

# Task Book

for the Position of

## Strike Team Leader Mine Rescue Mine & Tunnel STLMR



Colorado Front Range Mine Rescue - CFRMR  
Rescue Station Location at The Edgar Mine  
365 8<sup>th</sup> Avenue, Idaho Springs, Colorado 80452

Mailing Address:  
Post Office Box 475  
Idaho Springs, Colorado 80452

Version Issue Date: Revision 3 April 2023

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| Rev. # | Date        | Comment  |
|--------|-------------|--|
| 0      | Dec 2018    | Initial Issue  |
| 1      | Aug 4 2019  | Logo Changed to version with Flame Reflection in Apparatus Mask  |
| 2      | Jan 13 2020 | Removed "Not Coal" from Document Title   |
| 3      | Apr 08 2023 | Removed requirement for EMR registration, successful class completion is only requirement, and state registration in no longer required. |
|        |             |  |



# Strike Team Leader Mine Rescue - Mine & Tunnel (STLMR)

## Position Task Book Assigned to

|                |
|----------------|
| Trainee's Name |
| Duty Station   |
| Phone Number   |
| E-Mail         |

## Was initiated by

|                 |
|-----------------|
| Official's Name |
| Title           |
| Duty Station    |
| Phone Number    |
| E-Mail          |

## Was initiated at

|          |
|----------|
| Location |
| Date     |

The qualification and training of; Mine Rescue Technicians, Mine Rescue Stations and Mine Rescue Teams, are defined by federal regulations issued by The Mine Safety Health Administration (MSHA). The MRT2 task book is intended to document the existing Mine Rescue Team Member MSHA training requirements into a National Incident Management System (NIMS) compliant format for the position of Mine Rescue Technician 2 (MRT2). The MRT1 task book builds upon MRT2 requirements by including additional training. This task book for Strike Team Leader Mine Rescue (STLMR) incorporates HAZMAT / ICS training requirements for this leadership role, as well as Rope Rescue (NFPA 1006 chapter 5) training and Emergency Medical Responder (EMR) training. The Task Force Leader Mine Rescue (TFLMR) is under development. Three years of continuous service as a member of a mine rescue team ( while maintaining minimal training hours and time under oxygen requirements ) and achievement of MRT1 or MRT2 is required to initiate this task book.

An individual who serves in an STLMR capacity must also maintain currency with all MSHA CFR Part 49 requirements, including but not limited to: Initial safety training and annual refresher required of all miners, work in an underground mine for at least one of the last 5 years, Initial 20-hour Oxygen Breather Training, Complete MSHA Mine Rescue Training curriculum, maintain minimum of 96 training hours per year, attend at least two MSHA defined Mine Emergency Response Development (MERD) exercises a year and maintain training time wearing oxygen rebreather.



Colorado Front Range Mine Rescue, Inc. is a non-profit (501(c)3) volunteer based organization, unique in its services provided and its membership. Meeting the requirements of 30CFR Part 49, Colorado Front Range Mine Rescue, Inc. ("CFRMR") provides rescue team availability for small mines and mine-related projects in the western United States of America. The team is composed of volunteers who meet at least once per month to train and maintain a full mine rescue station, with at least one (1) team of six (6) Mine Rescue Personnel that meets the rigorous standards specified in the Code of Federal Regulations (30CFR§49) administered by the Mine Safety and Health Administration ("MSHA")

This Position Task Book (PTB) was developed and is owned and maintained by the Colorado Front Range Mine Rescue Team ( CFRMR ) as one of the components of training and availability as a Mine Rescue Team . Any comments, corrections, or suggestions to this PTB should be emailed to: Greg Black, Liaison Officer of CFRMR [GregBlack@GoldenEagleTechnologies.Com](mailto:GregBlack@GoldenEagleTechnologies.Com) ,

## Strike Team Leader Mine Rescue - Mine & Tunnel ( STLMR )

|   |
|---|
| Trainee Name:   |
| <b>FINAL EVALUATOR'S VERIFICATION:</b>  |
| <i>Evaluator; DO NOT complete this unless you are recommending the trainee for certification.</i> |
| I verify all tasks have been performed and are documented with appropriate initials.              |
| I also verify the trainee should be considered for certification in this position.                |
| Evaluator's Signature   |
| Date  |
| Evaluator's Printed Name  |
| Title   |
| Duty Station  |
| Phone Number  |
| E-Mail  |

### **TRAINEE RECORD OF PRE-RESQUISITE REQUIRMENTS**

***Trainee to complete immediately before submittal to Final Evaluator:***

|  |  |
|--|--|
| Trainee Name:  |  |
| Currency as of todays date<br>( Date Month Year )                              |  |
| Time under Oxygen current. 2<br>Hours every other month<br>(signature)         |  |
| Annual Safety Refresher<br>(Month/Year of last refresher)                      |  |
| Date of last annual MSHA<br>fitness determination by<br>Physician (Month/Year) |  |

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***CERTIFYING OFFICIAL***

|  |
|--|
| Trainee Name:  |
| Has met all requirements for qualification in this position is certified for the position. |
| Official's Signature:  |
| Date   |
| Official's Printed Name  |
| Title  |
| Duty Station   |
| Phone Number   |
| Email  |

## NATIONAL INCIDENT MANAGEMENT SYSTEM (NIMS)

### INCIDENT COMMAND SYSTEM (ICS) POSITION TASK BOOKS (PTBs)

Position Task Books (PTBs) are designed to be used by any individual (trainee) interested in becoming certified under the National Incident Management System (NIMS). The PTB's are intended to be used to document experiences that indicate successful completion of tasks specific to an Incident Command System (ICS) position. The performance requirements for each position are associated with core ICS competencies, behaviors and tasks as suggested to the Federal Emergency Management Agency (FEMA) by a multi-disciplined, highly experienced expert panel.

Trainees are evaluated during this process by qualified evaluators, and the trainee's performance is documented in the PTB for each task by the evaluator's initials and date of completion. An Evaluation Record will be completed by all evaluators documenting the trainee's progress after each evaluation opportunity.

Successful performance of all tasks, as observed and recorded by an evaluator, will result in a recommendation to the "authority having jurisdiction" (of the trainee), that the trainee be certified in that position. Evaluation and confirmation of the trainee's performance while completing all tasks will normally require more than one training assignment and several different evaluators. Incidents lasting several days may involve multiple evaluators. Tasks may be evaluated on incidents, simulation/tabletop exercise, planned events, in training and HSEEP compliant functional or full-scale exercises and in other work situations as long as there is a qualified evaluator.

It is important performances be critically evaluated and accurately recorded by each evaluator. All tasks must be evaluated.

The Interstate Incident Management Team Qualifications System [IIMTQS] Guide lists the definitions for trainee, evaluator, training officer and authority having jurisdiction.

#### ***Responsibilities:***

##### **1. Authority having jurisdiction (AHJ):**

- Select trainees based on the needs of their organization or to fulfill their obligations to support mine operations for small mines and mine-related projects, or other Mutual Aid agreements.
- Provide opportunities for evaluation and/or making the trainee available for evaluation.

##### **2. Training Officer:**

- Providing the correct version of the PTB to the individual in order to document 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 incidents or situations where the trainee may have evaluation opportunities.
- Identifying and assigning an evaluator who can provide a positive experience for the trainee, when the evaluation opportunity is within the AHJ's jurisdiction.
- Receiving and filing documentation from the assignment.

### 3. **The Individual/ Trainee:**

- Reviewing and understanding instructions in the PTB.
- Identifying desired objectives/goals whenever an opportunity for evaluation is recognized.
- Providing background information to an evaluator.
- Assuring the evaluation record is complete.
- Completing all tasks for an assigned position within the timeframe allowed for that position. All tasks with an approval older than the allowed timeframe must be reevaluated.
- Notifying the local AHJ /training officer when the PTB is completed, and obtaining the appropriate signature recommending certification.
- Retaining the original PTB and provide a copy of the PTB to the appropriate individual for review by the State Qualification Review Committee (SQRC) (refer to the current edition of the *IIMTQS Guide*).

### 4. **Evaluator(s):**

- Being qualified and proficient in the evaluated position.
- 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 tasks may be performed during the evaluation period.
- Accurately evaluating and recording demonstrated performance of tasks. Dating and initialing completion of the task to indicate satisfactory performance. Unsatisfactory performance should also be documented.
- Evaluate the numbered tasks only. Do not evaluate bullets as they are provided as examples or additional clarification.
- Completing the Evaluation Record found at the end of each PTB.

### 5. **The Final Evaluator:**

- Being qualified and proficient in the position being evaluated.
- Reviewing the trainee's record to ensure completeness.
- Signing the appropriate verification statement found in the beginning of the PTB when all tasks have been initialed.
- Ensuring all tasks have been completed within the three years prior to submission for final approval.

### 6. **Incident Training Specialist**

- Issue the PTB with concurrence of employing/sponsoring organization to document task performance.
- Identify incident evaluation opportunities.
- Assist trainees, coaches/trainers and evaluators with proper documentation.
- Conduct progress reviews and answer questions.
- Ensure that coach/trainer and evaluators are qualified and can make accurate and honest appraisal of the trainee's performance.



## **Position Tasks and Associated Task Book Codes**

The tasks required of a position range in criticality. A Trainee must demonstrate competency at critical tasks while functioning in the target position on an incident. The IIMTQS recognizes that the nature of some less critical tasks may be performed on planned events, in exercises, or in other situations and be sufficient demonstration of competency upon which to base qualification.

Each task in this Position Task Book has at least one code associated with the situation(s) within which the task MUST be completed. Performance of any task in a situation(s) other than that required by the task's code(s) is not valid for qualification.

If more than one code is listed, the task may be completed in any of the situations (e.g. If code **I1**, **I2**, and **O1** are listed, the task may be completed in any of the three situations). The evaluator should circle the evaluation code for which the task was evaluated.

### **Definitions for these codes are:**

**I** = Task must be performed on a mine or tunnel rescue response which meets the following criteria:

- Is managed under the Incident Command System (ICS)
- Requires an Incident Action Plan (IAP) by Mine Management's or OSHA's Incident Commander
- Mine or Tunnel site response for: Unusual event, Personnel Rescue / Recovery, or Rehabilitation.

**O1** = Task can be performed in the following situations:

- Planned Training Exercise
- MSHA Defined MERD ( Mine Emergency Response Development ) Contest
- "Full Scale Exercise" or "Functional Exercise" as defined by HSEEP (see IIMTQS Section XIII. Qualifying Incident, Event, and Exercise Guidelines; Qualifying Exercise Attributes)

**O2** = Task can be performed in any of the following situations if the situation affords the opportunity to evaluate the knowledge/skills associated with the ICS position:

- Planned Event or Exercise not meeting the requirements in O1.
- Training
- Daily Job

There are numerous bullet statements listed under each task. The bullet statements are listed as guidelines/examples for the evaluator to consider when insuring the intent of the task has been completed. Not all bullet statements for a task are required to be completed if the overall intent of the task has been satisfied.

Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.

## Competency: Complete Educational and Experience Requirements

*Description: The qualification and training of; Mine Rescue Technicians, Mine Rescue Stations and Mine Rescue Teams, are defined by federal regulations issued by The Mine Safety Health Administration (MSHA). When this completed PTB is submitted to the certifying official for review, the applicant must self certify that the following training is current: Time under Oxygen current with 2 hours every other month, MSHA Safety Refresher within last year and Physicians Exam with fitness determination within last year.*

| TASK | C<br>O<br>D<br>E | Evaluation<br>Record<br>Number | EVALUATOR:<br>Initial & date upon<br>completion of task |
|------|------------------|--------------------------------|---|
|------|------------------|--------------------------------|---|

**Behavior: Attend and successfully complete the following training and experience requirements**

|  |          |  |  |
|--|----------|--|--|
| <p>1. Complete a minimum of three years of continuous service on a Mine Rescue Team. Time period commences when the following three tasks are met and maintained: a) Complete Initial 20 hour training on rescue breather applied by your team, and maintain a minimum of 2 hours under oxygen every other month, b) Complete Mine Rescue Module training (reference document MSHA 3027 ) , and maintain minimum of 96 hours a year of team training, and c) Maintain annual physical examination per MSHA CFR Part 49.7</p> | O1<br>O2 |  |  |
| <p>2. Complete MRT2 or MRT1 Task Book, that is accepted by your agencies certifying official.</p>  | O1<br>O2 |  |  |
| <p>3. Successfully complete Emergency Medical Responder (EMR) Training. State/National registration is optional</p>  | O1<br>O2 |  |  |
| <p>4. Successfully complete FEMA class: IS-5.A An introduction to Hazardous Materials. On line from Federal Emergency Management Agency (training.FEMA.gov)</p>  | O1<br>O2 |  |  |
| <p>5. Successfully complete formal rope class per National Fire Protection Agency (NFPA) 1006 – Chapter 5 Rope Rescue</p>  | O1<br>O2 |  |  |
| <p>6. For the specific rescue breather applied by your team, achieve advanced manufacturers training in operation and maintenance. Achieve approval by manufacturer to be able to approval maintenance and disinfecting of breathers after use and before storage.</p>   | O1<br>O2 |  |  |

## Competency: Assume Position Responsibilities

*Description: Successfully assume role of Strike Team Leader and initiate position activities at the appropriate time according to the following behaviors.*

| TASK | C<br>O<br>D<br>E | Evaluation<br>Record<br>Number | EVALUATOR:<br>Initial & date upon<br>completion of task |
|------|------------------|--------------------------------|---|
|------|------------------|--------------------------------|---|

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

|   |         |  |  |
|---|---------|--|--|
| 7. Obtain briefing from Mine Management / Agency Administrator / Incident Commander / MERD Administrator.   | I<br>O1 |  |  |
| 8. Obtain Incident Action Plan (IAP). Review and/or share with those under your command.  | I<br>O1 |  |  |
| 9. Review, and if applicable; Request additional resources, logistical support and/or personnel / equipment replacements based on IAP, briefings and discussions. | I<br>O1 |  |  |

**Behavior: Establish organization structure, reporting procedures and chain of command for assigned resources**

|  |         |  |  |
|--|---------|--|--|
| 10. Organize assigned resources into configurations which will meet incident / tactical objectives, while maintaining MSHA CFR Compliance. | I<br>O1 |  |  |
|--|---------|--|--|

**Behavior: Ensure availability, qualification and capabilities of resources to complete assignment.**

|   |               |  |  |
|---|---------------|--|--|
| 11. Inspect assigned resources. Ensure: qualification of personnel, proper personal protective equipment, operating condition of equipment/tools, and maintenance of personnel accountability.  | I<br>O1<br>O2 |  |  |
| 12. Lead meeting for each rescue team: 1) Identify strengths / weaknesses of individuals and their equipment. 2) Determine team positions of: Captain, Gas/Instrumentation, Map / Navigation, Medical, Co-Captain and Fresh Air Base. | I<br>O1       |  |  |
| 13. Lead Team(s) briefing to identify specific hazards. Review steps to assure a safe evolution and completion of teams' goals during operational period.   | I<br>O1       |  |  |

**Behavior: Establish Effective relationships with relevant personnel.**

| TASK   | C<br>O<br>D<br>E | Evaluation<br>Record<br>Number | EVALUATOR:<br>Initial & date upon<br>completion of task |
|--|------------------|--------------------------------|---|
| <b>14.</b> Conducts self in a professional manner. <ul style="list-style-type: none"> <li>• <i>Respectful and courteous to others.</i></li> <li>• <i>Respectful of public and private property</i></li> <li>• <i>Follows Chain of Command</i></li> </ul> | I<br>O1<br>O2    |                                |   |
| <b>15.</b> Establish and maintain positive interpersonal and interagency working relationships.  | I<br>O1          |                                |   |
| <b>16.</b> Ensure assigned personnel have adequate supplies / equipment to meet objectives. Included but not limited to: Food, Water, Lodging, Oxygen Refilling station, PPE, Ground Transportation, and FAB to Team communications.                     | I<br>O1<br>O2    |                                |   |

**Behavior: Modify approach based on evaluation of incident situation**

|   |         |  |  |
|---|---------|--|--|
| <b>17.</b> Maintain situation awareness and adjust tactics as necessary | I<br>O1 |  |  |
|---|---------|--|--|

**Behavior: Understand and comply with ICS Concepts and principles**

|   |         |  |  |
|---|---------|--|--|
| <b>18.</b> Develop the organization structure necessary to manage strike team tasks, while maintaining appropriate span of control. | I<br>O1 |  |  |
| <b>19.</b> Apply ICS by following the chain of command and using appropriate forms and terminology                                  | I<br>O1 |  |  |
| <b>20.</b> Ensure Unit Logs ( ICS form 214 ) are completed and submitted by Fresh Air Base for each team supervised                 | I<br>O1 |  |  |
| <b>21.</b> Ensure understanding of work expectations by multiple resources within chain of command.                                 | I<br>O1 |  |  |
| <b>22.</b> Participate in functional area briefings and conduct unit After Action Reviews (AAR) with subordinates.                  | I<br>O1 |  |  |

## Competency: Lead Assigned Personnel

Description: Influence, guide and direct assigned personnel to accomplish objectives and desired outcomes in a rapidly changing, high-risk environment

| TASK | C<br>O<br>D<br>E | Evaluation<br>Record<br>Number | EVALUATOR:<br>Initial & date upon<br>completion of task |
|------|------------------|--------------------------------|---|
|------|------------------|--------------------------------|---|

### Behavior: Establish Effective relationships with relevant personnel.

|   |         |  |  |
|---|---------|--|--|
| 23. Exhibit principles of duty: proficient technically and as leader, make sound and timely decisions, ensure tasks are understood and accomplished   | I<br>O1 |  |  |
| 24. Exhibit principles of respect: keep subordinates informed, keep subordinates safe, and employ subordinates in accordance with their capabilities. | I<br>O1 |  |  |
| 25. Exhibit principles of integrity: know self and seek improvement, accept responsibility for your actions and set the examples for others to follow | I<br>O1 |  |  |
| 26. Provide of safety and welfare of assigned personnel   | I<br>O1 |  |  |

### Behavior: Emphasize teamwork

|   |         |  |  |
|---|---------|--|--|
| 27. Establish cohesiveness among assigned resources: Provide for open communications, Seek commitment, Set expectations for accountability and focus on team result(s). | I<br>O1 |  |  |
|---|---------|--|--|

### Behavior: Ensure relevant information is exchanged during briefings and debriefings

|   |         |  |  |
|---|---------|--|--|
| 28. Brief and keep subordinates informed and updated      | I<br>O1 |  |  |
| 29. Attend operational briefings and meetings as directed | I<br>O1 |  |  |

| TASK   | C<br>O<br>D<br>E | Evaluation<br>Record<br>Number | EVALUATOR:<br>Initial & date upon<br>completion of task |
|--|------------------|--------------------------------|---|
| 30. Debrief with supervisor after operational period | I<br>01          |                                |   |

**Behavior: Debriefing, Demobilization and Check-out**

|   |               |  |  |
|---|---------------|--|--|
| 31. Through chain of command, determine demobilization timing and procedures. Assure your personnel are knowledgeable of the procedural and timing and deadlines. Be available to assist personnel with this process. | I<br>01<br>02 |  |  |
| 32. Demobilize and check out, according to instructions from incident supervisor.   | I<br>01<br>02 |  |  |

**Evaluation Record # 1**

|   |   |
|---|---|
| TRAINEE NAME  | TRAINEE MIN ( Miner Identification Number ) |
| <b>Evaluator's Information</b>  |   |
| Evaluator's Name:   |   |
| Evaluator's MIN:  |   |
| Incident Position/Assignment  |   |
| Evaluator's Agency/Organization:  |   |
| Evaluator's Office Title:   |   |
| Agency/Organization Address:  |   |
| Phone and Email:  |   |
| Evaluator's Relevant Certification and Qualification System:  |   |
| Name and Location of Exercise/Event/Incident /Training:   |   |
| Type (Team Training, MERD, Incident, Co-training with other agencies :  |   |
| Duration: <i>(inclusive dates in Trainee status and number of operational periods in Trainee status)</i>  |   |
| <p><b>Recommendation:</b> The tasks initialed and 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>_____ The individual has successfully performed all tasks for the position and should be considered for certification.</p> <p>_____ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p>_____ The individual attempted but was not able to successfully complete certain tasks (comments below) or additional guidance is required.</p> <p>_____ The individual is deficient in the performance of tasks for the position and needs further training in both required knowledge and skills prior to additional assignment(s) as a Trainee (comments below).</p> |   |
| Recommendations/Comments <i>(Attach additional comment sheets as needed.):</i>  |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
| Evaluator's Signature:  | Date:                                       |
| Evaluator's Initials:   |   |

**Evaluation Record # 2**

|   |   |
|---|---|
| TRAINEE NAME  | TRAINEE MIN ( Miner Identification Number ) |
| <b>Evaluator's Information</b>  |   |
| Evaluator's Name:   |   |
| Evaluator's MIN:  |   |
| Incident Position/Assignment  |   |
| Evaluator's Agency/Organization:  |   |
| Evaluator's Office Title:   |   |
| Agency/Organization Address:  |   |
| Phone and Email:  |   |
| Evaluator's Relevant Certification and Qualification System:  |   |
| Name and Location of Exercise/Event/Incident /Training:   |   |
| Type (Team Training, MERD, Incident, Co-training with other agencies :  |   |
| Duration: <i>(inclusive dates in Trainee status and number of operational periods in Trainee status)</i>  |   |
| <p><b>Recommendation:</b> The tasks initialed and 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>_____ The individual has successfully performed all tasks for the position and should be considered for certification.</p> <p>_____ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p>_____ The individual attempted but was not able to successfully complete certain tasks (comments below) or additional guidance is required.</p> <p>_____ The individual is deficient in the performance of tasks for the position and needs further training in both required knowledge and skills prior to additional assignment(s) as a Trainee (comments below).</p> |   |
| Recommendations/Comments <i>(Attach additional comment sheets as needed.):</i>  |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
| Evaluator's Signature:  | Date:                                       |
| Evaluator's Initials:   |   |



**Evaluation Record # 3**

|   |   |
|---|---|
| TRAINEE NAME  | TRAINEE MIN ( Miner Identification Number ) |
|   |   |
| <b>Evaluator's Information</b>  |   |
| Evaluator's Name:   |   |
| Evaluator's MIN:  |   |
| Incident Position/Assignment  |   |
| Evaluator's Agency/Organization:  |   |
| Evaluator's Office Title:   |   |
| Agency/Organization Address:  |   |
| Phone and Email:  |   |
| Evaluator's Relevant Certification and Qualification System:  |   |
| Name and Location of Exercise/Event/Incident /Training:   |   |
| Type (Team Training, MERD, Incident, Co-training with other agencies :  |   |
| Duration: <i>(inclusive dates in Trainee status and number of operational periods in Trainee status)</i>  |   |
| <p><b>Recommendation:</b> The tasks initialed and 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>_____ The individual has successfully performed all tasks for the position and should be considered for certification.</p> <p>_____ Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p>_____ The individual attempted but was not able to successfully complete certain tasks (comments below) or additional guidance is required.</p> <p>_____ The individual is deficient in the performance of tasks for the position and needs further training in both required knowledge and skills prior to additional assignment(s) as a Trainee (comments below).</p> |   |
| Recommendations/Comments <i>(Attach additional comment sheets as needed.):</i>  |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
| Evaluator's Signature:  | Date:                                       |
| Evaluator's Initials:   |   |