

SECTION 1

TEAM GUIDELINES

TEAM MISSION & CREED

MISSION: Unify, manage and ensure safety of public safety resources mobilized in time of emergency to protect the people, property, and the environment of the State of Oregon and adjoining states.

CREED

No job is so important and
No service so urgent,
That we cannot take time to do the job safely
– and do it right the first time.

TEAM CONFIGURATION

IMT teams will be configured with the following positions:

Incident Commander	Deputy Incident Commander
Information Officer	Law Enforcement Officer
Safety Officer	Assistant Safety Officer
Operations Section Chief	Deputy Operations Section Chief
(4) Division Group Supervisor	
Planning Section Chief	Deputy Planning Section Chief
Resource/Demob Unit Leader	
Logistics Section Chief	Facilities Unit Leader
Communications Unit Leader	Incident Communications Manager
Finance Section Chief	

SELECTION-

*See ADMINISTRATION SECTION OSFM POLICY
"MEMBER RECRUITMENT and SELECTION"*

TENURE

Once selected for a team, the team member has a standing appointment. Selected team members are expected to commit to a minimum three-year standing appointment. The OSFM and Incident Commander reserve the right to replace team members at any time for poor performance or unavailability.

TRAINING EXPECTATIONS

Team members are expected to attend the annual pre-fire season training and planning conference, team meetings and debriefings as scheduled by Incident Commanders, and training as offered to meet or maintain position qualifications. Original team members are expected to meet the requirements of their position.

AVAILABILITY

Unless coordinated in advance with the Incident Commander, team members are expected to be available when the team is in "on-call" status.

Trading “on-call” status with counterparts from other teams is acceptable. Members are expected to trade position for position. Deputy ICs can fill in for their IC. Deputy Section Chiefs with IMT experience can fill in for their Section Chiefs. The team’s Incident Commander must first approve other trades outside of assigned positions. In all cases team members will notify the Incident Commander that they are unavailable and name the individual who has agreed to cover their position.

EQUIPMENT

Team members are expected to provide their equipment and PPE as defined in the *Oregon Fire Service Mobilization Plan*.

IDENTIFICATION

Team members will be identifiable in the field. OSFM will provide team members with ID Cards, OSFM patches, Orange Team Vests, *Polo shirts and *Tee shirts and OSFM IMT ball caps.

****OSFM Clothing is not provided as protective clothing. Team members must to be aware of the appropriateness of the clothing they wear as it relates to the duties on an incident. Example: synthetic clothing is not recommended when involved in fire suppression activities.***

POOL SELECTION, MOBILIZATION AND EXPECTATIONS

POOL CONFIGURATION

The OSFM will recruit for and maintain a pool of qualified individuals for all team positions

SELECTION

The OSFM will solicit applications for available positions, pools and trainees.

Those selected for the pool will be given priority consideration for future IMT vacancies.

EXPECTATIONS

Pool members will be familiar with applicable procedures and requirements in the *Oregon Fire Service Mobilization Plan* and the *OSFM Incident Management Team Guidebook*.

Pool members who are available for mobilization are expected to be ready to mobilize immediately upon notification.

CALL-UP

Pool members and Trainees will be mobilized from a rotation pool list to fill temporary vacancies on a mobilized team or to supplement a position on a mobilized team. Pool resources will be called up when requested by an Incident Commander and Agency Administrator.

Call-up will be by rotation within a position. Pool members on the top of the rotation list will be called first. When a pool member is mobilized, their name will drop to the bottom of the list. Pool members who are not available when called will retain their position on the rotation list. Rotation lists will carry over to the next incident.

PERFORMANCE APPRAISALS

Performance appraisals will be completed for all incident responders and IMT members prior to demobilization. Performance appraisals will be submitted as a part of the documentation by the DOCL to the OSFM.

PURPOSE

The purpose of performance reviews is to help emergency responders be successful and improve individual and team efficiency and effectiveness. All responders want to do a good job, have a good reputation, and be invited back.

Section Chiefs or individuals conducting evaluations need to:

- **Communicate** positives and, if needed, areas for improvement
- **Motivate** with specific positive reinforcement
- **Inform** to improve success
- **Document** both successes and training needs

Note: The #1 complaint of U.S. workers is that their bosses don't notice or appreciate what they do.

PROCESS

Incident Commanders and Section Chiefs will review the performance of their subordinates at each incident. Use the Incident Personnel Performance Rating form in this section.

Division/Group Supervisors are responsible for evaluating Task Force Leader performance. Use the Task Force/Strike Team Leader Performance Rating form in the Operations section.

The performance review should be a discussion and documentation of praise, training, and coaching.

- **Be specific.** Say, “The job you did . . . was thorough and operationally sharp.” NOT: “Good job.” Say, “The TF worked hard to install sprinklers and prep every structure in their division.” NOT: “Worked hard.”
- **Provide results-oriented coaching.**
 - Give positive reinforcement to behaviors that lead to success.
 - Be honest and direct about how the individual or Task Force can be more successful.
- **No surprises.** Give praise and coaching during the incident. Don’t “gunny bag” problems and dump them out during the performance review.

All performance ratings will be turned in through the chain of command to Planning no later than the IMT incident debriefing. The IC will review all performance ratings and forward them to the Emergency Response Unit (ERU) Manager at OSFM.

The ERU Manager will route performance ratings to the respective fire department supervisors. The ERU manager will discuss poor evaluations with the individuals. A copy will be retained in the IMT files.

OREGON STATE FIRE MARSHAL OVERHEAD PERSONNEL PERFORMANCE EVALUATION		INSTRUCTIONS: The immediate supervisor shall complete this form for each subordinate. This evaluation shall be reviewed with the subordinate, who will acknowledge such by signing at the bottom of the form. The supervisor shall deliver this form to the planning section before leaving the incident.						
THESE RATINGS ARE TO BE USED ONLY FOR DETERMINING THE PERFORMANCE OF AN OVERHEAD MEMBER								
1. Name (subordinate)			4. Fire Name					
2. Home Unit (address)			5. Location of Fire (complete address or nearest town)					
3. Overhead Team Position			6. Date of Assignment					
			From:		To:			
SFM Overhead Performance Evaluation								
Rating Factors Place an "X" in the box that best describes the performance of the subordinate. * Deficiencies and areas for improvement must be explained in remarks		Excellent	Above Average	Satisfactory	Needs Improvement	Unacceptable	Not Observed	Positive performance / general comments (attach additional sheets as needed)
7. Management Skills (Overall Rating)								
Professional approach to the job								
Decisions under stress								
Initiative								
Consideration for personnel welfare								
Attends all required meetings								
Physical ability for the job								
Safety considerations								
Other (specify)								
8. Leadership Skills (Overall Rating)								* Deficiencies and areas for improvement (attach additional sheets as needed)
Ability to obtain performance								
Coaches and mentors subordinates								
Assumes and maintains leadership role								
Other (specify)								
9. Communication (Overall Rating)								
Attitude								
Effective communication skills (oral & written)								
Other (specify)								
10. Technical Ability (Overall Rating)								
Knowledge of the job								
Obtain necessary equipment and supplies								
Follows SFM procedures								
Other (specify)								
By signing below, the subordinate acknowledges reviewing the contents / comments on this form.								
11. Subordinate Evaluated (signature)			12. Subordinate Evaluated (print name)		13. Date			
14. Evaluated By (signature)			15. Evaluated By (print name)		16. ICS Position	17. Date		