying to make a right turn from Clearwater Springs Road onto Bennet Street. The vehicle that was struck by BU-7 was stopped at the intersection.	
<b>Accident Cause Narrative:</b> D/O Dent was operating the BU-7 at 35 mph in a 20 mph zone while responding to a reported wildland fire in the Clear Wood Estates housing development. While attempting to make a hard right turn around a parked vehicle at the intersection of Woodland Acres Drive and Aspen Place, he struck a stopped vehicle. The vehicle was impacted on the left side suffering extensive damage from the driver's door forward. BU-7 sustained damage to the right front quarter panel and passenger door. Additionally, the right front tire was flattened. D/O Dent stated that he was watching for traffic to his left and began to make the turn, misjudging the proximity of the other vehicle. D/O Dent claimed that when he looked out the right side window, the mirror blocked his view of the vehicle to his right.	
<b>Supervisor/Manager:</b>  Your Name	<b>Driver/Operator:</b>  <i>David Dent</i>

Anytown Fire Department  
**Vehicle Accident Report 2**

<b>Date:</b> 10/23/18	<b>Vehicle Assigned Location &amp; Address:</b> Fire Station 7 15673 Hatfield Road
<b>Vehicle Designation:</b> BU-7	
<b>Name of Operator:</b> D/O Dent	<b>Vehicle Type:</b> Brush Unit
<b>Driver's License Number:</b> 12345678	<b>Shift:</b> A
<b>Incident Number:</b> 07-080424	<b>Fire Incident Type &amp; Location:</b> Brush pile. Northwest quadrant of the Tall Ted Oak Estates subdivision - no roadway.
<b>Police Department Accident Report Number:</b> 06-1023256348	
<b>Injuries:</b> No injuries	
<b>Accident Description Narrative:</b> Following the extinguishment of a large brush fire, D/O Dent was returning to service when he struck a tree with BU-7. The tree was struck by the right side of the vehicle. The impact severely damaged the fire unit. The fire body, including all compartments on the right side, was crushed and the 200-gallon (800 L) water tank was ruptured. The fire pump was broken from its mountings. The right rear wheel well was displaced into the rear tires. D/O Dent stated that he had just begun to move the vehicle and was turning it around when the accident occurred. He also stated that he had checked his mirrors for objects but because of the location of the right side mirror he did not see the tree.	
<b>Accident Cause Narrative:</b> The accident occurred in an area that was being prepared for development and was covered with slash and debris from these operations. The area where the accident happened was relatively clear except for the oak tree that was struck by BU-7 and about 300 feet from the location of the fire. D/O Dent stated that he had just begun to move the vehicle and was turning it around when the accident occurred. He also stated that he had checked his mirrors for objects but because of the location of the right side mirror he did not see the tree as he turned.	
<b>Supervisor/Manager:</b>  Your Name	<b>Driver/Operator:</b>  <i>David Dent</i>

Anytown Fire Department  
**Vehicle Accident Report 3**

<b>Date:</b> 11/14/18	<b>Vehicle Assigned Location &amp; Address:</b> Fire Station 7 15673 Hatfield Road	
<b>Vehicle Designation:</b> BU-7		
<b>Name of Operator:</b> D/O Dent	<b>Vehicle Type:</b> Brush Unit	
<b>Driver's License Number:</b> 12345678	<b>Shift:</b> A	
<b>Fire Incident Number:</b> 04-038976	<b>Fire Incident Type &amp; Location:</b> Brush fire. Northwest section of Sweethomes Development.	
<b>Police Department Accident Report Number:</b> 04-111412540		
<b>Injuries:</b> No injuries		
<b>Accident Description Narrative:</b> While responding to a reported brush fire BU-7 struck a stop sign on the northeast corner of Carol Avenue and Hatfield Road as it was making a right turn. The stop sign was knocked over and run over by BU-7. The vehicle suffered damage, mostly scraped paint, to the right door and right side of the fire body. D/O Dent stopped the vehicle and checked it for damage, and finding it minor proceeded to the fire for fire suppression activities. Dent claimed that when he looked to the right, the mirror on the passenger side partially blocked his vision causing him to misjudge the proximity of the curb and sign.		
<b>Accident Cause Narrative:</b> The accident occurred while D/O Dent was attempting to make a right turn. The vehicle was turned too early and the rear of the vehicle went over the curb and struck the stop sign. Driver Dent stated that he was traveling at about 45 miles per hour. The posted speed limit is 25 miles per hour.		
<b>Supervisor/Manager:</b>  Your Name	<b>Driver/Operator:</b>  <i>David Dent</i>	



## **Investigation Information**

## **Summary of Investigation**

## **Recommendations and Department Operation / Procedure Changes**

## Skill Set: Budget

**Reference:** NFPA 1021-2014, Chapter 5, Sections 5.4.2 and 5.4.3

**Candidate Equipment Required:** Station uniform, writing instruments

### Instructions to the Candidate

At this station, as a take home project, you will be given a scenario involving the purchase of a new system or program, or a major piece of equipment, and will be required to prepare a budget request to support this outlay. You must include the costs relating to issues of personnel as they apply to overtime, backfill, etc.; training delivery, whether in-house or at another location; supporting equipment purchase and installation; and facilities modification.

You will prepare the appropriate documents in accordance with department policies & procedures. You will prepare the consolidated budget request, appropriate explanatory supporting documents, and a transmittal document through the chain of command to the Chief explaining all components of the request.

Keep your answers brief and complete. The answers you submit must be your own work. You will be graded on your assignment of tasks and/or responsibilities, clarity of expression, and completeness of answer.

This project must be **YOUR OWN ORIGINAL WORK.**

***To pass this station, you must successfully complete 100% of the steps.***

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	<b>Section 5.4.2 – Develop a project or divisional budget</b>				
1.	Ability to allocate finances.				
2.	Ability to relate interpersonally.				
3.	Ability to communicate orally.				
4.	Ability to communicate in writing.				
	<b>Section 5.4.3 – Describe the process of purchasing, including soliciting and awarding bids.</b>				
5.	Ability to use evaluative methods.				
6.	Ability to communicate orally.				
7.	Ability to communicate in writing.				

## Project Budget Worksheet

## Personnel

Budget Item		Cost
	<b>Total</b>	

## Operating

Budget Item		Cost
	<b>Total</b>	

Total Proposed Project Budget

Personnel	
Operating	
<b>Total</b>	

Your Fire Department has identified the need to establish a small training center that will allow firefighters to practice different fire ground scenarios. The Fire Chief has requested that you prepare a budget request to begin the development process for the training center. The justification for this training center is based upon the Fire Chiefs desire to drastically increase the amount of training hours by all Fire Department Personnel as he feels this will increase the overall safety and operations at the Fire Department. Additionally, with the creation of the Fire Department training center, is intended to reduce the cost of personnel overtime and facility rental fees from the local college as the cost has nearly doubled in the last five years.

The Fire Chief mentioned a few general ideas for the training center in that the City has land available for the training center in an undeveloped business park, be able to practice different scenarios with or without live fire, and would like it to replicate something similar to the two supplied pictures:



Since the development of the training center is in early stages, you have located a course in a neighboring state that deals with the designing, construction, and operations of container-based training centers. You have determined that you and one firefighter will be allowed to attend this specialized course to better assist with the development of the training center. With this course being out of state, it's anticipated that each member will earn 16 hours of overtime for the training.

You have visited with the Fire Chief, Mike Kennedy; and he has directed you to put a budget request for the specialized course. He recommends that the request explain the program, the justification, and the benefits to the department as well as the anticipated costs for the specialized course.

The following is information about the specialized course, needed equipment, personnel costs, and travel information.

### **Designing, Constructing, & Operating Container-Based Training Props**

The Training Center is known for its creative and functional use of shipping containers to provide some of the most realistic fireground training available. The Training center has 15 fully-functional container-based training props capable of creating both simulated and realistic fireground conditions for firefighters to practice and learn the skills needed during actual fireground operations.

This training course is designed to assist departments who are ready to take their training to the next level by creating and operating container-based training props during this three day course.

**Registration Fee: \$1,795.00 per Individual**

## Informational Material / Text Book - \$135.00 per Individual

### Personnel Costs:

Lieutenant Overtime per Hour - \$38.50

Firefighter Overtime per Hour - \$28.75

### Travel Information:

Round Trip Flight per Person - \$305.67

Hotel Stay per Night – \$108.00

Breakfast Allowance - \$8.00

Lunch Allowance - \$12.00

Dinner Allowance - \$20.00

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Leave on Airplane	Class	Class	Class	Return on Airplane
Lunch	Breakfast	Breakfast	Breakfast	Breakfast
Dinner	Lunch	Lunch	Lunch	Lunch
Hotel	Dinner	Dinner	Dinner	
	Hotel	Hotel	Hotel	

## Skill Set: Fire Cause & Determination/Post-Incident Analysis

**Reference:** NFPA 1021-2014, Chapter 5, Sections 5.4.4, 5.5.1, and 5.6.2

**Candidate Equipment Required:** Station uniform, writing instruments, PPE, Investigative tools

### Instructions to the Candidate

At this station, as a take home project, you will be required to investigate an actual fire call in your jurisdiction to determine cause; prepare a news release in accordance with department policies concerning this incident; and develop and conduct a post-incident analysis.

**REQUIREMENT 1: DETERMINE POINT OF ORIGIN AND PRELIMINARY CAUSE.** You must use an actual fire call from your jurisdiction. It may be a vehicle fire, a wildland fire, or a structure fire. Conduct an investigation of the fire to determine its point of origin and preliminary cause. Document your findings with at least two photos, applicable witness statements, and other documentation required by your jurisdiction. Complete the appropriate NFIRS documents and create at least a two page technical report about your fire investigation.

**REQUIREMENT 2: PREPARE A NEWS RELEASE.** Based upon the fire you have investigated, prepare a news release in accordance with your department's policies and procedures for news releases.

**REQUIREMENT 3: DEVELOP AND CONDUCT A POST-INCIDENT ANALYSIS.** Referring to department policies, procedures, and SOPs/SOGs, and develop a post-incident analysis of the incident. Refer to the investigation you conducted; department reports and records of the response; dispatch reports; incident command reports; etc. Then conduct a formal post-incident analysis debrief with your crew, along with the post-incident analysis documentation.

**IMPORTANT NOTE:** On all documents submitted for this Skill Set, remove actual names, addresses, phone numbers, SSNs, etc. to protect the privacy of individuals concerned. Replace them with fictitious names (e.g., John Doe), addresses (e.g., 100 Any Street), phone numbers (e.g., 111-222-3333), etc.

Your answers should be thorough and complete. The answers you submit must be your own work. You will be graded on your deductive skills, clarity of expression, and completeness of answers.

This project must be **YOUR OWN ORIGINAL WORK.**

*To pass this station, you must successfully complete 100% of the steps.*

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	<b>Section 5.4.4 - Prepare a news release</b>				
1.	Ability to communicate orally.				
2.	Ability to communicate in writing.				
	<b>Section 5.5.1 – Determine the point of origin and preliminary cause of a fire</b>				
3.	Ability to communicate orally.				
4.	Ability to communicate in writing.				
5.	Ability to apply knowledge using deductive skills.				

*(Continued)*



No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	<b>Section 5.6.2 – Develop and conduct a post-incident analysis</b>				
6.	Ability to write reports.				
7.	Ability to communicate orally.				
8.	Ability to evaluate skills.				

**B Agency Referred To** ☐ None

Agency Name \_\_\_\_\_ Their case number \_\_\_\_\_

Number \_\_\_\_\_ Prefix \_\_\_\_\_ Street or Highway \_\_\_\_\_ Street Type \_\_\_\_\_ Suffix \_\_\_\_\_ Their ORI \_\_\_\_\_

Post Office Box \_\_\_\_\_ Apt./Suite/Room \_\_\_\_\_ City \_\_\_\_\_ Their Federal Identifier (FID) \_\_\_\_\_

State \_\_\_\_\_ ZIP Code \_\_\_\_\_ Agency phone number \_\_\_\_\_ Their FDID \_\_\_\_\_

**C Case Status**

1 ☐ Investigation open  
2 ☐ Investigation closed  
3 ☐ Investigation inactive

4 ☐ Closed with arrest  
5 ☐ Closed with exceptional clearance

**D Availability of Material First Ignited**

1 ☐ Transported to scene  
2 ☐ Available at scene  
U ☐ Unknown

**E Suspected Motivation Factors** Check up to three factors

11 <input type="checkbox"/> Extortion	22 <input type="checkbox"/> Hate crime	42 <input type="checkbox"/> Vanity/Recognition	54 <input type="checkbox"/> Burglary
12 <input type="checkbox"/> Labor unrest	23 <input type="checkbox"/> Institutional	43 <input type="checkbox"/> Thrills	61 <input type="checkbox"/> Homicide concealment
13 <input type="checkbox"/> Insurance fraud	24 <input type="checkbox"/> Societal	44 <input type="checkbox"/> Attention/Sympathy	62 <input type="checkbox"/> Burglary concealment
14 <input type="checkbox"/> Intimidation	31 <input type="checkbox"/> Protest	45 <input type="checkbox"/> Sexual excitement	63 <input type="checkbox"/> Auto theft concealment
15 <input type="checkbox"/> Void contract/lease	32 <input type="checkbox"/> Civil unrest	51 <input type="checkbox"/> Homicide	64 <input type="checkbox"/> Destroy records/evidence
21 <input type="checkbox"/> Personal	41 <input type="checkbox"/> Fireplay/Curiosity	52 <input type="checkbox"/> Suicide	00 <input type="checkbox"/> Other suspected motivation
		53 <input type="checkbox"/> Domestic violence	UU <input type="checkbox"/> Unknown motivation

**F Apparent Group Involvement** ☐ None

Check up to three factors

1 ☐ Terrorist group  
2 ☐ Gang  
3 ☐ Anti-government group  
4 ☐ Outlaw motorcycle organization  
5 ☐ Organized crime  
6 ☐ Racial/Ethnic hate group  
7 ☐ Religious hate group  
8 ☐ Sexual preference hate group  
0 ☐ Other group  
U ☐ Unknown

**G<sub>1</sub> Entry Method**

\_\_\_\_\_

Entry Method

**G<sub>2</sub> Extent of Fire Involvement on Arrival**

\_\_\_\_\_

Extent of Fire Involvement

**H Incendiary Devices** CONTAINER ☐ No container

Select one from each category

11 ☐ Bottle (glass) 14 ☐ Pressurized container 17 ☐ Box  
12 ☐ Bottle (plastic) 15 ☐ Can (not gas or fuel) 00 ☐ Other Container  
13 ☐ Jug 16 ☐ Gasoline or fuel can UU ☐ Unknown

IGNITION/DELAY DEVICE ☐ No device

11 ☐ Wick or fuse 17 ☐ Road flare/fuse  
12 ☐ Candle 18 ☐ Chemical component  
13 ☐ Cigarette and matchbook 19 ☐ Trailer/Streamer  
14 ☐ Electronic component 20 ☐ Open flame source  
15 ☐ Mechanical device 00 ☐ Other delay device  
16 ☐ Remote control UU ☐ Unknown

FUEL ☐ None

11 ☐ Ordinary combustibles 16 ☐ Pyrotechnic material  
12 ☐ Flammable gas 17 ☐ Explosive material  
14 ☐ Ignitable liquid 00 ☐ Other material  
15 ☐ Ignitable solid UU ☐ Unknown

**I Other Investigative Information**

Check all that apply

1 ☐ Code violations  
2 ☐ Structure for sale  
3 ☐ Structure vacant  
4 ☐ Other crimes involved  
5 ☐ Illicit drug activity  
6 ☐ Change in insurance  
7 ☐ Financial problem  
8 ☐ Criminal/Civil actions pending

**J Property Ownership**

1 ☐ Private  
2 ☐ City, town, village, local  
3 ☐ County or parish  
4 ☐ State or province  
5 ☐ Federal  
6 ☐ Foreign  
7 ☐ Military  
0 ☐ Other

**K Initial Observations**

Check all that apply

1 ☐ Windows ajar 5 ☐ Fire department forced entry  
2 ☐ Doors ajar 6 ☐ Entry forced prior to FD arrival  
3 ☐ Doors locked 7 ☐ Security system activated  
4 ☐ Doors unlocked 8 ☐ Security system present (not activated)

**L Laboratory Used** Check all that apply ☐ None

1 ☐ Local 3 ☐ ATF 5 ☐ Other 6 ☐ Private  
2 ☐ State 4 ☐ FBI Federal

<b>H1 Mobile Property Involved</b> <input type="checkbox"/> None	<b>H2 Mobile Property Type and Make</b> <div style="margin-bottom: 10px;"> <input type="checkbox"/> Not involved in ignition, but burned       </div> <div style="margin-bottom: 10px;"> <input type="checkbox"/> Involved in ignition, but did not burn       </div> <div> <input type="checkbox"/> Involved in ignition and burned       </div>	<b>Local Use</b> <input type="checkbox"/> <b>Pre-Fire Plan Available</b> Some of the information presented in this report may be based upon reports from other agencies:  <input type="checkbox"/> Arson report attached <input type="checkbox"/> Police report attached <input type="checkbox"/> Coroner report attached <input type="checkbox"/> Other reports attached
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Mobile property model

Year




License Plate Number

State

VIN

Structure fire? Please be sure to complete the Structure Fire form (NFIRS-3).

NFIRS-2 Revision 01/01/05

<p><b>Complete this section if the person involved in the ignition of the fire was a child or Juvenile under the age of 18.</b></p>	<p><b>M2</b> Age or Date of Birth</p> <div style="display: flex; align-items: center; justify-content: center;"> <div style="text-align: center;">               Age (in years)           </div> <div style="margin: 0 20px;">OR</div> <div style="text-align: center;">               Month      Day      Year           </div> </div>	<p><b>M4</b> Race</p> <p>1 <input type="checkbox"/> White</p> <p>2 <input type="checkbox"/> Black, African American</p> <p>3 <input type="checkbox"/> American Indian, Alaska Native</p> <p>4 <input type="checkbox"/> Asian</p> <p>5 <input type="checkbox"/> Native Hawaiian, Other Pacific Islander</p> <p>0 <input type="checkbox"/> Other, multiracial</p> <p>U <input type="checkbox"/> Undetermined</p>	<p><b>M6</b> Family Type</p> <p>1 <input type="checkbox"/> Single parent</p> <p>2 <input type="checkbox"/> Foster parent(s)</p> <p>3 <input type="checkbox"/> Two-parent family</p> <p>4 <input type="checkbox"/> Extended family</p> <p>N <input type="checkbox"/> No family unit</p> <p>0 <input type="checkbox"/> Other family type</p> <p>U <input type="checkbox"/> Unknown</p>
<p><b>M1</b> Subject Number</p> <p>Complete a separate Section M form for each juvenile.</p> <div style="text-align: center;">               Subject Number           </div>	<p><b>M3</b> Gender</p> <p>1 <input type="checkbox"/> Male      2 <input type="checkbox"/> Female</p>	<p><b>M5</b> Ethnicity</p> <p>1 <input type="checkbox"/> Hispanic or Latino</p> <p>0 <input type="checkbox"/> Non Hispanic or Latino</p>	

<b>M7</b>	<b>Motivation/Risk Factors</b>	Check only one of codes 1–3 and then all others (4–9) that apply.
	1 <input type="checkbox"/> Mild curiosity about fire 2 <input type="checkbox"/> Moderate curiosity about fire 3 <input type="checkbox"/> Extreme curiosity about fire  4 <input type="checkbox"/> Diagnosed (or suspected) ADD/ADHD 5 <input type="checkbox"/> History of trouble outside school 6 <input type="checkbox"/> History of stealing or shoplifting 7 <input type="checkbox"/> History of physically assaulting others 8 <input type="checkbox"/> History of fireplay or firesetting 9 <input type="checkbox"/> Transiency 0 <input type="checkbox"/> Other U <input type="checkbox"/> Unknown	
<b>M8</b>	<b>Disposition of Person Under 18</b>	1 <input type="checkbox"/> Handled within department 2 <input type="checkbox"/> Released to parent/guardian 3 <input type="checkbox"/> Referred to other authority 4 <input type="checkbox"/> Referred to treatment/counseling program 5 <input type="checkbox"/> Arrested, charged as adult 6 <input type="checkbox"/> Referred to firesetter intervention program 0 <input type="checkbox"/> Other U <input type="checkbox"/> Unknown

[illegible]

# **POST-INCIDENT ANALYSIS**

## **I. INCIDENT DATA**

Alarm #: \_\_\_\_\_ Date: \_\_\_\_\_

Your Unit Number: \_\_\_\_\_ Dispatch Time: \_\_\_\_\_

Arrival Time: \_\_\_\_\_ Alarm: \_\_\_ 1st \_\_\_ 2nd \_\_\_ 3rd \_\_\_ Other: \_\_\_\_\_

Your Incident Supervisor: \_\_\_\_\_ ICS Function: \_\_\_\_\_

\_\_\_\_\_

Emergency Type: \_\_\_\_\_

Describe the Situation on Arrival: \_\_\_\_\_

\_\_\_\_\_

## **II. STRATEGY**

What were the strategies for the incident? \_\_\_\_\_

\_\_\_\_\_

How long did it take to achieve the goals?: \_\_\_\_\_

In what sequence were the strategies achieved: \_\_\_\_\_

\_\_\_\_\_

How did you determine what the plan was? \_\_\_\_\_

Personal Observation: \_\_\_\_\_ Briefing by: \_\_\_\_\_

## **III. TACTICS**

Describe the tactical assignment given to you in chronological order: \_\_\_\_\_

\_\_\_\_\_

ICS Position that gave you the assignment: \_\_\_\_\_

Coordination required with: \_\_\_\_\_

Coordination Determined: \_\_\_\_\_ at Briefing \_\_\_\_\_ During Operations

How did you determine your Supervisor?

\_\_\_\_\_ In the Directive \_\_\_\_\_ Observation

#### IV. PROBLEMS ENCOUNTERED

Type:

\_\_\_\_\_ Coordination

\_\_\_\_\_ Staff Support

\_\_\_\_\_ Ineffective Equipment Use

\_\_\_\_\_ Communications

\_\_\_\_\_ Inadequate Personnel

\_\_\_\_\_ Equipment Failure

\_\_\_\_\_ Safety

\_\_\_\_\_ Too Many Personnel

\_\_\_\_\_ Other

Descriptive Account of Problems Checked: \_\_\_\_\_

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Recommendations: \_\_\_\_\_

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## **V. ICS ORGANIZATION**

Draw the ICS Organizational Chart for your part of the operation. Start with your immediate supervisor and go up and down as far as you know.

## Skill Set: Oral Interview

**Reference:** NFPA 1021, 2014 Edition - Chapter 5, Sections 5.2.1, 5.2.2, 5.2.3, 5.3.1, 5.4.2, 5.4.3, 5.4.4, 5.4.6, 5.5.1, 5.6.2, and 5.7.1

### Evaluator's Instructions to the Candidate

At this station, as a take home project, you will need to review and provide an update to your Fire Chief or Assistant Chief, the information you have completed for the Fire Officer II Project.

You will explain the different scenarios contained in the project and more importantly how you handled and completed the different scenarios in greater detail. The goal of this meeting is to provide two way oral communication about the different scenarios, allow development and mentoring opportunities, and practice/insight for future assessment center scenarios.

Your meeting with your Fire Chief or Assistant Chief should last approximately 30 minutes or longer. Additionally, documentation that the meeting occurred between yourself and Fire Chief or Assistant Chief must be submitted to the FSTB, along with the Fire Chief or Assistant Fire Chief completing the attached Skill Sheet.

### This section is to be completed by Fire Chief or Assistant Chief

I have reviewed the candidate's project and affirm that the candidate has met the requirements listed in the skills list above. All requirements have been successfully conducted and completed per local department protocol. All information listed above can be validated by a copy of the documents maintained by the department.

\_\_\_\_\_  
Type or Printed Name of Fire Chief/Assistant Chief

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_ Fire Department: \_\_\_\_\_

FD Phone Number: \_\_\_\_\_ FD Email: \_\_\_\_\_

*(Continued)*



No.	Evaluated Skill Items to be Evaluated by Fire Chief/Assistant Chief	First Time		Retest	
		Pass	Fail	Pass	Fail
	Section 5.2.1 – Initiate actions to maximize member performance and/or correct acceptable performance				
	Section 5.2.2 – Evaluate job performance of assigned members				
	Section 5.2.3 – Create a professional development plan for a member of the organization				
	Section 5.3.1 – Explain the benefits to the organization of cooperating allied organizations				
	Section 5.4.2 – Develop a project or divisional budget				
	Section 5.4.3 – Describe the process of purchasing, including soliciting and awarding bids				
	Section 5.4.4– prepare a news release				
	Section 5.4.6 – Develop a plan to accomplish change in the organization				
	Section 5.5.1 – Determine the point of origin and preliminary cause of a fire				
	Section 5.6.2 – Develop and conduct a post-incident analysis				
	Section 5.7.1 – Analyze a member’s accident, injury, or health exposure history				
	Interviews will be scored based upon the following criteria:				
1.	Completeness of response.				
2.	Positive attitude when presenting results and making recommendations.				
3.	Conclusions supported by the facts.				
4.	Clarity of expression in framing response				
5.	Confidence in delivery.				