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Record of Changes

All potential changes will be reviewed and, if accepted, incorporated into the administrative plan during the next update. All changes will be annotated on the table below. All suggestions along with supporting documentation, as applicable, shall be submitted to Jeremy Utter, DHSEM Logistics Section Chief at jeremy.utter@state.co.us.

<table>
<thead>
<tr>
<th>Date</th>
<th>Change</th>
<th>Page – Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/07/17</td>
<td>Added Recognition of Prior Learning (RPPL) process and applicable form.</td>
<td>Pg. 6 – RPL Section</td>
</tr>
<tr>
<td>02/07/17</td>
<td>Added signature line to Initial taskbook &amp; taskbook recertification submittal checklist</td>
<td>Appendix A and B</td>
</tr>
<tr>
<td>02/07/17</td>
<td>Added “Preferred, not required” to Initial certification checklist regarding Time cards-CTR and OF-288’s.</td>
<td>Appendix A</td>
</tr>
<tr>
<td>02/07/17</td>
<td>Added clarification to team representative to submit PTB to Team Training Officer or Team designated point of contact.</td>
<td>Pg. 5</td>
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</table>
Background
The State of Colorado adopted the original Interstate Incident Management Team Qualifications System Guide (IIMTQS Guide) in July 2015 with the signatures of both the Executive Director of the Colorado Department of Public Safety and the Director of the Colorado Division of Homeland Security and Emergency Management. Subsequent IIMTQS updates are automatically accepted with amendments as appropriate. Current documentation, processes, and the forms may be found at https://www.colorado.gov/pacific/dhsem/imt-task-books.

Scope
This administrative plan addresses State review of All-Hazard Incident Management Team (AHIMT) task books, specifically describing IIMTQS Guide Steps 4 – Review and Evaluation of Qualification Document and 5 - Certification. Review of EOC task books is a separate process not included in this document.

Authority
All-Hazards Incident Management Team Association (AHIMTA), Interstate Incident Management Team Qualifications System Guide (IIMTQS), originally adopted by the Colorado Department of Public Safety in July 2015. The Colorado Division of Homeland Security and Emergency Management is the agency designated to certify all-hazards IMT positions.

Purpose
Per the IIMTQS Guide, the State is required to review task books for substantiating documentation and certification. In an effort to perform this function more efficiently and effectively, the State relies on both state and non-state personnel. A Task Book Review Panel (TBRP) fulfills the State Qualifications Review Committee (SQRC) function as recommended in the All-Hazards Incident Management Teams Association (AHIMTA) Interstate Incident Management Teams Qualification System (IIMTQS).

This document was developed to clarify the requirements, processes, and forms to be used to obtain certification by the State of Colorado for an All-Hazards Position Task Book (AHPTB).

This document will be reviewed, at a minimum, each time the IIMTQS is updated or when deemed necessary by the OEM Director.
Task Book Review Panel

Organizational Structure

CO OEM Director (or Designee)
   ↓
DHSEM Logistics Section Chief
   ↓
Task Book Review Panel

At a minimum, the TBRP is comprised of reviewers from DHSEM, DFPC, and IMTs. Other SMEs will be invited as necessary.

Position Task Book Submission Requirements

*Individuals using task books initiated prior to January 1, 2017 that are still current will be grandfathered in. All task books initiated after January 1, 2017 must be the State adopted AHIMTA task books.*

Specific information and details pertaining to the requirements for completion of All-Hazard position task books are contained in the Colorado adopted IIMTQS as posted with amendments to the DHSEM website (https://www.colorado.gov/pacific/dhsem/imt-task-books).

Prior to submission of a PTB, the applicant shall ensure that all requirements as stated in the IIMTQS Position Descriptions (Section XV) and in the AHIMTA Position-specific task books are complete. *PTBs not having a Final Evaluator’s Verification signature will be returned.*

Current AHIMT members shall submit their completed task book and supporting documentation to their IMT Training Officer or team designated point of contact for review and forwarding to the Task Book Review Panel. Individuals not currently affiliated with an IMT shall submit their completed AHPTB and documentation to the below email or physical address.

- Applicants must provide an electronic copy via email *(preferred)*, flash drive or CD. Only digital PDF copies of task books will be accepted.

- **The Subject Line of the email MUST READ:** PTB Submission – Applicant Name
  o Electronic copies shall be sent to: DHSEM_IMPTPB@state.co.us

- If preferred, an electronic storage device containing the PTB may be mailed to:
  
  DHSEM
  
  ATTN: Logistics - AHPTB Submission
  
  9195 E. Mineral Ave. Suite 200, Centennial, CO 80112
PTB Review Panel Process
Within 5 days the candidate will be notified that his/her PTB certification packet has been received and logged in for review by the Panel. The Certification and Recertification submittal checklist will serve as a guide to determine that the minimum requirements have been met and to serve as a summary of the candidate’s PTB review process.

Task Book Review Panel Meetings
The panel will meet midmonth the second month of each quarter (February, May, August, November). All full applicant submittal packages are required to be submitted electronically by the 1st of the given month (February 1, May 1, August 1, November 1) and will be distributed to the panelists for review prior to the panel meeting. Meetings may be canceled if there is no workload for that quarter. Within 7 days of review the candidate will be notified of the disposition of their certification request which will be one of the following:

Approved – signed by the Director of DHSEM with certification issued.

Pending – additional information or clarification is needed. Applicants and/or the final evaluator must respond to the request within 14 business days of the request for additional information.

Not approved – with an explanation of deficiencies and additional actions needed.

Position Recertification
Position recertification is required every 5 years. The requirements to recertify are summarized in IIMTQS section VIII. The IMT Position recertification form and documentation requirements are posted on the DHSEM website. Each individual is responsible for submitting their recertification packet the quarter prior to their 5 year expiration date.

Recognition of Prior Learning
If a candidate does not have a taskbook for submission, however they are seeking qualification, they shall follow the RPL process as outlined in the IIMTQS. A panel comprised of not less than 2 fully qualified individuals will be convened to review the candidate’s submitted packet.

Appeals Process
Should a candidate disagree with the Task Book Review Panel’s decision regarding certification, the candidate shall write a letter and provide relevant supporting documentation to their position. Appeals must be submitted via email no later than 30 days after receipt of the review Panel’s decision to DHSEM_IMTPTB@state.co.us The appeals Panel will consist of the DHSEM IMT Training Liaison, DHSEM Logistics Chief, the DHSEM Operations Section Chief, and the CO OEM Director. The decision is final.
## Appendix A: List of Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHIMT</td>
<td>All-Hazards Incident Management Team</td>
</tr>
<tr>
<td>AHIMTA</td>
<td>All-Hazards Incident Management Team Association</td>
</tr>
<tr>
<td>AHPTB</td>
<td>All-Hazard Position Task Book</td>
</tr>
<tr>
<td>CO OEM</td>
<td>Colorado Office of Emergency Management</td>
</tr>
<tr>
<td>DHSEM</td>
<td>Colorado Division of Homeland Security &amp; Emergency Management</td>
</tr>
<tr>
<td>DFPC</td>
<td>Colorado Division of Fire Prevention and Control</td>
</tr>
<tr>
<td>ICS</td>
<td>Incident Command System</td>
</tr>
<tr>
<td>IIMTQS</td>
<td>Interstate Incident Management Team Qualification System</td>
</tr>
<tr>
<td>IMT</td>
<td>Incident Management Team</td>
</tr>
<tr>
<td>PTB</td>
<td>Position Task Book</td>
</tr>
<tr>
<td>SME</td>
<td>Subject Matter Expert</td>
</tr>
<tr>
<td>TBRP</td>
<td>Task Book Review Panel</td>
</tr>
</tbody>
</table>
Appendix B: AHIMT IIMTQS

The current AHIMT IIMTQS document can be found on the DHSEM website at:

https://www.colorado.gov/pacific/dhsem/imt-task-books
Appendix C: Forms

Attachment A: Initial Task Book Certification Submittal Checklist (1 page)

Attachment B: Task Book Recertification Submittal Checklist (1 page)

Attachment C: IIMTQS Appendix D Recognition of Prior Learning (RPL) (1 page)
COLORADO ALL HAZARD INCIDENT MANAGEMENT SYSTEM
Initial Task Book Certification Submittal Checklist

Date Submitted: ____________

Candidate Name: _________________________  Position Applied for: ________________

Phone #: __________________________   Email: __________________________________

1. Task book Information
   - “Task Book Assigned To” completed
   - “Task Book Initiated By” completed
   - “Location and Date Task Book was Initiated” completed
   - “Agency Head Recommendation” signed
   - “Final Evaluator’s Verification” signed  *Final Evaluator must be currently qualified at the same level or higher of the task book being evaluated.*
   - All tasks signed off
   - Evaluation Record (back of position task book) fully completed

2. Copies of Required Certifications
   - Position Specific training for the taskbook you are submitting
     - IS-700
     - IS-800
     - ICS-100
     - ICS-200
     - ICS-300
     - ICS-400
   - Haz-Mat Training, List training you have had: _________________________

3. Resume, include professional or volunteer history related to Incident Management

4. Additional Documentation
   - Incident Action Plans; 1 for each incident you cite that shows your name and position
   - Incident Performance Evaluations, 1 per incident you cite
   - Time cards – CTR - OF-288’s, minimum 1 per incident you cite *(preferred, not mandatory)*
   - Incident / Exercise / Planned-Events Experience Summary to include kind, type, dates, complexity, and # of Ops. Periods

Submit the above materials as PDF files to: DHSEM_IMTPTB@state.co.us

Team Point of Contact: ________________________________

Published February 8, 2017
COLORADO ALL HAZARD INCIDENT MANAGEMENT SYSTEM
Task Book Re-Certification Submittal Checklist

Date Submitted: ____________

Candidate Name: ____________________   Position Applied for: __________________
Phone #: __________________________   Email: __________________________________

1. Copy of your most recent PTB certification

2. Additional Documentation
   Only 1 qualifying incident (Type 3 or higher) in the previous 5-year period is required for renewal, additional incidents and documentation may be required if more than 5 years have elapsed since the last application/renewal. Applicant must have at least 1 qualifying incident within any 5-year period, up to the date of this application submission.

☐ Incident Action Plans; 1 for each incident you cite that shows your name and position
☐ Incident Performance Evaluations, 1 per incident you cite
☐ Time cards – CTR - OF-288’s, minimum 1 per incident you cite
☐ Incident Experience Summary to include kind, type, dates, complexity, and # of Ops. Periods

Submit the above materials as PDF files to: DHSEM_IMPTTB@state.co.us

Team Point of Contact: __________________________

Published February 8, 2017
Appendix D: Recognition of Prior Learning Self-Assessment & Portfolio Worksheet

SECTION I: CONTACT INFORMATION:

ICS Position applying for: __________________________________________________________

Name (last, first, middle initial) __________________________________________________

Email address: Primary ___________________________________________________________

phone: Secondary phone: __________________________________________________________

Street Address 1: _________________________________________________________________

Street Address 2: City, State, Zip __________________________________________________

Employer: _____________________________________________________________________

Employer Contact name: __________________________________________________________

Employer contact phone: Current position/title: ______________________________________

SECTION II: INCIDENT MANAGEMENT TEAM AFFILIATION:

<table>
<thead>
<tr>
<th>Are you, or have you been qualified* in any specific Incident Management Team position?</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
</tr>
<tr>
<td><strong>“Qualified” specifically means a recognized position-specific qualification from an established organization such as, NWCG, USCG, or another State with an active qualifying program such as AHIMTA-IIMTQS.</strong></td>
</tr>
</tbody>
</table>

If yes, which position(s)?

<table>
<thead>
<tr>
<th>Are you currently affiliated with an established Incident Management Team?</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
</tr>
</tbody>
</table>

If yes, indicate the team name and location: