



METROPOLITAN EMERGENCY SERVICES BOARD RADIO TECHNICAL OPERATIONS COMMITTEE AGENDA

September 28, 2022, 1:00 p.m.

This meeting will be conducted in-person at the MESB Office, 2099 University Ave W, St Paul ONLY

1. **Call to Order** – Committee Chair, Jake Thompson
2. **Approval of Agenda** – Thompson
3. **Approval of Minutes of August 24, 2022 Meeting** – Thompson
4. **Action Items**
 - A. COMU Recognitions/Renewals – Tracey Fredrick
 - i. Kari Morrissey COML Recognition
 - ii. Lindsey Stambaugh INTD Recognition
 - B. Appendix C Revision – Fredrick/Jansen/Schatz
 - C. Northfield Hospital Full Participation Plan – Dave Theis
5. **Moves, Additions & Changes to the System**
6. **Committee Reports**
 - A. Metro Mobility System Usage Update – Chad LeVasseur/Clay Stenback
 - B. System Managers Group Update – Ron Jansen
 - C. MnDOT ARMER System Update – John Anderson/Dave Klema
 - D. SECB Committees
 - i. Steering – Jill Rohret/Fredrick
 - ii. LMR – Nate Timm/Nick Schatz
 - iii. WBBA – Rod Olson/Thompson
 - iv. IOC & Workgroups
 - a. IOC – Thompson/Timm
 - b. STR Workgroup – Schatz/Mike Parker
 - c. COMU Workgroup – Timm/Dan Anderson
 - v. IPAWS – Scott Haas
 - vi. Finance/Grants Workgroup – Fredrick
7. **Other Business**
 - A. METAC Permission update – Fredrick
 - B. Cybersecurity Insurance Coverage – Fredrick
 - C. Possible Contract with On Target – Fredrick
 - D. Change Management Submission for METCOM Encryption – Schatz
8. **Adjourn**

Reminder: Next meeting scheduled for October 26, 2022

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Radio Technical Operations Committee

August 24, 2022
Draft Meeting Minutes

Members

Airport – **absent**

Allina – Vikki Vadnais

Anoka County – Cory DeMuth

Carver County – Susan Bowler

Chisago County – Jake Thompson

Dakota County – Ron Jansen

Hennepin County – Mike Parker

Isanti County – **absent**

Metro Transit – Chad LeVasseur

Minneapolis – Rod Olson

Minnesota Fire Chiefs – **absent**

Ramsey County – **absent**

Scott County – Scott Haas

Sherburne County – **absent**

Washington County – Nate Timm

U of M – Jeff Lessard

Guests: John Anderson, *MnDOT*; Marcus Bruning, *ECN*; Cordell Bryan, *MnDOT*; Frank Jarman, *Motorola*; Dan Klawitter, *Hennepin Healthcare*; Andrew LaVenture, *Edina Fire (phone)*; Mike Melby, *North Memorial EMS*; Melinda Miller, *ECN*; [REDACTED], *US Marshals*; Dave Theis, *U of M*; Scott Wosje, *Northland Business Systems*

MESB Staff: Tracey Fredrick, Greg Hayes, Jill Rohret, Martha Ziese

1. Call to Order

Jake Thompson, Chair called the meeting to order at 1:01 p.m.

2. Approval of Agenda

Tracey Fredrick noted Dave Theis would be presenting 4B. for Andrew LaVenture.

Motion (Jansen/Haas) to approve the August 24, 2022 agenda. Approved.

3. Approval of July 27, 2022 Minutes

Ron Jansen said he called Fredrick to alert her to some minor edits to the July minutes. Fredrick noted them and the amended minutes will be put on the website.

Motion (Jansen/Olson) to approve the amended July 27, 2022 minutes. Approved.

4. Action Items

A. COMU Recognitions/Renewals

Fredrick said Michael Ostlund has met all the requirements for COMT/AECS renewal.

Motion (Timm/Haas) to approve COMT/AECS renewal for Michael Ostlund. Approved.

B. Edina Participation Plan Amendment

Dave Theis spoke for Edina regarding the Edina Participation Plan Amendment. Theis said the plan modifications include the addition of two MCC7500E dispatch consoles that will provide continuity of operations should the Edina PSAP need to relocate, as well as provide support for incident telecommunicators when they activate.

Jansen asked if these additional two consoles are part of the 20 connections that the U of M was approved for in July. Theis said these will be part of the 20 count.

Olson asked what the naming convention will be for these devices. Theis said these will follow Edina's naming scheme, which is set by Hennepin County. Will likely be EDI-OP1 and EDI-

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OP2.

Scott Haas asked if it was deployed with a PSAP representative or to a specific discipline. LaVenture said it will primarily be used for Continuity of Operations for the PSAP. It makes sense to have a matching profile unless there is a fire, then a different profile would be used if non-Law Enforcement staff are using the console, since they would not have permissions for the LTACs.

Motion (Timm/DeMuth) to approve with a consistent message clarifying who will be using. Approved.

C. Avera CareFlight Talkgroup Request

Dan Klawitter said there is a request for ARMER radio permission from Avera CareFlight out of Sioux Falls, SD. They fly into the metro occasionally and would like access to the ARMER system. SMRCC would be an appropriate talkgroup for outstate air transports services to utilize. They cannot be requested in for 9-1-1 services but they do have an interoperability plan and have gone through training. He will verify profiles are current.

Nate Timm asked, as an accepted interoperability partner and this being a statewide talkgroup, did they require permission from Metro. Thompson said according to the state standard it states the metro approves.

Jansen asked if anyone was in favor of being responsible for this talkgroup since it is statewide, not regional. There are likely only a couple of representatives on this committee that could actually speak to EMS issues and there may not be a comfort level to approve something that is not completely understood by the group.

Rohret suggested ECN take this item back for review and perhaps amend the state standard to have a different group review and respond to any requests.

Motion (Haas/Bowler) to approve Avera CareFlight talkgroup request. Approved.

D. Metro Transit BDA Request

Chad LeVasseur said there are two tunnels being built in Minnetonka and Minneapolis for the new Light Rail transit line which need radio coverage to the City Center with class A channels.

Jansen asked if there had been discussions with the other users (LE, Fire, etc.) in that area, as the BDA additions could cause some interference. LeVasseur said he has not had those conversations.

Olson said that Metro Transit should also have conversations with the FCC license holder for City Center, since they will be the donor. LeVasseur said those conversations have not happened. This should be tabled until that information can be provided.

Timm asked if the BDA standard stated that all requests need to come before this group or only specific requests. Rohret read the explanation of the Metro Standard 1.8.0. This request should only need review from the LMR Committee, since it will connect only to City Center, and the state owns that license.

*Motion (Jansen/Haas) to table discussion until more information is provided. Approved.
Amended motion (Jansen/Timm) to withdraw Metro consideration, as the item will only need to be reviewed at the state level.*

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E. US Marshals Talkgroup Request

██████████ said this request is to add MRCC East and West to its network, so if in the event there is not an ALS service on standby during the service of high-risk warrants.

Greg Hayes said this request was brought before the EMS TOC Executive Committee and though they are supportive of the US Marshal efforts, there is concern is that the US Marshal agency operates outside of the East and West MRCC and EMS needs.

Klawitter said there is a back-up plan in place today that he would like to discuss with the US Marshals office that could be of benefit, rather than the request for MRCC talkgroups.

Motion (Haas/Jansen) to disapprove the request as it stands but to revisit after discussions on alternatives if the current option does not work. Approved.

Timm said the culture of law enforcement is changing drastically. There are new members that are working in the agencies that are not law enforcement. They are trained, but cannot access the network because they are not law enforcement.

Haas suggested this issue come back to the Radio TOC after discussion with some EMS partners and standard review.

F. 2023 Regional Radio Grant Priorities

After discussion it was agreed the list would remain the same as 2022, but with moving CRTF to the top and the Public Safety Communications Conference to the bottom of the list.

Motion made (Timm/Jansen) to approve the 2023 Regional Radio Grant Priorities. Approved.

G. Representation to State/SECB Change Management Workgroup

Motion (Haas/DeMuth) to nominate and elect Peter Sauter and Dave Theis to the State SECB Change Management Workgroup. Approved.

5. Moves, Additions & Changes to the System

Timm said the St. Paul Park water tower is finished.

6. Committee Reports

A. Metro Mobility System Usage Update – no change

B. System Owners Group Update

John Anderson said Motorola presented their five-year SUA plan. The end-of-life of equipment was discussed; there will be a financial impact. Also discussed was ethernet backhaul; Zone six has been completed, Zone five is next.

Timm said that it might be necessary to look at the SUAll+ solution to offset some of the equipment that is going end-of-life.

Rohret asked if Motorola might be putting together a discounted package like was done in 2015.

Frank Jarman said that discussion will be had.

C. MnDOT ARMER System Update

Anderson said the St. Paul Park project is complete, so the South loop is back to being intact. Anderson talked with the engineer about the Hollywood microwave change, which will likely happen in late September. 86 switches have been provisioned for Metro ethernet back haul.

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D. SECB Committees

i. Steering – no meeting

ii. LMR

Timm said he was not able to attend as he was participating in the COMMEX at Camp Ripley. Nick Schatz did attend but was not available for a report. Timm reported on the agenda and that there was a discussion about the encryption proposal.

Mike Parker said the concern was around the sole key concept. Olson added that having multiple keys is a difficulty for the State Patrol.

iii. WBBA – no meeting

iv. IOC & Workgroups

a. IOC – no meeting

b. STR Workgroup – no meeting

c. COMU Workgroup – no meeting; exercise in Camp Ripley was held at same time

V. IPAWS – no update

vi. Finance/Grants Workgroup

Fredrick said the Finance Committee reviewed the current SECB grant expenditures, discussed topics for the upcoming Grants workshop in October, and reviewed actionable items from the Committee retreat.

7. Other Business

A. METAC Permission update

Fredrick said there was one request from CentraCare from St. Cloud requested access to unencrypted channels 1-10.

Olson asked if there was any concern for having them on consoles. Theis said CentraCare would like to have these available as it frequently transports into the Metro area, and the consoles will be in Zone 1. Rohret also said CentraCare covers Sherburne County, which is part of the Metro region, so it would make sense that it would have this access.

B. Console Profile Change Management

Jansen said there has been discussion about the repeater disable on a system-wide level. This sometimes gets bumped, so it would be nice to have this on a Metro region profile. Theis added the consoles would have to be restarted for that to work on a profile.

8. Adjournment 2:32 PM

COMU Position Recognition Application

Application Type:

- Initial Application Renewal Change of Status

Position (check only one unless changing status):

- COML COMT INCM
 INTD RADO AECS

Name (Last, First Middle) Morrissey, Kari Lynn

Certifying Agency Anoka County Emergency Communications Center

County Anoka ECB/ESB Region Metro

Agency Address 2100 3rd Avenue, Anoka MN 55303

24/7 Telephone 763-427-1212 Business Telephone 763-324-

Email Address Kari.Morrissey@co.anoka.mn.us

Signature Kari Morrissey Date 8-23-2022

Agency Certification (this section must be completed even if PTB Agency Certification form was completed)

The above named individual seeking state recognition for the above identified COMU position(s) is recognized by the above named agency in that COMU position. The person serves the agency as a paid employee or as a volunteer but, in either case, is recognized as an employee for the purposes of Workers Compensation, liability, and all other liability-related protections afforded employees of the agency, when activated for duty.

When the above named person serves in the COMU position(s), whether within the agency's jurisdiction, or outside, the person serves as an employee/representative of the agency.

Name & Title Valerie Sprynczynatyk, Director

Agency Anoka County Emergency Communications Center

Signature [Signature] Date 8/23/22

Regional Recognition

The ECB/ESB region has reviewed the request for state recognition and supports state recognition of this person.

Name & Title _____ Region _____

Signature _____ Date _____

COMU Subcommittee & SWIC Recognition

The COMU Subcommittee and the SWIC have reviewed the request for state recognition and supports state recognition of this person.

SWIC Signature _____ Date _____



FEMA

NATIONAL QUALIFICATION SYSTEM (NQS)

POSITION TASK BOOK
FOR THE POSITION OF

COMMUNICATIONS UNIT LEADER (COML)

Version: September 2017

Check the appropriate position type:

Single Type Type 1 Type 2 Type 3

POSITION TASK BOOK ASSIGNED TO:	
TRAINEE'S NAME:	Kari Morrissey
DUTY STATION:	Anoka County Emergency Communications
PHONE NUMBER:	612-271-9441 Center
E-MAIL:	Kari.Morrissey@co.anoka.mn.us
POSITION TASK BOOK INITIATED BY:	
OFFICIAL'S NAME:	NATE TMM
TITLE:	COML/COMT
DUTY STATION:	WASHWATER CO SD
PHONE NUMBER:	651-430-7863
E-MAIL:	NATE.TMM@CO-WASHWATER.MN.US
POSITION TASK BOOK WAS INITIATED:	
LOCATION:	CAMP RIPLEY COMPLEX
DATE:	8/15/22

Position Task Book Overview

The Position Task Book (PTB) documents the performance criteria a trainee must meet to be certified for a position within the National Qualification System (NQS). The performance criteria are associated with core NQS competencies, behaviors, and tasks.

A trainee may not work on multiple position type PTBs for a specific position at the same time; for example, a trainee may not simultaneously work on a Type 1 Incident Commander PTB and a Type 2 Incident Commander PTB. If a position has multiple types, the trainee must, in most cases, qualify at the lowest type before pursuing the next higher type. For example, before seeking qualification for a Type 1 position, an individual must first qualify at the Type 3 level and then at the Type 2 level.

Evaluation Process

- Evaluators observe and review a trainee's completion of PTB tasks, initialing and dating each successfully completed task in the PTB.
- Evaluators complete an Evaluation Record Form after each evaluation period by documenting the trainee's performance.
- The Authority Having Jurisdiction (AHJ) may not have enough resources to ensure that every evaluator is qualified in the position being assessed. Therefore, a trainee's supervisor may evaluate the completion of PTB tasks. For example, a Logistics Section Chief has the authority to sign off on completed PTB tasks for a Food Unit Leader trainee.
- The final evaluator is a leader who verifies that a trainee has completed the PTB and met all requirements for the position. A final evaluator is generally qualified in the same position for which the trainee is applying. When possible, the evaluator and the final evaluator should not be the same person, but in situations with limited resources, the evaluator can also serve as the final evaluator.
- Once the final evaluator has completed the Final Evaluator Verification, he/she forwards it to the Quality Review Board (QRB) along with supporting evidence that the trainee has completed all position requirements.
- After the QRB review, the AHJ completes the Documentation of Agency Certification form as appropriate.

Transferring Qualifications

- Personnel who have documentation of previous education, training, or significant on-the-job incident experience may receive credit toward qualification for a given position. Each AHJ establishes the requirements for transferring qualifications from another AHJ.
- If an AHJ chooses not to accept a trainee's existing certification of qualification, the trainee may be reevaluated in the specific position and issued a new PTB.
- An individual may hold multiple certifications of qualification (that is, the Final Evaluator Verification form and the Documentation of Agency Certification form) along with the completed PTB.

Position Task Book Competencies, Behaviors, and Tasks

The PTB sets minimum criteria for certification for a position. The AHJ has the authority to add content to the baseline PTB competencies, behaviors, and tasks as necessary.

The PTB covers all type levels for a given position, but a trainee may check only one “Type” box and work on only one type at a time. (The National Incident Management System (NIMS) Job Title/Position Qualifications document describes all types.)

Command and General Staff job titles/positions qualifications are typed based on incident complexity, while all other NIMS positions are typed based on the minimum qualifications.

Definitions

Competency: An observable, measurable pattern of knowledge, skills, abilities, and other characteristics an individual needs to perform an activity and its associated tasks. A competency specifies the skillset a person needs to possess to complete the tasks successfully.

Behavior: An observable work activity or a group of similar tasks necessary to perform the activity.

Task: A specific, demonstrable action necessary for successful performance in a position. Trainees must demonstrate completion of required tasks.

- Occasionally, PTB tasks are unique to one of the types; for example, certain tasks apply only to a Type 3 Incident Commander, not to a Type 2 or Type 1 Incident Commander. In those cases, the PTB indicates the corresponding type at the beginning of the task.
- All tasks require evaluation; however, bullet statements within a task are examples.

PTB Task Codes

Each task in the PTB model has at least one corresponding code conveying the circumstances in which the trainee can perform the task for evaluation. Evaluators may assess trainees during incidents, in classroom simulations and training sessions, in functional and full-scale exercises, and in other work situations. If a task has multiple codes, the evaluator may evaluate in ANY of those circumstances; the trainee does not need evaluation in all of the listed circumstances.

Code C: Task performed in training or classroom setting, including seminars and workshops.

Code E: Task performed during a full-scale exercise with equipment deployed under the Incident Command System (ICS).

Code F: Task performed during a functional exercise managed under the ICS.

Code I: Task performed during an incident or event managed under the ICS. Examples include oil spill, search and rescue operation, hazardous materials (hazmat) response, fire, and emergency or non-emergency (planned or unplanned) events.

Code J: Task performed as part of day-to-day job duties.

Code T: Task performed during a tabletop exercise.

Code R: Task performed very rarely and required only if applicable to the event.

How to Complete the Evaluation Record Form

Each Evaluation Record Form (see next page) covers one evaluation period. Evaluation periods may involve incidents, classroom simulations, or daily duties, depending on what the PTB recommends. The AHJ determines the number of evaluations required for position qualification and certification. If evaluators need additional evaluation periods, they can copy pages from a blank PTB and attach them to the PTB in question.

Complete these items AT THE START of the evaluation period:

Evaluation Record Number: Label each evaluation record with a number to identify the incident(s), exercise(s), or event(s) during which the trainee completed the PTB tasks. The evaluator should also write this number in the PTB column labeled "Evaluation Record #" for each task performed satisfactorily. This number enables reviewers of the completed PTB to ascertain the evaluators' qualifications before signing off on the PTB.

Evaluator's name; Incident/office title and agency: List the name of the evaluator, his/her incident position or office title, and the evaluator's home agency.

Evaluator's home unit address and phone: List evaluator's home unit address and phone number.

Name and location of incident or simulation/exercise: Identify the name (if applicable) and location where the trainee performed the tasks.

Incident kind: Enter the kind of incident (such as hazmat, law enforcement, wildland fire, structural fire, search and rescue, flood, or tornado).

Complete these items AT THE END of the evaluation period:

Number and kind of resources: Enter the number of resources assigned to the incident, and their kind (such as team, personnel, and equipment) pertinent to the trainee's PTB.

Evaluation period: Enter inclusive dates of trainee evaluation. This time span may cover several small, similar incidents.

Position type: Enter position type (such as Type 3, Type 2, Type 1, or Single Type).

Recommendation: Check the appropriate line and make comments below regarding the trainee's future development needs.

Additional recommendations/comments: Provide additional recommendations and comments about trainee, as necessary.


Date: List the current date.

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

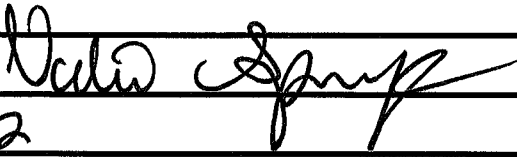
Evaluator's relevant qualification: List your certification relevant to the trainee position you supervised.

Evaluator Verification

(Do not complete this form unless you are recommending the trainee for all-hazards certification.)

FINAL EVALUATOR VERIFICATION	
I verify that <u>Kari Morrissey</u>	
has successfully completed all tasks as a trainee and should therefore be considered for certification in this position. I also verify that all tasks are documented with appropriate initials.	
FINAL EVALUATOR'S SIGNATURE:	
DATE:	8/17/2022
FINAL EVALUATOR'S PRINTED NAME:	Brandon Larson
TITLE:	COML/COMT
DUTY STATION:	City of Saint Cloud
PHONE NUMBER:	320-650-3304
E-MAIL:	Brandon.larson@ci.stcloud.mn.us

Documentation of Agency Certification

DOCUMENTATION OF AGENCY CERTIFICATION	
I certify that <u>Kari Morrissey</u>	
has successfully met all of the criteria set out in the National Incident Management System (NIMS) Job Title/Position Qualifications document for the position and will hereby receive certification of his/her qualification.	
OFFICIAL'S SIGNATURE:	
DATE:	8/19/22
OFFICIAL'S NAME:	Valerie Sprynczynatyk
TITLE:	Director of Emergency Communications
DUTY STATION:	Anoka County Emergency Communications
PHONE NUMBER:	763-324-4773
E-MAIL:	Valerie.Sprynczynatyk@co.Anoka.mn.us

Evaluation Record Form

TRAINEE NAME: <i>Kari Morrissey</i>
TRAINEE POSITION: <i>COM L (t)</i>
Evaluation Record Number: <i>8/16/2022</i>
Evaluator's name: <i>Brandon Larson</i>
Incident/office title and agency: <i>Radio Tech / City of Saint Cloud</i>
Evaluator's home unit address and phone: <i>1201 7th St. S. Saint Cloud, MN 56301</i>
Name and location of incident or simulation/exercise: <i>Operation Dark Days / Camp Ripley</i>
Incident kind: <i>Full scale exercise</i>
Number and kind of resources: <i>1 INTD, 1 COMT, 1 ITSL, 2 Aux comm</i>
Evaluation period: <i>8/15 - 8/16/2022 0800 - 1600</i>
Position type: <i>COM L</i>
Recommendation: The above named trainee performed the initialed and dated tasks under my supervision. I recommend the following for this trainee's further development: <input checked="" type="checkbox"/> The trainee has successfully performed all required tasks for the position. The AHJ should consider the individual for certification. <input type="checkbox"/> The trainee could not complete certain tasks or needs additional guidance. See comments below. <input checked="" type="checkbox"/> Not all tasks were evaluated on this assignment. An additional assignment is needed to complete the evaluation. <input type="checkbox"/> The trainee is severely deficient in the performance of tasks and needs further training prior to additional assignment(s) as a trainee for this position.
Additional recommendations/comments: <i>Second round of tasks to be signed off. Took experience from first day to improve on day two, great job!</i>
Date: <i>8/16/2022</i>
Evaluator's initials: <i>[Signature]</i>
Evaluator's relevant qualification: <i>COM L / COMT</i>

towers
 References
 Sub. phone
 Data
 R.M. Radio

Evaluation Record Form

2

TRAINEE NAME:	ARAR MORRISSEY
TRAINEE POSITION:	COML
Evaluation Record Number:	2
Evaluator's name:	NATE TMM
Incident/office title and agency:	CAMP RIPLEY COMEX (ELN)
Evaluator's home unit address and phone:	WASHINGTON CO S/O 15015 62ND ST N STAMMATER 651-430-7863
Name and location of incident or simulation/exercise:	CAMP RIPLEY COMEX
Incident kind:	TRAINING
Number and kind of resources:	CIVILIAN, MILITARY. STR TRAILER (x2) 30-40 PR.
Evaluation period:	8/15/22 - 8/17/22
Position type:	COML-T
Recommendation:	<p>The above named trainee performed the initialed and dated tasks under my supervision. I recommend the following for this trainee's further development:</p> <p><input type="checkbox"/> The trainee has successfully performed all required tasks for the position. The AHJ should consider the individual for certification.</p> <p><input type="checkbox"/> The trainee could not complete certain tasks or needs additional guidance. See comments below.</p> <p><input type="checkbox"/> Not all tasks were evaluated on this assignment. An additional assignment is needed to complete the evaluation.</p> <p><input type="checkbox"/> The trainee is severely deficient in the performance of tasks and needs further training prior to additional assignment(s) as a trainee for this position.</p>
Additional recommendations/comments:	
Date:	
Evaluator's initials:	
Evaluator's relevant qualification:	

Evaluation Record Form

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TRAINEE NAME:	Kari Morrissey
TRAINEE POSITION:	Communications Coordinator
Evaluation Record Number:	1
Evaluator's name:	Robert Adney
Incident/office title and agency:	Training Supervisor - Ramsey Co ECC
Evaluator's home unit address and phone:	4840 Peggy Ln, 55110, 651-398-4433
Name and location of incident or simulation/exercise:	3M Golf Championships - Blaine, MN
Incident kind:	Police / Fire / EMS Incident Management
Number and kind of resources:	35 personnel - Police, Fire, EMS, Air
Evaluation period:	7-1 - 7-8 2019
Position type:	Communications Leader
Recommendation:	
<p>The above named trainee performed the initialed and dated tasks under my supervision. I recommend the following for this trainee's further development:</p> <p><input type="checkbox"/> The trainee has successfully performed all required tasks for the position. The AHJ should consider the individual for certification.</p> <p><input type="checkbox"/> The trainee could not complete certain tasks or needs additional guidance. See comments below.</p> <p><input type="checkbox"/> Not all tasks were evaluated on this assignment. An additional assignment is needed to complete the evaluation.</p> <p><input type="checkbox"/> The trainee is severely deficient in the performance of tasks and needs further training prior to additional assignment(s) as a trainee for this position.</p>	
Additional recommendations/comments:	
Date:	12-8-21
Evaluator's initials:	RAA
Evaluator's relevant qualification:	COM-L

Communications Unit Leader (COML)

1. Competency: Assume position responsibilities

Description: Successfully assume the role of COML and initiate position activities at the appropriate time according to the following behaviors.

1a. Behavior: Ensure readiness for assignment

TASK	CODE	EVALUATION RECORD #	EVALUATOR INITIALS AND DATE
<p>1. Obtain, assemble, and prepare information and materials for go-kit prior to receiving an assignment. The kit should contain critical items for the assignment and be easily transportable:</p> <ul style="list-style-type: none"> • Reference materials: <ul style="list-style-type: none"> ○ In electronic, digital, or hard-copy format ○ Functional guidelines relative to incident type (agency guidance or other functional guidelines) ○ Authority Having Jurisdiction (AHJ) operations guides, Emergency Response Field Operations Guide (ER-FOG), or other operational guides ○ Position manuals ○ Current Tactical Interoperable Communications Plan (TICP) and Statewide Communications Interoperability Plan (SCIP), if available ○ Inventories or other lists of local and regional communications response equipment ○ Preplanned local system coverage maps ○ Contact, capability, and availability information for local and regional Communications Technicians (COMT) and Communications Specialists • National Interoperability Field Operations Guide (NIFOG) forms: <ul style="list-style-type: none"> ○ Agency-specific forms appropriate to the function ○ Incident Radio Communications Plan (blank or pre-filled) • Supplies: <ul style="list-style-type: none"> ○ Office supplies appropriate to the function ○ AHJ identification badge and qualification card ○ Radio programming equipment (cloning cable or computer), adapters, and suitable tools ○ GPS ○ First aid kit • Personal Protective Equipment (PPE) and security measures 	C, E, F, I, J, T	1	RDA 12-8-21
	E	2	NT 8-15-22 All good!

1b. Behavior: Gather, update, and apply situational information relevant to the assignment

TASK	CODE	EVALUATION RECORD #	EVALUATOR INITIALS AND DATE
<p>2. Review or develop a draft Incident Radio Communications Plan. Examples of important information include:</p> <ul style="list-style-type: none"> • Frequencies and talk groups already assigned • Other mutual aid channels or equipment already in use • Gateway or other interoperability devices already in use • Other current incidents or events that may overwhelm resources or create conflicts with existing communications plans 	<p>E, F, I</p> <p>±</p> <p>E</p>	<p>1</p> <p>2</p>	<p>12-8-21</p> <p>ROA</p> <p>8/16/2022</p> <p>BJ</p>

1c. Behavior: Establish effective relationships with relevant personnel

TASK	CODE	EVALUATION RECORD #	EVALUATOR INITIALS AND DATE
<p>3. Contact local Communications Coordinator or Communications Duty Officer at the National Interagency Fire Center (NIFC) if necessary to determine frequencies and equipment available for the incident. Note: NIFC involvement is incident dependent.</p>	<p>E, F, I</p> <p>±</p> <p>E</p>	<p>1</p> <p>2</p>	<p>12-8-21</p> <p>ROA</p> <p>8/16/2022</p> <p>BJ</p>

2. Competency: Lead assigned personnel

Description: Influence, lead, and direct assigned personnel to accomplish objectives and desired outcomes in a potentially rapidly changing environment.

2a. Behavior: Identify opportunities and meet requirements to provide equal access and reasonable accommodation in all activities

TASK	CODE	EVALUATION RECORD #	EVALUATOR INITIALS AND DATE
4. Demonstrate the ability to identify opportunities for universal accessibility for persons with disabilities.	E, F, I, J E ±	1 2	12-8-21 RDA 8/16/2022
5. Demonstrate the ability to assess and monitor for physical access, programmatic access, and effective communications access for persons with disabilities.	E, F, I, J E ±	1 2	12-8-21 RDA 8/16/2022
6. Refer equal access, disability accommodations requirements, and access and functional needs (AFN) accommodations to appropriate personnel for resolution.	E, F, I, J JW E	1 2	12-8-21 RDA 8/16/2022

2b. Behavior: Coordinate interdependent activities

TASK	CODE	EVALUATION RECORD #	EVALUATOR INITIALS AND DATE
7. Coordinate with other appropriate personnel: <ul style="list-style-type: none"> • Receive and transmit current and accurate information • Communicate changes to the Incident Action Plan (IAP) or relevant plans • Inform appropriate team members of significant changes in operations • Ensure supervisor is aware of all changes in status of resources assigned to the operation and keep status current • Provide supervisor with operational status for incident status summary and situation reports • Coordinate with operations regarding system coverage and needs • Coordinate with first responders and public safety to support organizations as necessary (such as Medical Unit for medical evacuation plan) • Coordinate with special units such as Air Operations, Explosive Ordnance Disposal (EOD), and SWAT for special frequency needs 	E, F, I I E	1 2	12-8-21 RDA 8/16/2022

TASK	CODE	EVALUATION RECORD #	EVALUATOR INITIALS AND DATE
<p>8. Coordinate frequencies, activities, and resources with communications resource coordinators outside of the incident:</p> <ul style="list-style-type: none"> • Contact Communications Coordinators and notify them of incident frequency, talk group, mutual aid channel, dispatch center, or other shared resource assignments, as appropriate • Identify communications equipment and personnel that exceed incident needs and demobilize if appropriate • Identify resources by type/qualifications, quantity, and location • Provide a copy of the of the Incident Radio Communications Plan to other agencies or to the COML at any nearby incidents, as necessary, to avoid interference or other conflicts 	<p>E, F, I I E</p>	<p>1 2</p>	<p>KDA 12.8.21 8/16/2022 KJ</p>
<p>9. Notify appropriate local, county, regional, state, and Federal agencies for adjacent incident(s) of system design and frequency allocations.</p>	<p>E, F, I I E</p>	<p>1 1 2</p>	<p>12.8.21 KDA</p>

8/16/2022 BJ

3. Competency: Communicate effectively

Description: Use suitable communication techniques to share relevant information with appropriate personnel on a timely basis to accomplish objectives in a potentially rapidly changing environment.

3a. Behavior: Ensure documentation is complete and disposition is appropriate

TASK	CODE	EVALUATION RECORD #	EVALUATOR INITIALS AND DATE
<p>10. Ensure incident documentation and administrative requirements are complete, according to the supervisor's direction:</p> <ul style="list-style-type: none"> • Submit incident narrative to supervisor • Complete and submit activity log to Documentation Unit or appropriate personnel for each operational period • Ensure all personnel and equipment time records are complete and submitted at the end of each operational period 	E, F, I I E	1 2	12-8-21 ROA 8/16/2022 BJ
<p>11. Initiate and maintain accurate records of all communications equipment:</p> <ul style="list-style-type: none"> • Initiate and maintain accountability system for issuing handheld radio resources • Document geographic locations of equipment and transfer this information to local maps (latitude/longitude, legal) • Keep records for local and national resources to ensure return to proper locations 	E, F, I I E	1 2	12-8-21 MAB 8/16/2022 RJ

3b. Behavior: Develop and implement plans

TASK	CODE	EVALUATION RECORD #	EVALUATOR INITIALS AND DATE
<p>12. Design communications systems to meet incident operational needs:</p> <ul style="list-style-type: none"> • Determine additional resource needs and order necessary equipment and personnel • Prepare Incident Radio Communications Plan • Request any additional communications vendor services (such as telephone, satellite communications, and microwave technology) and identify costs associated with equipment • Coordinate, through the chain of command, the installation locations for equipment (such as repeaters, satellite telephones, and telephone lines) • Provide communications support for external and internal data operations • Order frequencies following the proper procedures • Create diagrams of current communications systems • Determine optimal locations for any future expansion of communications equipment, using topographical maps to evaluate elevation and separation needs 	E, F, I I E	1 2	12-8-21 MAB 8/16/2022 RJ

TASK	CODE	EVALUATION RECORD #	EVALUATOR INITIALS AND DATE
13. Design telephone/data networks to meet incident needs: <ul style="list-style-type: none"> Determine locations for telephone/data networks to be installed 	E, F, I I	1	12-8-21 ROA
14. Request additional telephone communications services: <ul style="list-style-type: none"> Identify cost and options associated with equipment/services Determine whether service can be provided in a timely manner 	E, F, I I E	1 2	12-8-21 ROA 8/16/2022 BF
15. Request additional cellular communications services, including portable cellular towers such as cellular on wheels (COW) and cellular on light truck (COLT): <ul style="list-style-type: none"> Identify options associated with equipment/services Determine whether services can be provided in a timely manner 	E, F, I I E	1 2	12-8-21 ROA 8/16/2022 BF
16. Request additional data/internet communications services: <ul style="list-style-type: none"> Identify options associated with equipment/services Determine whether services can be provided in a timely manner 	E, F, I I E	1 2	12-8-21 ROA 8/16/2022 BF
17. Provide basic training as needed for equipment being deployed	E, F, I I	1	12-8-21 ROA

4. Competency: Ensure completion of assigned actions to meet identified objectives

Description: Identify, analyze, and apply relevant situational information and evaluate actions to complete assignments safely and meet identified objectives. Complete actions within established time frame.

4a. Behavior: Execute assigned tasks, assess progress, and make necessary adjustments

TASK	CODE	EVALUATION RECORD #	EVALUATOR INITIALS AND DATE
18. Determine communications equipment requirements and place the initial order. Based on information obtained from IAP, section briefings, and agency briefings, immediately order (using proper procedures) supplies, materials, and equipment necessary to support projected incident size.	E, F, I I E	1 2	12-8-21 MIA 8/16/2022 Kc
19. Install communications equipment: <ul style="list-style-type: none"> • Obtain equipment from Supply Unit, if one exists, or from authorized sources • Arrange the installation of communications equipment and test all components to ensure systems are operational. For example: <ul style="list-style-type: none"> ○ Command repeater ○ Logistics repeater ○ Links (radio and wire-based) ○ Remotes ○ Gateways ○ Aircraft and other special needs • Develop installation priorities (for example, operations before logistics) while adhering to safety standards for communications needs of tactical personnel • Clone or program radios, as necessary and authorized 	E, F, I I E	1 2	12-8-21 KAA 8/16/2022 Kc

TASK	CODE	EVALUATION RECORD #	EVALUATOR INITIALS AND DATE
<p>20. Assign communications equipment:</p> <ul style="list-style-type: none"> Identify kind and number of communications equipment to be distributed to specific units according to the communications plan Provide resources and unit leaders with appropriate equipment based on the communications plan Provide basic training as needed on equipment being fielded Maintain equipment inventory to provide accountability 	E, F, I I E	1 2	12-8-21 RDA 8/16/2022 BJ
<p>21. Establish Incident Communications Center (ICC):</p> <ul style="list-style-type: none"> Coordinate location of ICC with Facilities Unit Leader Locate ICC close to the Incident Command Post and away from high-traffic areas and noise Locate ICC away from radio frequency and electronic noise Verify estimated time of arrival (ETA) of communications personnel, establish assignments based on incident requirements, and plan schedules around operations requirements Obtain necessary supplies for ICC to function properly 	E, F, I, R I E	1 2	12-8-21 RDA 8/16/2022 BJ
<p>22. Manage operations of the ICC:</p> <ul style="list-style-type: none"> Document radio/telephone activities on appropriate forms Set up filing system for ICC documentation Direct radio/telephone traffic to proper destinations Establish notification procedures for emergency messages Identify system problems, both technical and operational, and determine appropriate solutions Follow established routing procedures for messages 	E, F, I, R I	1	12-8-21 RDA
<p>23. Perform operational tests of communications systems throughout the duration of the incident:</p> <ul style="list-style-type: none"> Identify and take necessary action to accomplish minor field repair or place orders for replacement of equipment Monitor all gateways in use Plan for battery replacement Act decisively to minimize interruptions in system operation 	E, F, I I	1	12-8-21 RDA

Emergency Management Institute



FEMA

This Certificate of Achievement is to acknowledge that

KARI MORRISSEY

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00100.c

Introduction to Incident Command System, ICS-100

A handwritten signature in black ink, appearing to read "J. Stern", written over a horizontal line.

Issued this 13th Day of January, 2021



Jeffrey D. Stern, Ph.D.

Superintendent

Emergency Management Institute

Federal Emergency Management Agency

Emergency Management Institute



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IS-00200.c

Basic Incident Command System for Initial Response

A handwritten signature in black ink, appearing to read "J. Stern", written over a horizontal line.

Issued this 20th Day of January, 2021



Jeffrey D. Stern, Ph.D.
Superintendent
Emergency Management Institute
Federal Emergency Management Agency



TEXAS A&M ENGINEERING EXTENSION SERVICE

National Emergency Response and Recovery Training Center

in cooperation with the

Department of Homeland Security

Federal Emergency Management Agency



FEMA

Kari Morrissey

has successfully completed

Intermediate ICS-300 for Expanding Incidents

College Station, Texas, United States

21 Hours

May 10 - 13, 2021


David Coatney, Director
Texas A&M Engineering Extension Service


H. Lawson, Jr., Director
National Emergency Response and Recovery Training Center
Texas A&M Engineering Extension Service

Emergency Management Institute



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IS-00800.d

National Response Framework, An Introduction

A handwritten signature in black ink, appearing to read "J. Stern", written over a horizontal line.

Issued this 17th Day of May, 2021



Jeffrey D. Stern, Ph.D.
Superintendent
Emergency Management Institute
Federal Emergency Management Agency

Emergency Management Institute



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KARI MORRISSEY

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00700.b

**An Introduction to the National Incident
Management System**

Issued this 4th Day of May, 2021



A handwritten signature in black ink, appearing to read "Jeffrey D. Stern".

Jeffrey D. Stern, Ph.D.
Superintendent
Emergency Management Institute
Federal Emergency Management Agency

Emergency Management Institute



FEMA

This is to certify that

Kari L Morrissey

successfully completed

NIMS ICS All-Hazards Communications Unit Leader (Closed Course)

August 30 - September 3, 2021



A handwritten signature in black ink, appearing to be "J. D. ...", written over a horizontal line.

Superintendent
Emergency Management Institute

COMU Position Recognition Application

Application Type:

- Initial Application Renewal Change of Status

Position:

- COML COMT INCM
 INTD RADO AECS

Name (Last, First Middle) Stambaugh, Lindsay Ann

Certifying Agency MSP Airport ECC

County Hennepin ECB/ESB Region Metro

Agency Address 6920 34th Ave S

24/7 Telephone 612-726-5577 Business Telephone 612-726-5577

Email Address lindsay.stambaugh@mspmacc.org

Signature Lindsay Stambaugh Date 8/23/22

Agency Certification (this section must be completed even if PTB Agency Certification form was completed)

The above named individual seeking state recognition for the above identified COMU position(s) is recognized by the above named agency in that COMU position. The person serves the agency as a paid employee or as a volunteer but, in either case, is recognized as an employee for the purposes of Workers Compensation, liability, and all other liability-related protections afforded employees of the agency, when activated for duty.

When the above named person serves in the COMU position(s), whether within the agency's jurisdiction, or outside, the person serves as an employee/representative of the agency providing the Agency Certification.

Name & Title Sara Boucher-Jackson, ECC Manager

Agency MSP Airport ECC

Signature Sara Boucher Date 8/22/2022

Regional Recognition

The ECB/ESB region has reviewed the request for state recognition and supports state recognition of this person.

Name & Title _____ Region _____

Signature _____ Date _____

SECB Interoperability Committee & Statewide Interoperability Coordinator (SWIC) Recognition

The SECB Interoperability Committee and the SWIC have reviewed and approved this request for state recognition.

SWIC Signature _____ Date _____



Homeland Security

All-Hazards INCIDENT TACTICAL DISPATCHER (INTD) Position Task Book

Task Book Assigned To:

Trainee's Name: Lindsay Stambaugh

Trainee's Email Address: Lindsay.Stambaugh@msspmaac.org

Home Agency: Metropolitan Airports Commission

Home Agency Phone Number 612-726-5577

Task Book Initiated By:

Official's Name: Brandon Larson

Agency Official's Title: Radio Technician Com L, Com T

Agency: City of St. Cloud

Agency Phone Number: 320-650-3304

Agency Address: 1201 7th Street S.

Saint Cloud, MN 56301

Date Initiated: 8/15/2022

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

Version 1.1
June, 2017

VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK FOR THE POSITION OF INCIDENT TACTICAL DISPATCHER

FINAL EVALUATOR'S VERIFICATION

I verify that all tasks have been performed and are documented with appropriate initials. I also verify that Lindsay Stambaugh has performed as a trainee and should therefore be considered for recognition in this position.

Final Evaluator's Signature [Signature] Date 8/17/2022

Printed Name Brandon Larson

Title ComL/ComT

Agency City of Saint Cloud

Phone Number 320-650-3304 Email Brandon.Larson@ci.stcloud.mn.us

AGENCY CERTIFICATION

I certify that Lindsay Stambaugh has met all requirements for qualification in this position and that such qualification has been issued.

Certifying Official's Signature [Signature] Date 09/22/2022

Printed Name Sara Boucher-Jackson

Title Manager, Emergency Communications

Agency MSP Airport ECC

Phone Number 62-467-0967 Email sara.boucher-jackson@mspmacc.org

NATIONAL INCIDENT MANAGEMENT SYSTEM POSITION TASK BOOK

Position Task Books (PTB) are developed for designated Incident Command System (ICS) positions¹ as described under the National Integration Center (NIC) and have been incorporated into the National Incident Management System (NIMS). The PTB is used by the authority having jurisdiction, to certify that the person to whom the task book belongs meets the standards recommended by the NIC.

Each PTB lists the performance requirements (tasks) for the specific position in a format that allows a trainee to be evaluated against written guidelines. Successful performance of all tasks, as observed and recorded by an evaluator, will result in a recommendation that the trainee be recognized in that position.

Evaluation and confirmation of the individual's performance of all the tasks may involve more than one evaluator and varied activities such as Incidents, Planned Events, Functional Exercises (FE), Full Scale Exercises (FSE), Drills, Simulation, Classroom, or Daily Job functions (as specified in the task tables). It is important that performance be critically evaluated and accurately recorded by each evaluator. All tasks must be evaluated, and bullet statements within a task that require an action must be demonstrated before that task can be signed off.

A brief list of responsibilities also appears below.

RESPONSIBILITIES:

1. The **Trainee** is responsible for:

- Fulfilling the pre-requisite requirements:²
 - Public safety background with three years of experience in dispatch
 - Awareness of fundamental public safety communications technology
 - Awareness of the ICS Communications Unit function
 - Completion of IS-100.b, IS-144, IS-200.b, IS-700.a, and IS-800.b
- Reviewing and understanding instructions in the PTB.
- Identifying desired objectives/goals.
- Providing background information to an evaluator.
- Requesting Agency Head to initiate the PTB; putting name on cover and second page, initials on subsequent pages.
- Satisfactorily demonstrating completion of all tasks for an assigned position within three years of the Date Initiated.
- Assuring the evaluation record is complete.
- Notifying their agency head when the PTB is completed, and obtaining their signature recommending certification.
- Keeping the original PTB in personal records.
- Providing copies of their completed PTB to the designated authorities within their



¹ The Incident Tactical Dispatch (INTD) position is not currently a NIMS-approved Incident Command System (ICS) title.

² ICS-300, Intermediate ICS for Expanding Incidents, is also recommended.

home agency, jurisdiction, region, or state in accordance with applicable SOPs for recognition of Communications Unit (COMU) positions.

2. The **Evaluator** is responsible for:
 - Being qualified and proficient in the position being evaluated, or higher ICS position (e.g. IC, COML, INTD, etc.).
 - Meeting with the trainee and determining past experience, current qualifications, and desired objectives/goals.
 - Reviewing tasks with the trainee.
 - Explaining to the trainee the evaluation procedures that will be utilized and which objectives may be attained.
 - Identifying tasks to be performed during the evaluation period.
 - Accurately evaluating and recording demonstrated performance of tasks. Dating and initialing completion of the task shall document satisfactory performance. Unsatisfactory performance shall be documented in the Evaluation Record.
 - Completing an Evaluation Record found at the end of each PTB.
3. The **Final Evaluator** is responsible for signing the verification statement inside the front cover of the PTB when all tasks have been initialed.
4. The **Agency Head** or designee is responsible for:
 - Selecting trainees based on the needs of their organization or area Incident Management Teams.
 - Providing opportunities for evaluation and/or making the trainee available for evaluation.
 - Initiating the PTB to document task performance.
 - Explaining to the trainee the purpose and processes of the PTB, as well as the trainee's responsibilities.
 - Tracking progress of the trainee.
 - Identifying incident evaluation opportunities.
 - Identifying and assigning an evaluator that can provide a positive experience for the trainee, and make an accurate and honest appraisal of the trainee's performance.
 - Documenting the assignment.
 - Conducting progress reviews.
 - Conducting a closeout interview with the trainee and evaluator and assuring that documentation is proper and complete.
 - Providing trainees the opportunity to attend the applicable training course(s).

Competency: INTD Preparedness

Task	Code	Evaluator # and Initials	Date
Behavior: Ensure readiness prior to assignment			
1. Assemble and maintain an INTD response kit prior to receiving an assignment, including critical operating supplies and equipment needed to support the INTD job assignment over multiple operational periods (up to 72 hours). The following items are suggested as a partial listing of items needed: <ul style="list-style-type: none"> • <i>Communications equipment</i> <ul style="list-style-type: none"> ○ <i>Portable radio</i> ○ <i>Cellphone</i> ○ <i>Batteries/chargers</i> • <i>First aid kit</i> • <i>Personal safety gear</i> • <i>ICS Forms cache</i> • <i>Office Supplies (e.g. clipboard, tape, paper, pencil, etc.)</i> • <i>Multi-purpose tool/Flashlight</i> • <i>Clock/Watch with countdown timer function</i> • <i>Reference Documents (e.g. TICP, NIFOG, TIC-FOG, etc.)</i> • <i>Computer/Printer/Thumb drive</i> 	○		8/15/22
2. Obtain and assemble supplies and materials for a personal sustainment kit of items needed for functioning over multiple operational periods. The following items are suggested as basic information and materials needed for a personal kit: <ul style="list-style-type: none"> • <i>Multiple changes of clothing (as appropriate for anticipated weather conditions)</i> • <i>Personal identification/credentials</i> • <i>Toiletries</i> • <i>Medicines (prescription and over-the-counter)</i> • <i>Cash and credit cards</i> • <i>Alarm clock</i> • <i>Food/Water</i> 	○		8/15/2022

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)

Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Competency: INTD Mobilization

Task	Code	Evaluator # and Initials	Date
Behavior: Obtain complete information for response			
3. Obtain complete information for assignment and initiate documentation: <ul style="list-style-type: none"> • Incident name • Incident/Mission/Tracking/Order # • Calling channel/phone number • Reporting time/Check-in location • Transportation arrangements/travel routing instructions • Contact procedures during travel • Specific equipment/supplies needed 	I	<i>BF</i>	<i>8/16/2022</i>
Behavior: Ensure check-in is recorded and accountability is activated			
4. Arrive at incident and check in: <ul style="list-style-type: none"> • Arrive properly equipped at assigned location within acceptable time limits • Follow established policies and procedures for checking in, and provide the needed information and documentation: <ul style="list-style-type: none"> ○ Incident/Mission/Tracking/Order # ○ Unit Leader's name ○ Incident assignment, etc. ○ Identification/credentials 	I	<i>BF</i>	<i>8/16/2022</i>

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
 Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Behavior: Gather and apply situational information relevant to the assignment			
5. Document initial briefing from Incident Communications Center Manager (INCM) /incident supervisor: <ul style="list-style-type: none"> • Situation Summary • Safety Briefing • Current and Planned Goal/Objectives • Current and Planned Actions, Strategies and Tactics • Current Organization (ICS 207 – Incident Organization Chart) • Current/Planned communications plan <ul style="list-style-type: none"> ○ Communications Nets, e.g., Command, Tactical, Logistics, etc. ○ Map Sketch of communication system • Current/Planned Resource Summary 	I	<i>BS</i>	8/16/2022

Competency: Incident Tactical Dispatch Operations

Task	Code	Evaluator # and Initials	Date
Behavior: Support establishment of Incident Communications Center (ICC)			
6. Assist INCM/supervisor with setup of the ICC if needed/as assigned: <ul style="list-style-type: none"> • Facility/vehicle in which to situate the ICC • Appropriate location of ICC • ICC equipment activation and testing <ul style="list-style-type: none"> ○ Radio ○ Data ○ Telephone ○ Video ○ Ancillary equipment • ICC documentation organization • Notification of ICC activation 	I	<i>BS</i>	8/16/2022
7. Evaluate needs and request additional resources to support ICC operations: <ul style="list-style-type: none"> • Develop or initiate an inventory control system for INTD supplies and equipment • Request supplies, equipment, and/or personnel using procedures established by INCM/supervisor • Maintain quantities of supplies and equipment at a level to prevent shortage of any needed items 	I	<i>BS</i>	8/16/2022

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)

Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

8. Assist in maintaining Security of the ICC <ul style="list-style-type: none"> Keep ICC entry/access points secured/locked in accordance with established policies Notify INCM/supervisor of any security concerns 	I	<i>BA</i>	<i>8/16/2022</i>
9. Demonstrate safety awareness: <ul style="list-style-type: none"> Location of First Aid kit supplies and equipment ICS 206 – Medical Plan Potential safety issues or hazards 	I	<i>BA</i>	<i>8/16/2022</i>

Competency: Incident Tactical Dispatch Operations (continued)

Task	Code	Evaluator # and Initials	Date
Behavior: Establish effective relationships			
10. Conduct self in a professional manner: <ul style="list-style-type: none"> Be respectful and courteous Respect public and private property Establish and maintain positive interpersonal and interagency working relationships Encourage and promote team environment Follow established procedures to report and document any inappropriate personnel actions Report any situations of concern to INCM/supervisor 	O	<i>BA</i>	<i>8/16/2022</i>

Behavior: Gather, produce and distribute information as required by established guidelines and ensure understanding by recipient

11. Communicate information effectively to incident personnel: <ul style="list-style-type: none"> Speak clearly and use concise language Speak at a pace sufficient for recipients to copy information when applicable Maintain appropriate level of radio discipline when operating on assigned nets Use proper microphone/headset techniques Record information in an easily understood manner 	I	<i>BA</i>	<i>8/16/2022</i>
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Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)

Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))


Competency: Incident Tactical Dispatch Operations (continued)

Task	Code	Evaluator # and Initials	Date
Behavior: Gather, produce and distribute information as required by established guidelines and ensure understanding by recipient (continued)			
12. Provide effective communications support during routine or non-emergency situations: <ul style="list-style-type: none"> • Dispatch incident personnel based upon needs of the incident and at the direction of incident management • Monitor and prioritize traffic simultaneously over all networks: <ul style="list-style-type: none"> ○ Repeated voice Nets ○ Simplex voice Nets ○ Data networks • Receive/relay/log information/ messages/ instructions to and from incident personnel <ul style="list-style-type: none"> ○ Supply orders (e.g., Operations, Logistics, etc.) ○ Message traffic routing ○ Weather reports ○ Resource status changes ○ Loss of communication assets ○ Safety updates ○ Situation reports • Conduct radio checks at specified intervals for personnel safety and accountability • Acknowledge all requests received in person or via phone, radio, and data networks 	I	<i>BJ</i>	<i>8/16/2022</i>

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)

Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Competency: Incident Tactical Dispatch Operations (continued)

Task	Code	Evaluator # and Initials	Date
Behavior: Gather, produce and distribute information as required by established guidelines and ensure understanding by recipient (continued)			
13. Provide effective communications support during emergency situations: <ul style="list-style-type: none"> • <i>Recognize and react decisively to urgent situations if encountered:</i> • <i>Request assistance from other ICC personnel if needed</i> • <i>Restrict or move unrelated radio traffic</i> • <i>Use appropriate notification procedures for emergency situations</i> <ul style="list-style-type: none"> ○ <i>Requests for emergency/urgent assistance or additional resources/support</i> ○ <i>Activations of radio emergency call buttons</i> ○ <i>Medical transport/ Medevac request</i> ○ <i>Aircraft emergency</i> ○ <i>Evacuation</i> ○ <i>Search and Rescue</i> ○ <i>Serious injury/Fatality</i> • <i>Notify INCM/supervisor of emergency situations</i> 	I		8/16/2022

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)

Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

BF

Competency: Incident Tactical Dispatch Operations (continued)

Task	Code	Evaluator # and Initials	Date
Behavior: Conduct tactical dispatch operations			
14. Demonstrate proper use of ICC communications systems for dispatch: <ul style="list-style-type: none"> • Radio equipment • Data equipment • Telephone equipment • Video equipment • Ancillary equipment 	I	<i>BF</i>	<i>8/16/2022</i>
15. Demonstrate familiarity with other ICC functions/capabilities: <ul style="list-style-type: none"> • Radio systems (e.g. Simplex, Conventional, Trunked, Digital & Analog modes) • Types of Radio Nets (i.e. Command, Tactical, Logistics/Support, Dispatch, Air Operations Nets, etc.) • Types and appropriate usage of Interoperability channels (e.g. local, regional, State, National) • Audio Gateways 	I	<i>BF</i>	<i>8/16/2022</i>
16. Demonstrate use of mapping tools (electronic and manual) <ul style="list-style-type: none"> • Locate key incident venues, personnel, and deployed resource • Locate key incident hazards, terrain features, ingress/egress routes, and fall back locations 	I	<i>BF</i>	<i>8/16/2022</i>

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)

Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Competency: Incident Tactical Dispatch Operations (continued)

Task	Code	Evaluator # and Initials	Date
Behavior: Conduct Incident Tactical Dispatch Operations (continued)			
17. Use specialized resources/technology to track the location of incident personnel where immediate, continuous, and accurate awareness of incident personnel is critical. Specific resources or technologies could include: <ul style="list-style-type: none"> • GPS technology • AVL technology • Maps • Status boards • Personal Accountability Report (PAR) • Personal Alert Safety System Device Activation (PASS) 	I	<i>BF</i>	<i>8/16/2022</i>
18. Demonstrate compliance with applicable communication policies and procedures: <ul style="list-style-type: none"> • <i>Memoranda of Understanding (MOUs)</i> • <i>Tactical Interoperable Communications Plan (TICP)</i> • <i>Tactical Interoperable Communications Field Operations Guide (TIC-FOG)</i> • <i>Mobile Communications Unit Standard Operating Procedures (SOPs)</i> • <i>Tactical Dispatch SOPs</i> • <i>Jurisdictional requirements</i> • <i>Equipment accountability procedures</i> 	I	<i>BF</i>	<i>8/16/2022</i>
19. Participate in all COMU briefings during each operational period: <ul style="list-style-type: none"> • <i>Provide information on communication issues (e.g., radio equipment performance, shift activities, significant events, etc.)</i> 	I	<i>BF</i>	<i>8/16/2022</i>

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)

Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Competency: Incident Tactical Dispatch Operations (continued)

Task	Code	Evaluator # and Initials	Date
Behavior: Conduct Tactical Dispatch Operations (continued)			
20. Maintain and organize ICC documentation: <ul style="list-style-type: none"> • Radio logs • Activity logs • Telephone logs • Status Cards • Equipment check-in/check-out information • Lost/Damaged equipment documentation • Software Applications <ul style="list-style-type: none"> ○ WebCAD ○ WebEOC® ○ Google Earth® ○ Email, etc. 	I	<i>BJ</i>	<i>8/16/2022</i>
21. Support unique operations, terminology, capabilities and characteristics of multiple public safety disciplines and their special teams: <ul style="list-style-type: none"> • Emergency Management • Emergency Medical Services • Fire • Law Enforcement • Forestry 	I	<i>BJ</i>	<i>8/16/2022</i>

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)

Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Competency: Incident Tactical Dispatch Operations (continued)

Task	Code	Evaluator # and Initials	Date
Behavior: Comply with NIMS and ICS concepts and principles			
22. Demonstrate awareness of NIMS and ICS COMU concepts and principles: <ul style="list-style-type: none"> • <i>COMU structure, roles and responsibilities of each COMU position</i> • <i>Plain language/common terminology</i> • <i>ICS terminology</i> <ul style="list-style-type: none"> ○ <i>Unit identification</i> ○ <i>Position titles</i> ○ <i>Resource naming</i> • <i>Incident Organizational Structure</i> • <i>Functions of Incident Management Teams</i> • <i>ICS map symbols, designators, and mnemonics</i> 	I	<i>BA</i>	<i>8/16/2022</i>
23. Obtain, and correctly fill out the NIC approved ICS forms needed to perform INTD functions within the ICC: <ul style="list-style-type: none"> • <i>ICS 205 – Incident Radio Communications Plan</i> • <i>ICS 205A – Communications List</i> • <i>ICS 210 – Resource Status Change</i> • <i>ICS 213 – General Message</i> • <i>ICS 213 – RR Resource Request Message</i> • <i>ICS 214 – Activity Log</i> • <i>ICS 219-7- Equipment Resource Status (T-) Card</i> 	I	<i>BA</i>	<i>8/16/2022</i>
24. Demonstrate ability to correctly interpret and respond to the following NIC approved ICS forms: <ul style="list-style-type: none"> • <i>ICS 201 – Incident Briefing</i> • <i>ICS 203 – Organization Assignment List</i> • <i>ICS 204 – Assignment List</i> • <i>ICS 206 – Medical Plan</i> • <i>ICS 207 – Incident Organization Chart</i> • <i>ICS 208 – Safety Message/Plan</i> • <i>ICS 209 – Incident Status Summary</i> • <i>ICS 211 – Incident Check-in List</i> • <i>ICS 221 – Demobilization Check-Out</i> • <i>ICS 225 – Incident Personnel Performance Rating</i> 	I	<i>BA</i>	<i>8/16/2022</i>

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)

Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

LS


Competency: Incident Tactical Dispatch Operations (continued)




Task	Code	Evaluator # and Initials	Date
Behavior: Comply with NIMS and ICS concepts and principles (continued)			
24a. Demonstrate ability to correctly interpret the following forms: <ul style="list-style-type: none"> • <i>Form 217A – Communications Resource Availability Worksheet</i> • <i>Form 309 – Communication Log</i> 	I	<i>BJ</i>	<i>8/16/2022</i>

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)

Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

Competency: INTD Demobilization

Task	Code	Evaluator # and Initials	Date
Behavior: Transfer INTD position duties while ensuring continuity of authority and knowledge, taking into account the increasing or decreasing incident complexity			
25. Coordinate an efficient transfer of position duties: <ul style="list-style-type: none"> Document and coordinate demobilization actions Brief relief personnel Coordinate with incident/planned event personnel as necessary 	I		8/16/2022

Behavior: Complete demobilization procedures and restore response-readiness			
26. Demobilize from assignment: <ul style="list-style-type: none"> Check in equipment and submit required documentation Address safety and notification considerations for return to home agency 	I		8/17/2022
27. Complete Demobilization Documentation <ul style="list-style-type: none"> If required, complete and submit ICS 221 – Demobilization Check-Out completed form as appropriate Obtain ICS 225 – Incident Personnel Performance Rating from INCM/supervisor Provide input for After-Action Report (AAR) Submit final documentation to INCM/supervisor 	I		8/17/2022
28. Prepare for next operational period/incident <ul style="list-style-type: none"> Inventory and restock ICC supplies Inventory and restock INTD response kit and personal sustainment kit Attend applicable post-incident debriefings <ul style="list-style-type: none"> Hotwash Post-Incident/Event After Action Debriefings Critical Incident Stress Management/ Debriefing (CISM/CISD) 	I		8/17/2022

Code: O = Can be completed in any situation (Simulation, Classroom, Daily Job)
 Code: I = Must be performed on an Incident, Planned Event*, or an FE/FSE* (*Must be pre-approved by the Statewide Interoperability Coordinator (SWIC))

All-Hazards INCIDENT TACTICAL DISPATCHER

INSTRUCTIONS FOR COMPLETING THE EVALUATION RECORD

There are four separate pages provided to allow evaluations to be made during four separate occasions. These evaluations may be made on Incidents, Planned Events, Functional Exercises, Full Scale Exercises, Simulations, Drills, Classroom, or Daily Job functions (as specified in the Task tables). This should be sufficient for qualification in the position if the individual is adequately prepared. If additional evaluation pages are needed, they can be copied from a blank task book and attached. (Remember to change the Evaluation Record # to the next sequential number.)

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

Trainee's name and Trainee's position: Self Explanatory

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

Evaluator's agency address, e-mail address and phone: Self explanatory

Evaluation Record #: The number prepopulated in the upper left corner of the evaluation page identifies a particular experience or group of experiences. This number should be placed in the column labeled "Evaluation Record #" on the Qualification Record for each task performed satisfactorily during the evaluation opportunity.

Name and Location of Incident or Situation: Identify the name of the incident (if there is one) and the location where the tasks were performed. If evaluation occurs during a short term situation rather than a named incident, list the responding agency and area.

Incident Kind: Enter kind of incident, e.g., hurricane, wild land fire, search and rescue, flood, preplanned event, full scale exercise, etc.

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

Number and Kind of Resources: Enter how many resources of each kind assigned to the incident pertinent to the trainee's task book position. (e.g. 2 mobile communications vehicles)

Duration: Enter inclusive dates during which the trainee was evaluated. If evaluation occurs during a short term situation, enter date and start and end time of evaluation. (e.g. 11/1/14 to 11/4/14)

Management Level or Complexity Level: Indicates ICS organization level, i.e., Type 5, Type 4, Type 3, Type 2, Type 1, Area Command.



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

Date: List the date the record is being completed.

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

Evaluator's relevant rating: Evaluator lists their certification relevant to the trainee position they supervised.

RECORD OF EVALUATION

Lindsay Stambaugh

INTD

TRAINEE NAME

TRAINEE POSITION

Evaluation Record #1	Evaluator's name: <u>Brandon Larson</u>	Evaluator's Title: <u>Radio Tech</u>	Evaluator's Agency: <u>City of Saint Cloud</u>	
Evaluator's agency address: <u>1201 7th St. S. Saint Cloud, MN 56301</u>				
Evaluator's e-mail: <u>Brandon.Larson@ci.stcloud.mn.us</u>				
Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, exercise, etc.)	Number & Kind of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Management Level or Complexity Level
<u>Operation Dark Days</u>	<u>1 weather</u>	<u>Radio console portable + mobile Radio STR tower</u>	<u>8/15-8/16/2022</u>	
<p>The tasks initialed & dated by me have been performed under my supervision in a satisfactory manner by the above named Trainee. I recommend the following for further development of this Trainee:</p> <p><input checked="" type="checkbox"/> The individual has successfully performed all tasks for the position and should be considered for certification.</p> <p><input type="checkbox"/> The individual was not able to complete certain tasks (comments below) or additional guidance is required.</p> <p><input type="checkbox"/> Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p><input type="checkbox"/> The individual is severely deficient in the performance of tasks for the position and needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.</p> <p>Comments: <u>Took charge and was a great INTD! Self-starter!</u></p> <p>Date: <u>8/16/2022</u> Evaluator's initials: <u>BL</u></p> <p>Evaluator's relevant agency certification or rating: <u>Com L/Com T</u></p>				

Emergency Management Institute



FEMA

This Certificate of Achievement is to acknowledge that

LINDSAY A STAMBAUGH

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00100.b

Introduction to Incident Command System

ICS-100

Issued this 23rd Day of November, 2016



A handwritten signature in black ink, appearing to read "J. Stern", written over a horizontal line.

Jeffrey D. Stern, Ph.D.

Superintendent

Emergency Management Institute

Federal Emergency Management Agency

Emergency Management Institute



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IS-00144

**Telecommunicators Emergency Response Taskforce
(TERT) Basic Course**

Issued this 23rd Day of November, 2016



A handwritten signature in black ink, appearing to read "J. Stern", written over a horizontal line.

Jeffrey D. Stern, Ph.D.
Superintendent
Emergency Management Institute
Federal Emergency Management Agency

Emergency Management Institute



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IS-00200.b

**ICS for Single Resources and
Initial Action Incident, ICS-200**

Issued this 2nd Day of June, 2017



A handwritten signature in black ink, appearing to read "Jeffrey D. Stern".

Jeffrey D. Stern, Ph.D.
Superintendent
Emergency Management Institute
Federal Emergency Management Agency

Emergency Management Institute



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IS-00700.a

National Incident Management System (NIMS)

An Introduction

Issued this 23rd Day of November, 2016



A handwritten signature in black ink, appearing to read "J. Stern", written over a horizontal line.

Jeffrey D. Stern, Ph.D.

Superintendent

Emergency Management Institute

Federal Emergency Management Agency

Emergency Management Institute



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has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00800.c

National Response Framework, An Introduction

A handwritten signature in black ink, appearing to read "J. Stern", written over a horizontal line.

Issued this 29th Day of August, 2018



Jeffrey D. Stern, Ph.D.
Superintendent
Emergency Management Institute
Federal Emergency Management Agency



TEXAS A&M ENGINEERING EXTENSION SERVICE

National Emergency Response and Recovery Training Center

in cooperation with the

Department of Homeland Security
Federal Emergency Management Agency



FEMA

Lindsay Stambaugh

has successfully completed

Intermediate ICS-300 for Expanding Incidents

College Station, Texas, United States

21 Hours

August 16 - 19, 2021


David Coatney, Director
Texas A&M Engineering Extension Service


H. Lawson, Jr., Director
National Emergency Response and Recovery Training Center
Texas A&M Engineering Extension Service



TEXAS A&M ENGINEERING EXTENSION SERVICE

National Emergency Response and Recovery Training Center

in cooperation with the

Department of Homeland Security
Federal Emergency Management Agency



FEMA

Lindsay Stambaugh

has successfully completed

Advanced ICS-400 Command and General Staff-Complex Incidents

Minneapolis, Minnesota, United States

15 Hours

November 2 - 3, 2021


David Coatney, Director
Texas A&M Engineering Extension Service


H. Lawson, Jr., Director
National Emergency Response and Recovery Training Center
Texas A&M Engineering Extension Service

CERTIFICATE OF COMPLETION

THIS CERTIFICATE RECOGNIZES THAT

Lindsay Stambaugh

Successfully completed the All-Hazards
Virtual Incident Tactical Dispatcher (INTD) Course
during 14-18 June, 2021



A handwritten signature in black ink, which appears to read "Billy Bob Brown, Jr." The signature is written in a cursive style and is positioned above a horizontal line.

Billy Bob Brown, Jr.

Executive Assistant Director for Emergency Communications
Cybersecurity and Infrastructure Security Agency

Metro Region ARMER Standards

Section Appendices – Appendix C Talkgroup Permission Letter Template

Date Established

5-12-01

Date Revised/Reviewed

9-16-22~~1-27-~~

24

1. Purpose or Objective

The purpose of this template is to provide a guide for requesting the use of another owner's talkgroup resources. Procedure for use of this letter is found in SECB Standard LMR-13 *Use of Shared Talk Groups*. (See next page)

AUTHORIZATION TO USE TALKGROUPS
NOT OWNED BY THE REQUESTING AGENCY

Date: _____

Requesting Agency: _____

Authorizing Agency: _____

Reason for Request ___ Add Talkgroup(s) to Radios
 ___ Add Talkgroup(s) to Dispatch Console
 ___ Scan/Monitor Talkgroup(s)
 ___ Other _____

I. Request permission to ADD the following clear talkgroup(s)

Talkgroup	Installation: Console, Portable, Mobile, Command Post	# of Work Units
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

II. Request permission to SCAN/MONITOR the following clear talkgroup(s)

Talkgroup	Installation: Console, Portable, Mobile, Command Post	# of Work Units
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

III. Encrypted Talkgroup Requests

A. If an entity is granted you are given permission for a talkgroup that is encrypted, neither the talk-group nor the encryption key will be shared without written permission from the grantor entity.

B. If an entity is granted permission for a talkgroup that is encrypted, all lost or stolen radios with the talkgroup must be reported to the owning entity as soon as possible.

CB. The encrypted talkgroup will be granted and programmed via:

- ___ In-person encryption key transfer
- ___ Keyloader to Keyloader transfer
- ___ Loaded by granting agency Keyloader only

___ Other: please specify

C. Request permission to ADD the following encrypted talkgroup(s)

Talkgroup	Talkgroup Hex ID	CKR #	Patching Capability (Gateway, Dispatch, LTE)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

D. Request permission to SCAN/MONITOR the following encrypted talkgroup(s)

Talkgroup	Talkgroup Hex ID	CKR #	Special Notes
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

IV. Other Request/Requirements (Explain)

V. Reason for Request

Note: If given permission for talkgroups on a temporary or event basis, the permission will be rescinded on dd/mm/yyyy.

_____ (Attach supporting documentation)

Name of individual completing application _____

Address _____

Phone _____ Email _____

This Page for Authorizing Agency Only

**AUTHORIZATION TO USE TALK GROUPS
NOT OWNED BY THE REQUESTING AGENCY**

Request Approved _____ Approved with Conditions _____ Denied _____

Conditions:

Authorized Signature _____

Name of Authorizing Individual _____

Address _____

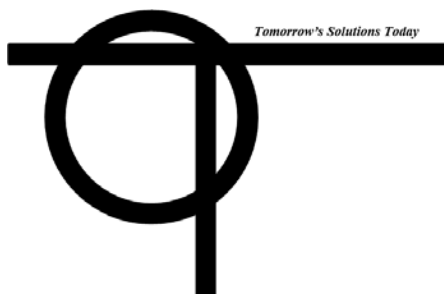
Phone _____ Email _____



ARMER Participation Plan

Version 3.0

August 19, 2022



Prepared by:

On Target Training and Consulting, LLC

13517 Larkin Drive
Minnetonka, MN 55305
(320) 293-9011

SECTION 1. INTRODUCTION

Northfield Hospital + Clinics (referred to as NH+C in this plan) provides primary EMS/ambulance and hospital medical services to several local municipalities and public safety entities in southeast Minnesota. NH+C is currently an ARMER radio system user operating under the Alinna EMS Participation Plan. EMS Dispatch services for Northfield EMS operations are being provided by M Health Fairview 2019. Radio management for NH+C is currently provided by both the M Health Fairview Radio System Administrator and Ancom Communications from their Burnsville, MN location.

Northfield Hospital + Clinics facilities is located at 2000 North Avenue, Northfield, Minnesota. Northfield operations encompass one hospital with several clinics located near Northfield, MN along with their ambulance service operation. All agencies are based in Northfield Minnesota.

The NH+C EMS service area encompasses 284 square miles and covers parts of Rice, Goodhue, Dakota, and Scott counties. A map of the service area is provided in Section 4C of this plan.

Operations have grown over the past several years to include expanded services in conjunction with the potential for Northfield EMS to establish their own dispatch site at a future date (adding connected dispatch consoles is not part of this plan amendment). It has become appropriate for Northfield Hospital + Clinics to develop a full ARMER Plan to encompass all operations to better increase efficiency, security, safety, and operations.

There are four agency components to this ARMER Plan:

1. Northfield Hospital + Clinics Emergency Medical Services (EMS) ambulance operations
2. Hospital security staff operations
3. Hospital Emergency Room operations
4. Hospital Emergency Management operations

A review of each of these agency work groups is provided in following sections of this plan.

A web site link to Northfield EMS is as follows:

<https://www.northfieldhospital.org/ems>



SECTION 2. ARMER APPLICATION

Northfield Hospital + Clinics requests that this application and plan be reviewed and approved by the following agencies and committees:

- ❖ Southeast Region Advisory Committee and Emergency Communications Board
- ❖ ARMER Land Mobile Radio (LMR) Committee
- ❖ State of Minnesota Emergency Communications Board (SECB)

This ARMER Participation Plan for NH + C has been developed based on the requirements for participation in and use of the ARMER radio system. Northfield Hospital + Clinics desires to contract as required with the Southeast Region Minnesota ECB and Minnesota Department of Transportation (MnDOT) for use of the ARMER system once all approvals have been obtained.

Northfield Hospital + Clinics is requesting approval as a **full ARMER participant** for the service entities included in this ARMER Participation Plan per LMR Standard LMR-41.

A list of the NH+C hospital and ambulance facilities included in this plan are provided in table 2A of this plan document.

Table 2A. Northfield Hospital + Clinics Physical Locations

1	Northfield Hospital + Clinics EMS 1600 Riverview Drive Northfield, MN 55057 507-646-1414
2	Northfield Hospital + Clinics 2000 North Avenue Northfield, MN 55057 507-646-1000



SECTION 3. PRIMARY CONTACTS

The primary points of contact for this project and plan are:

Brian Edwards

EMS Chief
 Northfield Hospital + Clinics
 2000 North Ave.
 Northfield, MN 55057
 Phone: 507.646.1444
 Email: edwardsb@northfieldhospital.org

Dave Theis

On Target Training and Consulting
 25775 Hazelnut Trail
 Nevis, MN 56467
 Phone: 320.423.8728
 Email: dave.theis@ontargettc.com

Northfield Hospital + Clinics will be obtaining and managing the actual assigned ARMER radio and talkgroup IDs for all NH+C agencies through this new plan request.

SECTION 4. AGENCY SUMMARY AND JURISDICTIONAL COVERAGE

Northfield Hospital + Clinics entities to be included in this ARMER Participation Plan are listed in Tables 4A and 4B. As previously noted, all are existing ARMER system users through the existing Allina Health EMS ARMER participation plan:

Table 4A: Northfield Hospital + Clinics

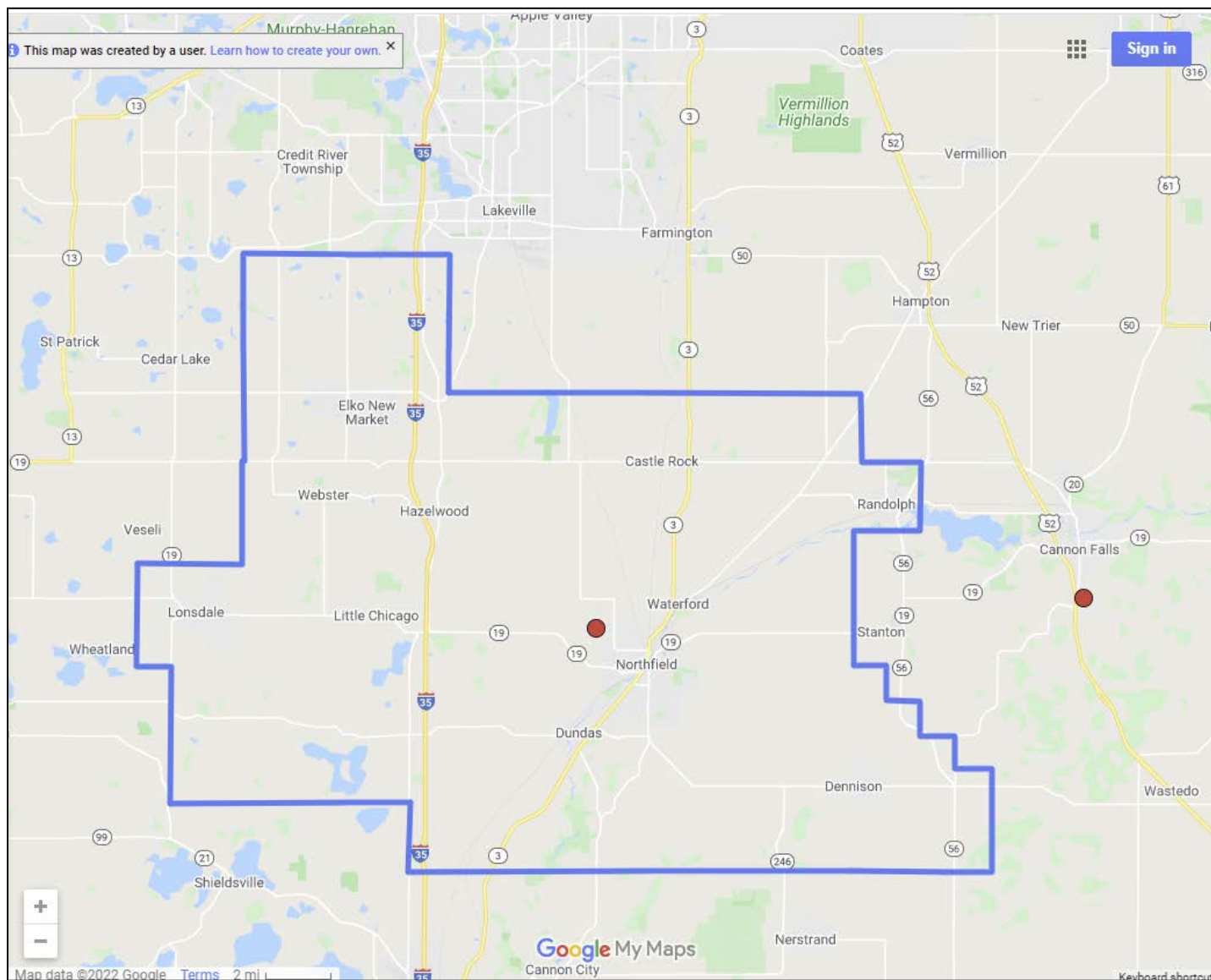
	Entity/Agency	Existing ARMER User?	Service Area	Current Plan Owner
1.	Northfield Hospital + Clinics ❖ Emergency Preparedness ❖ Emergency Room Operations	No Yes	Northfield and surrounding areas	Allina Health EMS

Table 4B: Northfield Hospital + Clinics EMS Ambulance Services

	Entity/Agency	Existing ARMER User?	Service Area	Current Plan Owner
1.	Northfield Hospital + Clinics ❖ EMS Ambulance Service	Yes	284 square miles (refer to map)	Allina Health EMS



4C. Map of Northfield Hospital + Clinics EMS Ambulance Primary Service Area



SECTION 5. EXISTING AGENCY JUSTIFICATION FOR ARMER USAGE

As noted in the previous section, all NH+C entities listed are existing ARMER radio system users and will be incorporated into this plan.

The use of the ARMER 800 MHz Trunked Radio System has been shown to provide the best technology solution to meet the operational radio needs of public safety agencies and hospitals throughout Minnesota. The key performance benefits provided by the ARMER system include:

- ❖ Radio Coverage (mobile and portable communications)
- ❖ System Capacity (Talkgroups through Trunking technology)
- ❖ Interoperability (a shared statewide radio network platform)
- ❖ Reliability (multiple tower sites, overlapping coverage, redundant site links)

SECTION 6. NORTHFIELD HOSPITAL + CLINICS EMS AMBULANCE OPERATIONS

The EMS/Ambulance division of Northfield Hospital + Clinics is based in Northfield, Minnesota. From this location, they are the primary ambulance/EMS service provider for the PSA section map noted in section 4 and Map 4C of this plan request:

- ❖ Areas of Dakota County
- ❖ Areas of Goodhue County
- ❖ Areas of Rice County
- ❖ Areas of Scott County

6A: Northfield Hospital + Clinics EMS Ambulance Current Radio Operations Management:

Northfield Hospital and EMS ARMER unit and talkgroup ID assets are currently managed by the M Health Fairview radio system administrator, Eli Charif. Radio and talkgroup IDs currently in use were assigned from the Allina Health ID pools when Northfield began ARMER operations as part of the Allina Health participation plan amendment. Current radio programming is provided by Ancom Communications, Burnsville, MN

6B. Northfield Hospital + Clinics EMS Ambulance Future Radio Operations and Management:

Assuming the plan request passes all required regional and state Emergency Communications Boards, NH+C will propose to reprogram all radios with new trunked unit IDs from a pool granted by approval of this plan. This new pool of IDs will be assigned by John Anderson, ARMER Statewide Radio System Administrator. Existing trunked Unit IDs will be de-assigned and returned to MHealth Fairview and Allina's unit ID pools. Radio unit ID



management will be managed by the NH+C EMS radio manager, and radio programming will remain the same with Ancom Communications providing this service.

6C. Current dispatch operations are as follows:

Northfield Hospital + Clinics EMS ambulances are currently being dispatched by the M Health Fairview EMS Dispatch Center located in St. Paul, MN. There are no plans to change this relationship.

The M Health Fairview dispatch center has 4 MCC7500 console positions directly connected to the ARMER zone-1 master site located in Waters Edge (Roseville, MN). With respect to radio tower site traffic, this plan amendment ***will not*** change talkgroup loading for any tower that is currently allowed usage of Northfield EMS talkgroups.

All NH+C ambulances currently use the Emergency Alarm/Call feature on the radio. When pressed, radios will automatically switch to a pre-assigned talkgroup designated as “emergency”. This talkgroup, EMSHE-ALS, ID 2296 (dec), is present on the M Health Fairview dispatch consoles and is currently allowed statewide tower access. M Health Fairview will remain the primary point of contact for any ambulance or radio that presses the orange Emergency button for assistance coordination.



SECTION 7. HOSPITAL OPERATIONS

7A. Emergency Preparedness Operations

Northfield Hospital + Clinics Emergency Preparedness department will utilize the ARMER 800 MHz system to coordinate and interact with public safety agencies to mitigate hospital evacuation or major incidents affecting NH+C and community operations.

The purpose and scope of NH+C Emergency Operations Plan is to provide an organized process to prepare for, respond to, manage, and recover from a variety of incidents, both external and internal, which could impact any NH+C sites and the surrounding community. Northfield Hospital + Clinics Emergency Preparedness Plan is attached to this document and is labeled as **Addendum A**.

Northfield Hospital + Clinics operations include the locations as listed in Table 4A of this plan. Entities using ARMER radios in the listed facilities are limited to Hospital Security, Emergency Management/Planning, and Emergency Room operations. These facilities are existing ARMER users through the associated Allina Health ARMER participation plan.

7B. Hospital Emergency Room Departments

The ARMER system provides a critical communications link connecting NH+C Emergency Department and ambulances transporting patients into facilities. This communications link provides transporting ambulances critical medical control and life-saving advice from emergency department physicians. Emergency departments depend on ARMER communications to manage beds, and assemble trauma, stemi, and stroke teams allowing rapid delivery of lifesaving care rapidly after a patient arrives in the emergency department.

Northfield Hospital ER is currently equipped with an ARMER radio selected to the NF EMS Main talkgroup and is used for situational awareness for arriving ambulances.



7C. Hospital Security

The Department of Homeland Security (DHS) has identified hospitals as critical facilities in the event of a chemical and/or biological emergency. Two-way radio communications between persons inside the hospital and public safety personnel outside the building is a critical need when an emergency occurs. The Statewide Emergency Communications Board (SECB) is empowered to enter into system use agreements with eligible hospitals when such use is consistent with the protection of life and safety.

Hospitals are vulnerable environments to threats like theft and violence. If there is a threat, it can have a huge impact on the well-being of sick or injured patients. Northfield Hospital + Clinics security responds to emergency incidents in the hospital facility and surrounding clinics. They work with local law enforcement in those situations where a law presence is needed to manage emergency room operations. Working with interoperability partners using ARMER radios and talkgroups, they can mitigate these problems to protect the hospital building and its occupants.

The NH+C hospital Emergency Department (ED) is open to the general public 24 hours a day, seven days a week. As such, hospitals may utilize the ARMER system per SECB Standard LMR-32, Hospital Access, for communication with public safety personnel where such use is consistent with and supportive of the facility's Emergency Response Plan (ERP). d

All NH+C Hospital Security radios currently do not use the Orange Emergency button feature. However, upon approval of this plan and with a formal agreement with Rice-Steel Dispatch, security radios will be re-programmed to enable the feature. On an emergency button press, Security radios will automatically switch to the pre-assigned Rice-Steele Emergency talkgroup, SL-EMERGENCY (ID 22464 dec), which appears on Rice/Steele dispatch consoles. This will provide a direct link between hospital security and county dispatchers so that assistance can be provided from local law enforcement for whatever situation may occur.



SECTION 8. ARMER RADIO USERS

The 800 MHz ARMER Trunked Radio System has been shown to be the best technology solution to meet the operational needs of the agencies included in this plan. All Northfield departments included in this plan are existing ARMER system users.

The ability of Northfield Hospital + Clinics agencies to work seamlessly with local public safety agencies daily and having a common radio system in place for all agencies is key to successful operations.

A review of the planned ARMER system use and/or changes to ARMER use for each group of Northfield Hospital + Clinics operations is provided in the following sections. Refer to Table 8A for quantities of existing ARMER radios and proposed additions of radios for each facility and entity.

Table 8A. Northfield Hospital + Clinics ARMER Radio Inventories

	Entity/Agency	Existing Mobiles	Existing Portables	Existing Consolettes	Future Mobiles	Future Portables	Future Consolettes
1	Northfield Hospital + Clinics EMS	7	20	0	3	7	none
2	Northfield Hospital + Clinics ER	0	1	0	none	none	none
3	Northfield Hospital + Clinics EM and Security	0	3	0	none	none	none
	Totals	7	24	0	3	7	0

Northfield Hospital + Clinics currently has 31 radios active on the ARMER system. The 800 MHz radios being used by these entities are currently using ARMER ID’s sourced from both the Allina EMS and M Health Fairview ARMER plans. A component of this plan is to bring these radios into the NH+C operations inventory and assign new IDs obtained through this planning process. Northfield Hospital + Clinics will be reprogramming all existing radios with new Unit IDs from the newly allocated pool of IDs that will be assigned to them. Because NH+C anticipates moderate growth in ambulance and hospital services, more radios will eventually be needed. **Northfield Hospital + Clinics requests that the total number of IDs assigned to them be at least 31 plus a modest growth factor allowing for 14 new IDs for a total of 45 new radio IDs.**

Addendum B provides the details of radios assigned to ambulance services and hospital entities.

Northfield Hospital + Clinics does not plan to add any additional radios at this time other than those identified in Table 8A and Addendum B as part of this plan amendment.



SECTION 9. ARMER TALKGROUP NAMING AND SERVICE AREAS

Where applicable and logical, NH+C will continue to use the three existing talkgroups with IDs already assigned to them via the parent agencies based on their existing participation plans. These talkgroup IDs will NOT be changed due to the large quantity of radios currently programmed with these IDs external to Northfield EMS. However, any new talkgroups that will be added will have IDs assigned from the proposed Northfield Hospital + Clinics new talkgroup ID pool or State Shared pool per the Statewide System Administrator.

Northfield Hospital + Clinics requests to obtain new talkgroups identified in Table 9A and modify talkgroups listed in Table 9B with the changes listed in the table.

No talkgroups will be encrypted; all will be clear mode. However, in the future, NH + C may request modifications to this participation plan to add encryption to some talkgroups.

Existing talkgroups are defined as follows:

- ❖ NF EMS MAIN: Existing Regional access to allow all Northfield Hospital + Clinics EMS Ambulances to have ARMER radio coverage in the PSA area and border region.
- ❖ NF EMS ADMIN: Existing Regional access to allow all Northfield Hospital + Clinics EMS supervisors to have ARMER radio coverage in the PSA area and border region for departmental use.
- ❖ NF EMS T2T: Existing regional access to allow ambulances and supervisors to communicate with each other for coordination of on-scene tactical events.

New talkgroup use will be defined as follows:

- ❖ TAC1, TAC2: Regional coverage to allow ambulances, emergency rooms, and emergency management to coordinate appropriate responses to planned and unplanned events as well as training. Northfield Hospital + Clinics is requesting 2 new talkgroups.
- ❖ Hospital Security: Local coverage for hospital security services per SECB Standard LMR-32. which governs usage for hospital security services. Northfield Hospital + Clinics is requesting 1 new talkgroup.
- ❖ Emergency Preparedness: Emergency events coordination between hospital security, EMS, and ER. Northfield Hospital + Clinics is requesting 1 new talkgroup.

In addition to the 4 new talkgroups requested, NH+C requests that 1 additional talkgroup be assigned for future growth and expansion.



Table 9A. Proposed NEW Talkgroup Names and Coverage Areas

	Talk Group Function	Proposed TG Alias	TG ID	TGMG Service Area Profile
1	Northfield TAC training and coordination	EMSNF-TAC 1	TBD	Regional + Border
2	Northfield TAC training and coordination	EMSNF-TAC 2	TBD	Regional + Border
3	Northfield Security operations	EMHNF-SEC	TBD	Local Sites in Rice, Dakota, and Goodhue Counties
4	Northfield Emergency Management	EMHNF-EMGT	TBD	Local Sites in Rice, Dakota, and Goodhue Counties

Table 9B. Proposed Modifications to Existing Talkgroup Names and Coverage Areas

Function	Existing TG Name	New TG Alias	Owner ID	TG ID	Existing Sites	New Sites
Northfield Hospital + Clinics EMS Primary Dispatch	EMS-AL-NF-MAIN	EMSNF-MAIN	Allina Health <i>Note-1</i>	2268 (dec)	EMSAL-WIDE	Multi Regional <i>Note-2</i>
Northfield Hospital + Clinics EMS truck to truck	EMS-AL-NF-T2T	EMSNF-EMS	Allina Health <i>Note-1</i>	2269 (dec)	EMSAL-WIDE	Multi Regional <i>Note-2</i>
Northfield Hospital + Clinics EMS Admin (supervisors)	EMS-AL-NF-ADMIN	EMSNF-ADMIN	Allina Health <i>Note-1</i>	2476 (dec)	EMSAL-WIDE	Multi Regional <i>Note-2</i>

Note-1: The existing ARMER talkgroup IDs being used by NH+C, local, city, and county agencies will continue to these existing IDs assigned under the Allina parent pool to avoid having to reprogram deployed radios with this talkgroup active in its code plug. These talkgroups will be owned by NH + C though they will exist in the Allina Talkgroup range.

Note-2: The proposed new Talkgroup Site Access Profile will be created by the ARMER Statewide Radio System Administrator based on requirements defined by the NH+C Radio Administrator.

SECTION 10. LOCAL TOWER ENHANCEMENTS

There are no planned tower site or 800 MHz RF channel expansion enhancements planned with this Northfield Hospital + Clinics participation plan request and implementation.

SECTION 11. ARMER RADIO TRAFFIC USAGE

An ARMER plan typically includes a review of the amount of traffic expected to be added to the radio system from the mobile and portable radios identified in the participation plan. In this plan for NH+C entities, all radios previously identified are currently in use by existing entities, and therefore present no additional traffic loading on the system. The small growth factor for additional radios will have virtually no impact on system loading.



SECTION 12. ARMER RADIO SYSTEM COVERAGE

Radio system range or coverage is considered the most critical function of any radio system, especially in public safety operations. While there are other important elements to a good system (equipment reliability, channel capacity), the ultimate factor by which a system's measure of success or failure is usually measured is how reliably it covers the intended service area.

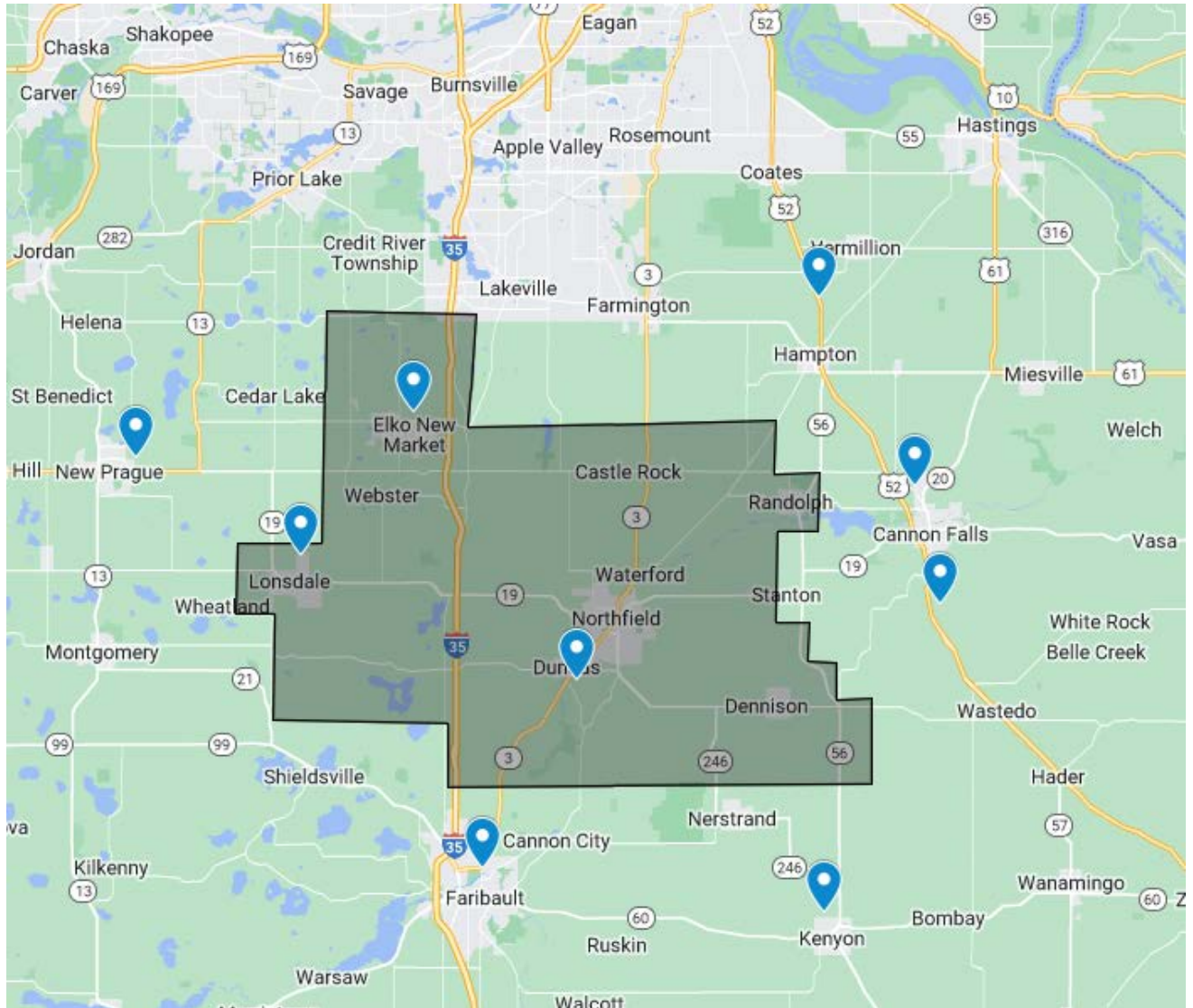
The Northfield Hospital + Clinics EMS ambulance services and hospitals identified in this plan are existing ARMER radio system users and report good ARMER system coverage throughout their service areas. No proposed site expansions are being considered. The generally accepted tower site coverage where Northfield Hospital + Clinics ambulances and hospitals require coverage is shown in the following attachments.

Map 12A details the NH+C EMS ambulance PSAs with ARMER Tower Site overlay. Several of the tower sites that cover the primary service area for NH + C are simulcast subsites. As such, the entire simulcast site must be added to a new Site Access profile that will cover the required area. This will include:

- ❖ Zumbrota Simulcast Site
- ❖ Norwood Simulcast Site
- ❖ Faribault Simulcast Site



Map 12A. Northfield Hospital + Clinics EMS Ambulance PSA & ARMER Tower Sites



SECTION 13. LEGACY VHF EQUIPMENT

N/A

SECTION 14. RADIO USER TRAINING

Implementation of a full participation plan will follow ARMER system requirements and associated operational standards requiring that all personnel who will be using the system receive proper training on the use, capabilities, and features of the system. Trunked radio systems, including the ARMER system, have operational requirements that differ from traditional conventional repeater systems, and it is necessary that and users be trained on the capabilities and proper operation of the system.

Northfield Hospital + Clinics recognizes this need and will conduct in-house end-user training using NH + C certified trainers for all radio system users. Additional training is also planned through the services of independent contractors recognized by the state as proficient in the operation of the ARMER radio system.

The program will include training for the following workgroups and functions:

- ❖ Radio end user training
 - Security
 - EMS
 - EP
 - ER
- ❖ Proper Radio Usage
- ❖ ARMER Standards
- ❖ Training Modules
 - Radio 101
 - Interoperability 101

Radio training will occur when any EMS or Hospital Security/EP/ED service migrates to the new plan scheme.



SECTION 15. INTEROPERABILITY

The need for interoperability is an important factor in NH+C’s plan to merge all aspects of its operations onto the ARMER radio system. Radio interoperability will exist at multiple levels within public safety radio operations. However, having all entities using a common radio system platform is the preferred and easiest method to establish good interoperability.

Northfield Hospital + Clinics intends to utilize the following ARMER Regional and Statewide talkgroups to facilitate interoperable communications with public safety and Emergency Management agencies operating regionally and statewide. Northfield Hospital + Clinics is in formal process of requesting access to these talkgroups with respective RAC and MESB Chairs and will plan to have all approvals prior to operational use.

Northfield Hospital will send new Talkgroup Permission letter requests to all agencies previous identified.

MN	CM	SW	NW	SR	SE	NE	ME	8C	7C	EMS	DRO
STAC1	CM CALL	SW CALL	NW CALL	SR CALL	SE CALL	NE CALL	ME TAC 1	8CALL90	7SOA1	EMS-SMRCC	DRO1
STAC2	CM2	SW2	NW2	SR2	SE 2	NE 2	ME TAC 2	8TAC91	7SOA2	EMS-MRCXP1	DRO2
STAC3	CM3	SW3	NW3	SR3	SE 3	NE 3	ME TAC 3	8TAC92	7SOA3	EMS-MRCXP2	DRO3
STAC4	CM4	SW4	NW4	SR4	SE 4	NE 4	ME TAC 4	8TAC93	7SOA4	EMS-COORD	DRO4
STAC5	CM5	SW5	NW5	SR5	SE 5	NE 5	ME TAC 5	8TAC94	7SOA5	EMS-ETAC 1	
STAC6	CM6	SW6	NW6	SR6	SE 6	NE 6	ME TAC 6	8CALL90D	7SOA6	EMS-ETAC 2	
STAC7	CM7	SW7	NW7	SR7	SE 7	NE 7	ME TAC 7	8TAC91D	7SOA7	EMS-ETAC 3	
STAC8	CM8	SW8	NW8	SR8	SE 8	NE 8	ME TAC 8	8TAC92D	7SOA8	EMS-ETAC 4	
STAC9	CM9	SW9	NW9	SR9	SE 9	NE 9		8TAC93D	7SOA9	EMS-WMRCC	
STAC10	CM10	SW10	NW10	SR10	SE 10	NE 10		8TAC94D	7SOA10	EMS-EMRCC	
STAC11	CM11	SW11	NW11	SR11	SE 11	NE 11		8SOA1	7SOA11		
STAC12	CM12	SW12	NW12	SR12	SE 12	NE 12		8SOA2	7SOA12		
MSP CALL		SW13	NW EOC		SE 13	NE 13		8SOA3			
		SW HOSP	NW HOSP		SE EOC	SE EOC		8SOA4			
		SWR5EM	NW EMS		SE HOSP	SE HOSP		FSOA1			
								FSOA2			

Northfield Hospital + Clinics acknowledges that usage of these talkgroups and channels on the ARMER system are limited to the coverage boundaries of the ARMER system, their designed operational use, and when need requires based on ICS principles and management.

Northfield Hospital + Clinics locations intend to use the ARMER 800 MHz radio system to achieve internal and external interoperable communications with responding agencies during a disaster or exercise. Talkgroup assignments will be issued by a Communications Unit Leader (COML) or PSAP (Public Service Answering Point) through a request by Incident Command based on ARMER and ICS standards. Radio’s will be issued by a COML, ARMER trainer or designee at the time of the incident in accordance with ARMER standards and will be returned to the same person. An ICS 205 (Incident Communications plan) will be filled out for each event and kept with all other incident documentation.



SECTION 16. STANDARDS

The primary technology standard applied to this plan is the Project 25 (P25) Standard. Specifically, the Phase 1 Frequency Division Multiple Access (FDMA) standard currently in use by the ARMER system. P25 is specifically designed for digital radios systems for public safety.

Northfield Hospital + Clinics will adopt and comply with the standards published by ARMER, the State Emergency Communications Board (MN SECB) and the various Minnesota Regional Advisory Committees. Use of these standards will ensure that users of the system will adopt the appropriate naming conventions, talk group usage, and other operational and technical standards that are in use throughout the ARMER system.

SECTION 17. RADIO MAINTENANCE AND SERVICE

Northfield Hospital + Clinics has established plans and procedures with Motorola or its local service entity for service and maintenance of the radio equipment currently being used and proposed in this plan. Northfield Hospital + Clinics will continue to work with Motorola and its local Service Shops for radio repair and tuning. The radio shop contracted for repair and service is:

Ancom Communications
1800 Cliff Rd E # 17
Burnsville, MN 55337



SECTION 18. SYSTEM MAINTENANCE

Northfield Hospital + Clinics plans to manage all aspects of its radio and talkgroup management whereas today this is managed by the M Health Fairview radio system administrator.

Northfield Hospital + Clinics will designate a non-NH + C radio system administrator that will manage radio programming and radio level maintenance. This administrator will comply with ARMER Standard LMR-07 (Agency Maintenance) and LMR-27 (System Maintenance-Programming and Qualifications) to protect the overall functionality and integrity of the system for all users.

Ancom Communications will provide system-level service for all matters that involve Provisioning Manager. A select quantity of Ancom Communications technicians have been trained and certified as Level 2 Radio System Administrators per ARMER standard LMR-28 (System Administrators Definition and Minimum Training Requirements).

Ancom Communications
1800 Cliff Rd E # 17
Burnsville, MN 55337
(952) 808-0033

SECTION 19. CHANGE MANAGEMENT

Northfield Hospital + Clinics will follow established procedures to seek approval of all relevant Committees and Boards prior to making any changes to the provisions outlined in this plan request.



ADDENDUM A. NORTHFIELD HOSPITAL + CLINICS EMERGENCY PREPAREDNESS PLAN



Initiating Department: Safety
Effective Date: January, 1999
Date Reviewed: Revised: September 2002; April, 2003, June, 2004; October, 2005)
Revision Date: November 2016, July 2017, July 2018, June 2022
Policy Title: Emergency Management Policy

ORGANIZATION POLICY

POLICY STATEMENT:

The Emergency Management Policy establishes and maintains effective systems to manage disasters and other emergencies that disrupt the organization's ability to provide care and treatment. This plan incorporates the National Incident Management System Framework (NIMS) and the Hospital Incident Command System (HICS). This plan outlines actions to be taken to mitigate, prepare for, respond to and recover from the effects of any disaster or emergency.

Workforce have been oriented to and educated about the environment and possess the knowledge and skills to perform their responsibilities.

This policy covers all CMS Concept of Participation licensed/certified locations and is an overarching document covering all NH+C entities. (Home Care, Hospice, Hospital, Long Term Care Center, Rehabilitation Northfield and Lakeville, Orthopedics Northfield and Faribault, Lakeville and Northfield Urgent Care, and the Kenyon, Lonsdale, Farmington, Lakeville, Northfield Medical Clinics.

PROCEDURE:

Ensure a safe and secure environment for patients, residents, staff, visitors, and workforce members while safeguarding the facility in the event of a disaster or emergency.

Mitigate

- Regularly conduct a hazard vulnerability analysis to identify potential emergencies that could affect the need for the organization's services, or its ability to provide those services. Establish priorities among these potential emergencies.
- Limit the number of hazardous materials in storage
- Eliminate products that are no longer necessary by disposing of them properly.
- Store products in approved, labeled containers in areas that are dry and free from heat or fire.
 - Routinely test utility systems to ensure backup.
- Orient and train staff regarding their roles and responsibilities
- Train staff to recognize specific types of emergencies (symptoms caused by agents that may be used in chemical or bioterrorist attacks).



- Identify and test an alternative means of meeting essential building utility needs.
- Define backup internal and external communication systems in the event of failure during emergencies.
- Develop systems to notify personnel when emergency response measures are initiated.
- Orient and train staff on the information and skills required to perform assigned duties during emergencies
- Develop a cross-training/staffing plan to cover all necessary staff positions under emergency conditions
- Initiate and evaluate emergency drills
- Define a command structure within the organization for responding to and recovering from emergencies that links with the command structure in the community.
- Define a plan to obtain adequate food, equipment, and supplies to be self-sustaining for 96 hours.

Respond

- If there is a Presidential Disaster Declaration and the Health and Human Services Secretary issues a 1135 Waiver, Northfield Hospital + Clinics will contact the Regional CMS Office at Phone: 312-886-6432 and Email: ROCHISC@cms.hhs.gov and copy the Minnesota Department of Health at Email: health.fpc-licensing@state.mn.us to request inclusion under the waiver(s).
 - Communicate with the community command structure about the Northfield Hospital + Clinics status.
 - Determine the need to modify or discontinue services.
 - Evacuate the facility when the environment cannot support adequate patient care and treatment.
 - Establish an alternate care site(s) that has the capability to meet the clinical needs of patients when the environment cannot support adequate patient care or workforce safety.
 - Establish procedures that address:
 - Transportation of patients, staff, and equipment to the alternate care site.
 - The transfer of patient necessities (for example, medications, medical records) to and from the alternate care site.
 - Patient tracking to and from the alternate care site.
 - Inter-facility communication between the organization and the alternate care site.
 - Define alternate roles and responsibilities for personnel during emergencies
 - Initiate call trees to ensure appropriate staffing during an emergency/disaster. (use of the Mass Notification System)
 - Secure staff as needed from the labor pool for delivery of patient care
-



- Define the reporting structure within the organization's command structure.
- Offer childcare on-site or at a nearby location.
- Implement appropriate decontamination and isolation procedures if needed.
- Reduce water use when water supplies are limited. Facilities may need to reduce bedside water, and regular bathing. Hydration and hygiene needs must be met, but usual procedures can be modified.
- Secure access and control traffic and crowds as necessary.
- Communicate with the news media.

Recovery

- Re-establish usual operations following an emergency.
- Evaluate physical plant, surroundings and availability of resources (water, electricity, etc...)
- Return/relocate/repatriate patients/residents to the hospital or Long Term Care Center or transferred to alternate facility.
- Provide for incident stress debriefing as necessary for workforce and assist with the coordination of community based support for the wider psychological footprint of the disaster.

Emergency Management Drills

- Drills are conducted regularly to test emergency management.
 - Orange Alert (disaster with patient influx) drills are conducted regularly but may be substituted by a real world event.
- a. At least one drill or real world event yearly includes an influx of volunteer or simulated paper patients. A drill may be deferred when a real Orange Alert has been experienced by the facility in the course of the year.
 - b. At least one drill or real world event yearly includes a community-wide practice drill relevant to the priority emergencies identified by the organization's hazard vulnerability analysis, that assesses communication, coordination, and the effectiveness of the organization's and surrounding community's command centers using NIMS principles in the NH+C HICS. A tabletop drill is an acceptable substitute for community-wide disaster drills.

Orientation, Education and Training

Orientation and education programs are provided for all personnel, including licensed independent practitioners, who participate in implementing the emergency management plan. Plans/responsibilities are reviewed during drills and at mandatory education sessions annually.

Education addresses, as appropriate to the individual:

- specific roles and responsibilities during Hospital Incident Command System activations.
- the information and skills required to perform assigned duties during HICS activations.



Evaluation

The Emergency Management Task Force (EMTF) (membership is from each CMS licensed / certified business division) will review the Emergency Management Policy to assess the program's objectives, scope, and effectiveness, making changes as necessary and appropriate in the plan. The Hazard Vulnerability Analysis will be updated and reprioritized as necessary. Performance measures, orientation, education and training programs will change based on the results of the evaluations.

BACKGROUND / GENERAL INFORMATION

1. Effectively respond to a variety of disasters or emergencies (through simulation drills) that affect the environment of care.
2. Define and integrate the organization's role with that of community-wide emergency management efforts, integrating NIMS policies and principles.

REFERENCES / SUPPORTING Documents / Annexes:

- 1. Hospital Incident Command System (HICS)
- 2. HICS Assignment Sheets and Organization Chart
- 3. Disaster Privileging Policy
- 4. Orange Alert
- 5. Severe Weather Precautions
- 6. Shelter In Place
- 7. Evaluation Plan
- 8. Bioterrorism Response Plan
- 9. Continuity of Operations Plan (COOP)
- 10. Mass Notification System
- 11. Closed Point of Distribution
- 12. Code Pink / Missing Person
- 13. Fire Alarm
- 14. Hostage
- 15. Lockdown Internal Threat
- 16. Lockdown External Threat
- 17. Mass Fatality
- 18. Metro Region Surge Plan
- 19. Visitor Pass System
- 20. Crisis Communications Plan
- 21. EMP and HICS Education Plan

REVIEW FREQUENCY: Annual

Date approved: _____	DocuSigned by: _____	Signature of Chairperson of the Clinic Executive Committee (if applicable): _____
Department Leader: _____	Andrew Hunk _____	Board of Directors (if applicable): _____
Administration: _____	Jerry Ehn _____	_____
Signature of Chairperson of the Executive Committee (if applicable): _____	_____	_____



ADDENDUM B. NORTHFIELD HOSPITAL + CLINICS RADIO SUBSCRIBERS

Inventory Form Radio August 1, 2022

Northfield Hospital + Clinics Subscriber List

On Target Training and Consulting, LLC

	Radio Type	Radio Make	Radio Model	Serial Number	Current Radio Alias	Current System Alias	New Radio Alias	New System Alias	Current Unit ID	Current ID Owner	NEW Unit ID	NEW ID Owner	Assigned User
1	Portable	Motorola	APX6000Li	481CXK2887	NF EMS TAC 301	EMSMF NF301	NF-EDWARDS	EMSNF-301 P	107113	M Health	TBD	NH+C	Edwards
2	Portable	Motorola	APX6000Li	755CVD0050	303 Johnson	EMSAL-NF-303-P	NF-JOHNSON	EMSNF-303 P	105795	Allina	TBD	NH+C	Johnson
3	Portable	Motorola	APX6000Li	755CVD0042	302 DeGroot	EMSAL-NF-302-P	NF-DEGROOT	EMSNF-302 P	105660	Allina	TBD	NH+C	DeGroot
4	Portable	Motorola	APX6000Li	755CVD0053	304 Matek	EMSAL-NF-304-P	NF-ERICKSON	EMSNF-304 P	105656	Allina	TBD	NH+C	Erickson
5	Portable	Motorola	APX6000Li	755CVD0041	306 Fischer	EMSAL-NH-304	NF-SPARE-1P	EMSNF-SPARE-1 P	105655	Allina	TBD	NH+C	Spare portable
6	Portable	Motorola	APX6000Li	755CVD0043	305 Yurek	EMSAL-NH-305	NF-YUREK	EMSNF-305 P	105792	Allina	TBD	NH+C	Yurek
7	Portable	Motorola	APX6000Li	755CVD0044	NF HOSP P	EMSAL-NFLD-ED-NF	NF-HOSP-ED	EMHNF-ED P	106098	Allina	TBD	NH+C	Emergency Department
8	Portable	Motorola	APX6000Li	755CVD0054	330-1 Portable	EMSAL-NF-330-1	NF-330-1-P	EMSNF-330-1 P	105793	Allina	TBD	NH+C	330 shift
9	Portable	Motorola	APX6000Li	755CVD0048	330-2 Portable	EMSAL-NF-330-2	NF-330-2-P	EMSNF-330-2 P	105704	Allina	TBD	NH+C	330 shift
10	Portable	Motorola	APX6000Li	755CVD0051	331-1 Portable	EMSAL-NF-331-1	NF-331-1-P	EMSNF-331-1 P	105953	Allina	TBD	NH+C	331 shift
11	Portable	Motorola	APX6000Li	755CVD0056	331-2 Portable	EMSAL-NF-331-2	NF-331-2-P	EMSNF-331-2 P	105952	Allina	TBD	NH+C	331 shift
12	Portable	Motorola	APX6000Li	755CVD0047	332-1 Portable	EMSAL-NF-332-1	NF-332-1-P	EMSNF-332-1 P	106097	Allina	TBD	NH+C	332 shift
13	Portable	Motorola	APX6000Li	755CVD0055	332-2 Portable	EMSAL-NF-332-2	NF-332-2-P	EMSNF-332-2 P	105658	Allina	TBD	NH+C	332 shift
14	Portable	Motorola	APX6000Li	755CVD0045	335-1 Portable	EMSAL-NF-335-1	NF-335-1-P	EMSNF-335-1 P	105661	Allina	TBD	NH+C	335 shift
15	Portable	Motorola	APX6000Li	755CVD0052	335-2 Portable	EMSAL-NF-335-2	NF-335-2-P	EMSNF-335-2 P	105703	Allina	TBD	NH+C	335 shift
16	Portable	Motorola	APX6000Li	755CVD0046	336-1 Portable	EMSAL-NF-336-1	NF-336-1-P	EMSNF-336-1 P	105794	Allina	TBD	NH+C	336 shift
17	Portable	Motorola	APX6000Li	755CVD0049	336-2 Portable	EMSAL-NF-336-2	NF-336-2-P	EMSNF-336-2 P	105657	Allina	TBD	NH+C	336 shift
18	Mobile	Motorola	APX6500	527CRT6982	NF 316 M	EMSAL-NF-M316a	NF-321-M	EMSNF-321 M	105947	Allina	TBD	NH+C	Ambulance 321
19	Mobile	Motorola	APX6500	524CSM2001	NF 317 M	EMSAL-NF-M317a	NF-317-M	EMSNF-317 M	105967	Allina	TBD	NH+C	Ambulance 317
20	Mobile	Motorola	APX6500	527CTM4543	NF 318 M	EMSAL-NF-M318a	NF-318-M	EMSNF-318 M	106061	Allina	TBD	NH+C	Ambulance 318
21	Mobile	Motorola	APX6500	514CNH0463	NF 423 M	EMSAL-M423	NF-319-M	EMSNF-319 M	105655	Allina	TBD	NH+C	Ambulance 319
22	Mobile	Motorola	XTL2500	514CHF1257	NF 315 M	EMSAL-NF-M315	NF-320-M	EMSNF-320 M	105765	Allina	TBD	NH+C	Ambulance 320
23	Mobile	Motorola	APX6500	527CUR1054	NF 301 M	EMSAL-NF-301-M	NF-301-M	EMSNF-301 M	106214	Allina	TBD	NH+C	Squad 302
24	Mobile	Motorola	APX6500			EMSAL-NF-M-310a	NF-310-M	EMSNF-310 M	105948	Allina	TBD	NH+C	Squad 310
25	Portable	Motorola	APX6000Li	755CVD0057	NF EMS Spare	EMSAL-NF-301-P	NF-SPARE-2P	EMSNF-SPARE-2 P	106096	Allina	TBD	NH+C	Spare portable
26	Portable	Motorola	APX6000Li	755CVD0058	NF EMS Spare	EMSAL-NF-SPARE1	NF-SPARE-3P	EMSNF-SPARE-3 P	105705	Allina	TBD	NH+C	Spare portable
27	Portable	Motorola	XTS2500	205CJD1057			NF-CACHE-1-P	EMSNF-CACHE1 P			TBD	NH+C	Spare portable
28	Portable	Motorola	XTS2500	205CJD1056			NF-CACHE-2-P	EMSNF-CACHE2 P			TBD	NH+C	Spare portable
29	Portable	Motorola	XTS2500	205CDS0363			NF-CACHE-3-P	EMSNF-CACHE3 P			TBD	NH+C	Spare portable
30	Portable	Motorola	XTS2500	205CDS0320			NF-CACHE-4-P	EMSNF-CACHE4 P			TBD	NH+C	Spare portable
31	Portable	Motorola	XTS2500	205CDS0287			NF-CACHE-5-P	EMSNF-CACHE5 P			TBD	NH+C	Spare portable
32	Portable	Motorola	XTS2500	205CDS0352			NF-CACHE-6-P	EMSNF-CACHE6 P	105659	Allina	TBD	NH+C	Spare portable
33	Portable	Motorola	XTS2500	205CLB0629			NF-CACHE-7-P	EMSNF-CACHE7 P	105862	Allina			Spare portable
34	Portable	Motorola	XTS2500	205CDS0369			NF-CACHE-8-P	EMSNF-CACHE8 P					Spare portable
35	Portable	Motorola	XTS2500	205CDS0289			NF-CACHE-9-P	EMSNF-CACHE9 P					Spare portable
36	Portable	Motorola	XTS2500	205CDS0317			NFH-SEC-1-P	EMHNF-SEC-1 P					Hosp. security
37	Portable	Motorola	XTS2500	205CLB0631			NFH-SEC-2-P	EMHNF-SEC-2 P					Hosp. security
38	Portable	Motorola	XTS2500	205CNZ2449			NFH-SEC-3-P	EMHNF-SEC-3 P					Hosp. security
39	Mobile	Motorola	XTL2500	514CHF1256			NFH-SPARE-1-M	EMSNF-SPARE-1 M					Spare mobile
40	Mobile	Motorola	XTL2500				NFH-EDUC-1-M	EMSNF-EDUC-1 M					Training ambulance
41	Mobile	Motorola	XTL2500				NFH-EDUC-2-M	EMSNF-EDUC-2 M					Expedition



**Metro Mobility Usage
(Hours:Mins:Secs)
2022**

Month	Anoka (Lino					North	Hennepin	Overall
	City Center	Lakes)	Dakota	Norwood	Hastings	Branch	West	
January	53:36:06	27:47:09	28:13:09	9:57:03	35:21:22		17:49:33	172:44:22
February	57:03:36	30:50:28	24:58:48	10:50:12	41:05:35		13:14:11	178:02:50
March	51:26:59	28:23:43	24:35:46	9:22:37	35:08:05		14:54:53	163:52:03
April	56:28:46	30:31:56	30:20:01	10:08:22	42:08:20		13:00:58	182:38:23
May	55:52:30	26:23:05	30:59:34	9:06:27	39:06:26		10:53:58	172:22:00
June	40:12:15	17:55:01	16:37:14	8:14:16	27:34:40		11:43:55	122:17:21
July	41:38:18	19:08:35	19:32:57	8:46:42	25:29:45		10:25:32	125:01:49
August	50:04:22	22:09:33	22:05:02	9:11:56	34:49:54		13:47:52	152:08:39
September								
October								
November								
December								

Difference
since Jan.

12 656:57:50 385:58:45 298:06:15 222:53:22 265:34:15 0:26:46 152:56:51 1982:54:04

Target 150:00:00 75:00:00 75:00:00 75:00:00 75:00:00 0:00:00 75:00:00 525:00:00



Scott County Sheriff's Office

LUKE W. HENNEN, SHERIFF

September 15, 2022

To: MESB TOC, Jake Thompson Chair

CC: Tracey Fredrick

Change Management

Good morning,

With the opening of Change Management, I would like to propose and discuss a change to the METCOM talkgroup.

My proposal would be to change METCOM from a clear talkgroup to encrypted. Some discussion would be needed on how to change this talkgroup if it's moved to DES-OFB encryption now and potentially moved to AES encryption in the future.

With the usage of this talkgroup Metro wide between PSAP's and the potential for critical information being communicated, I believe it would be of the best interest for the Metro region to move this talkgroup to secure or encrypted.

Sincerely,
Nick Schatz
Radio System Administrator
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nschatz@co.scott.mn.us