

# ALL-HAZARDS INCIDENT MANAGEMENT TEAM PROGRAM

## GUIDANCE VERSION 2.0



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**Approved by:**

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Capt. Kevin Sweeney  
EMHSD Commander



## Purpose

The purpose of this program is to strengthen emergency response and preparedness throughout the state and provide guidance for the development, administration, implementation, and sustainment of the State of Michigan All-Hazards Incident Management Team (AHIMT) Program.

This guidance outlines the development of the State of Michigan AHIMT Program. This plan applies to the participating emergency response and support organizations and will augment the current Michigan Emergency Management Plan, standard operating procedures, and the established training and exercise programs.

The mission of the State of Michigan AHIMT Program is to improve state and local emergency incident management capabilities and provide specialized incident management expertise and resources across a variety of emergency response disciplines. These specialized incident management resources will be used to save lives, stabilize incidents, and protect property and the environment. They will be capable of responding to all-hazards incidents, utilizing advanced levels of the Incident Command System (ICS), and providing technical assistance to disaster areas.



## Assumptions

For successful operations to take place, the following key planning assumptions are identified:

1. The Michigan State Police, Emergency Management and Homeland Security Division (MSP/EMHSD) commander will serve as the oversight authority for the State of Michigan AHIMT Program through the Operations Management Section (OMS) Logistics Analyst who serves as the State IMT Coordinator.
2. The State of Michigan AHIMT Program will improve state responses to natural, man-made, and technological incidents with personnel and teams trained to nationally recognized standards.
3. The State of Michigan AHIMT Program will create an AHIMT advisory committee who will establish standards to designate incident management personnel and teams within the state and make recommendations to the State IMT Coordinator and the EMHSD commander.
4. The State of Michigan AHIMT Program will provide guidance and resources to assist entities within Michigan to establish Type IV IMTs. This program will establish a path and process for these teams and their personnel to reach the Type III level and become designated deployable AHIMT resources.
5. Participating AHIMT Certifying Entities (ACEs) will coordinate and certify their own personnel and maintain their contact information and qualifications in the state personnel tracking system.
6. State of Michigan AHIMT Program personnel will operate using the ICS and shall be in alignment with the National Incident Management System. All-Hazards Incident Management Team personnel shall be designated in accordance with the National Qualification System (NQS).
7. The State of Michigan AHIMT Program consists of recognized and properly designated Type III AHIMT personnel and teams who are affiliated with ACEs.
8. State of Michigan AHIMT personnel may be gathered from various participating ACEs to form or supplement an AHIMT to provide incident support when needed.
9. State of Michigan AHIMT personnel may be called upon to support local, state, and national disaster response operations.



## Roles and Responsibilities

The following represent the roles and responsibility of personnel as they relate to the state of Michigan AHIMT.

### **Emergency Management and Homeland Security Division Commander:**

The EMHSD, at the direction of the EMHSD commander, will serve as the oversight authority for all state-level matters related to the AHIMT program. They will review recommendations for approval from the Michigan AHIMT Advisory Committee and provide guidance.

### **EMHSD Operations Management Section (Managers and State IMT Coordinator):**

The EMHSD OMS will manage the overall AHIMT program and will develop and maintain program guidance and coordinate the activities of the state AHIMT program. The OMS will serve as the liaison with the AHIMT Association of America on behalf of the state of Michigan. The OMS will be responsible for coordinating administration, information sharing, and training initiatives relating to the state AHIMT program. This includes but is not limited to maintaining liaison with ACEs, maintaining personnel tracking system, oversight of documentation within the Michigan Critical Incident Management System (MI CIMS), development of Mission Ready Packages for designated teams, and setting internal policies with approval of the EMHSD commander or OMS. The OMS Logistics Analyst will serve as the State IMT Coordinator and Co-Chair of the AHIMT Advisory Committee.

### **EMHSD Training, Exercise and Preparedness Section:**

The EMHSD Training, Exercise and Preparedness Section will work with the State IMT Coordinator to evaluate needed trainings across the state for consideration in the state training schedules. The state AHIMT program will be incorporated into exercises by the State Exercise Officer as appropriate.

### **State AHIMT Program Members:**

State of Michigan AHIMT Program personnel will maintain their position qualifications with their participating ACEs and participate in required activities. All-Hazards Incident Management Team personnel will comply with all established policies and procedures as directed by their ACE leadership, OMS, or the EMHSD commander. All-Hazards Incident Management Team personnel will ensure they have liability coverage during operations and activation, and they have continuing authorization from their ACE.



## Committees

### Advisory Committee

The Michigan AHIMT Advisory Committee will be responsible for advising the EMHSD commander on the development of guidance, directives, and operational procedures for the selection, training, activation, and mobilization/demobilization of the AHIMTs. The EMHSD will support the committee's work and will maintain responsibility for the program.

The Michigan AHIMT Advisory Committee will have two members who serve as Co-Chairpersons for the committee. The EMHSD State IMT Coordinator will serve as one Co-Chair and the second shall be an individual selected by the EMHSD Commander. The Co-Chairs are responsible for the management of the AHIMT Advisory Committee and of the AHIMT Program.

The Michigan AHIMT Advisory Committee consists of the OMS Manager, Emergency Operations Unit Manager, EMHSD State Training Officer, EMHSD State Exercise Officer, representatives from the Michigan Mutual Aid Box Alarm System, president of the Michigan Emergency Management Association or designee, state agency IMT representatives, EMHSD District Coordinators (DCs), as well as an Emergency Management Representative and IMT Representative from each of the eight EMHSD districts. The State IMT Coordinator will appoint members to fill vacant seats on the committee from the local jurisdictions. State Agency IMT Representatives are appointed by their respective agencies.

### Designation Subcommittee

The Michigan AHIMT Advisory Committee will have a designation subcommittee. The Michigan AHIMT Designation Subcommittee will be responsible for developing and maintaining designation standards for Type III AHIMT personnel and teams. They will also be responsible for reviewing the applications of Type III personnel and teams who are recommended for designation by their ACEs. The designation subcommittee will develop and maintain processes and procedures to quickly process these applications and maintain a database in D4H of deployable Type III personnel and teams. Members of the Michigan AHIMT Designation Subcommittee are appointed by the State IMT Coordinator.



## AHIMT Certifying Entity (ACE)

The AHIMT Certifying Entities, or ACEs, are organizations or jurisdictions within the state of Michigan that have members who meet or are working to meet the Type III IMT Designation criteria. Each ACE will establish a minimum of three (3) ACE Liaisons who act as the primary points of contact with the state. The ACE Liaisons are responsible for reviewing each Position Task Book and associated training prior to approving applications and forwarding to the State IMT Coordinator for dissemination to the designation subcommittee.

Any jurisdiction, organization, team, or combined group within the state may apply to become an ACE. There is no requirement for an ACE to form a full Type III AHIMT, only to have individuals who complete the Type III Individual Designation process. In order to be recognized as an ACE, an application (Attachment A) shall be submitted to the State IMT Coordinator who will review and accept. The ACE will be established, and the ACE Liaisons will complete ACE Liaison Orientation and become familiar with the expectations and processes associated with their participation.

### ACE Liaisons

The ACE Liaisons are responsible for ensuring their members maintain compliance with the requirements described in this program guidance. If the organization is forming a team, the ACE Liaisons are also the point of contact in the event a request is made for the team to respond to an incident or event. Their contact information will be made available in the State Emergency Operations Center (SEOC) and to the EMHSD DCs and may be shared to requesting agencies.

The ACE Liaisons are designated either as part of an ACE's initial application or in addition to or as a replacement of an existing ACE Liaison. Regardless of the reason for appointment, ACE Liaisons shall meet and maintain the following criteria:

- Have approval from their ACE to serve as the ACE Liaison, including a signature from the sponsoring agency on their application.
- Have submitted an ACE Liaison application to the State IMT Coordinator for review and approval by the Michigan AHIMT Designation Subcommittee either as part of the ACE Designation Application or as an independent ACE Liaison Application.
- Meet the requirements for designation as a Type III Command or General Staff position either at the time of application or within two (2) years of designation as an ACE Liaison.

Responsibilities following designation:

- Maintain their designation in a Type III Command or General Staff position for the duration of their time as an ACE Liaison.
- Attend a minimum of three (3) ACE Liaison Meetings each year.
- Review position task books (PTBs) and training requirements for each member submitting for their Type III designation and provide feedback to members on progress.



- Sign and submit an AHIMT Type III Designation Application with each packet from a member requesting Type III designation.
- Coordinate with the SEOC or EMHSD DC to meet requests for personnel and teams to mobilize.



## Resource Typing

The AHIMT Type III personnel and Type III teams will apply through the State IMT Coordinator to be evaluated by the Michigan AHIMT Designation Subcommittee. Personnel will be evaluated for qualification per the guidance and standards included in Attachment B of this program manual by their ACEs and recommended to the Michigan AHIMT Designation Subcommittee for designation. Teams wishing to be designated as a Type III IMT will submit their packet to the State IMT Coordinator, who will forward for review and approval by the AHIMT advisory committee.

A Type III IMT as defined by the National Qualifications System includes the following required positions:

- Incident Commander (IC)
- Safety Officer
- Liaison Officer
- Public Information Officer
- Two (2) Operations Section Chiefs
- Logistics Section Chief
  - Communications Unit Leader
- Planning Section Chief
  - Situation Unit Leader
  - Resources Unit Leader
- Finance/Administration Section Chief

A team wishing to reach Type III designation shall be able to fill at least the above roster with individuals who have all achieved their Type III Individual Designation. See Attachment I for the full NQS listing for IMTs.

Type IV AHIMT teams and personnel operate under the guidance and direction of the local Authority Having Jurisdiction (AHJ). As such, they self-certify their team and personnel and are not designated by the Michigan AHIMT Advisory Committee. Type IV PTBs have been made available for teams who wish to use them. These task books are not mandated for use by local Type IV IMTs but are provided solely as guidance for local teams to adapt for their local needs. Type IV teams who wish to progress towards having their personnel or their team designated at the Type III level may petition the AHIMT advisory committee to become an ACE. The Michigan AHIMT Advisory Committee encourages AHJs wishing to have local Type IV teams to meet training requirements similar to those set out in this Type III guidance.





## Training Requirements and Tracking

### Initial Training

In addition to the position-specific trainings for AHIMT positions, the state of Michigan has adopted several additional training requirements for members of AHIMTs. These requirements include:

- ICS-300
- ICS-400
- G-191 Incident Command System/Emergency Operations Center Interface
- MI CIMS End User Training
- O-305 All Hazards Incident Management Team

### Communications Unit Leader

Individuals interested in the Communications Unit Leader (COML) shall follow the standard process as defined by the Michigan Communications Unit Work Group to complete their COML training and PTBs. Individuals who are associated with an ACE can then complete the other required trainings and submit an application to also be granted Type III designation. Type III designation will not be granted without completion of the Communications Unit Work Group process.

### D4H

D4H is the software system the AHIMT committee uses to coordinate personnel and team tracking and deployment. The ACE Liaisons will be given access to D4H and will be responsible for tracking their personnel, training, and qualifications. The ACE Liaisons will also be responsible for ensuring documentation for their personnel and team is complete and current. The State IMT Coordinator is responsible for the maintenance of this system.

### Medical Clearance and Fitness for Duty

The ACEs are responsible for ensuring their members can perform the duties assigned to an IMT. These duties include operating for long periods of time in disaster areas that may have limited commodities and primitive living conditions. This can also include the need to lodge in a responder base camp. Members must have the ability to stand and sit for long periods of time and traverse areas with uneven ground.



## Continuing Education and Maintaining Designation

The ACEs are responsible for ensuring their personnel meet all recurrent training, certification, and currency standards. They are also responsible for ensuring documentation is current for their personnel. The designation subcommittee will periodically audit personnel records in D4H to ensure personnel and teams maintain designation qualification standards.

The following yearly requirements shall be met by all individuals wishing to maintain their Type III designation:

- Complete eight (8) hours of relevant disaster response or emergency management training each year.
- Maintain currency on the PTB, completing a new PTB at the interval defined by the ACE.

AND at least one of the below:

- Participate in a minimum of one state or county-level exercise/event each year,  
OR
- Respond as part of an AHIMT to an incident that requires a written Incident Action Plan (IAP) that shows the individual filling the role for which they are maintaining designation,  
OR
- Operate as part of an AHIMT for a planned event that has a written IAP that shows the individual filling the role for which they are maintaining designation.

Individuals are expected to be able to provide documentation that they meet the above continuing education requirements at the request of the designation subcommittee if chosen for an audit. Supporting documentation shall include a written IAP or Exercise Plan that documents the individual's participation and role they fill.

To standardize timeframes for the completion of initial PTBs and Task Book currency, the state of Michigan AHIMT Program has set the following guidelines:

- Initial PTBs must be completed within three (3) years of initiation. Individuals who fail to complete within three years must start from the beginning.
- To maintain position currency, PTBs must be completed every three to five years.
  - The ACEs are expected to set the number of years within this range that members must complete a task book during. This shall be shared with the State IMT Coordinator and will be documented in D4H for standardization.

Individuals who fail to meet these standards will have their Type III designation revoked until such time that they can meet these requirements.



## Removal of Designation or Dismissal

Continued participation with the Type III AHIMT program is not guaranteed and is at the discretion of the commander of the EMHSD with input from the Michigan AHIMT Advisory Committee and team leadership. For professional and quality representation of the EMHSD and the state of Michigan, members and teams must conduct themselves in a professional and safe manner. Members are also required to complete the annual training requirements as described above. Failure to meet these requirements and provide supporting documentation when requested may result in removal of Type III designation. Members who lose their Type III designation are not permitted to re-apply for a period of one year.



## Recognition of Prior Learning

Recognition of Prior Learning (RPL) is a process that evaluates an individual's formal and non-formal learning through training and experience to determine the extent to which that individual has already acquired and performed the required competencies of an IMT Position. The RPL process measures an individual's demonstrated knowledge, skills, and experience against the standards defined in the State of Michigan AHIMT Program Guidance and as established in each position specific task book. Assessors will expect to see how the candidate performed in this position and completed the job satisfactorily in the past. Type III designation will not be granted to an individual for more than two positions based on RPL.

Evaluating competence based on prior learning involves collecting evidence and/or making judgements on a candidate's ability to perform in a position during an incident. The RPL assumes and requires a candidate has already performed in the position at a Type III or greater level. The RPL does not recognize candidates who had existing completed task books but had never performed in the role. During the review process, the designation subcommittee must be sure all evidence submitted is valid, current, sufficient, and authentic and that the material provided by the candidate covers all the competencies of the position they are applying for.

The RPL does not eliminate the need for candidates to have completed the required training as defined in this program guidance. All required training and associated certificates must be completed and provided as part of the application packet.

A candidate's experience will also be judged based on the time elapsed since they last served in the role. Highest consideration will be given to candidates whose experience is within the last three to five years. Candidates with experience of up to eight years ago will be reviewed, but those who do not have any experience within the past five years will be subject to increased scrutiny. Candidates whose experience is greater than eight years old will not be considered for RPL.

## Self-Assessment and Documentation

It is possible a candidate might already be competent in the position desired as a result of prior learning (e.g., previous experience and/or training). If a candidate thinks this might be the case, a self-assessment is the first step. The self-assessment begins with an honest, supportable appraisal of the candidate's abilities and experience with regard to the competencies developed for the desired position.

Using the Candidate Self-Assessment and Portfolio Worksheet (Attachment G) for the desired position, the candidate reviews the competencies and associated examples. As the candidate goes through the competencies, he/she should make notes as to how, where, and when actions were performed, or knowledge attained that would account for having met the competency. If the self-assessment supports the candidate's view that he/she may meet the position competencies, the notes may be used as a guide in developing the portfolio.

The candidate will need to show convincing evidence supporting the information provided on the self-assessment. This includes products, performance evaluations, and other evidence. These can include IAPs with the individual's name listed as filling the position, records of training or exercise participation, performance evaluations from supervisors or ICs, after-action reports,



and written statements from co-workers or other members the candidate worked with. All documentation submitted must be verifiable and is subject to verification by the State IMT Coordinator and/or designation subcommittee. All documentation must be loaded into D4H.

Each applicant must submit a minimum of two different responses during which they filled the position they have applied for. Responses can include Homeland Security Exercise and Evaluation Program operations-based exercises, planned events, or incidents. A minimum of one submission must be for an actual incident. All submissions must have adequate documentation for them to be considered. Failure to provide adequate documentation may result in a rating of “not yet competent”.

## Recognition of Prior Learning Process

1. The first step in the RPL process is a self-assessment. A candidate will complete the Self-Assessment and Portfolio Worksheet (Attachment G) for the position(s) in which they are interested and feel they can adequately provide documentation of their prior experience. The self-assessment begins with an honest appraisal, listing past training and experience to assist the candidate in evaluating whether they have successfully performed the duties of desired position. The appraisal is not based on what the candidate thinks they can do, but rather is based on what the candidate has already done and can provide documentation of performance.
2. The second step of the RPL process is compiling convincing evidence of the past training and experiences that documents the candidate has performed the job and completed it successfully. In brief, the portfolio or resume is a collection of certificates, letters, performance reviews, and other documentation the candidate can provide to support their listed experience.
3. The third step is a comprehensive review of the self-assessment and portfolio by the ACE Liaisons for the candidate’s organization. The candidate should submit documentation and their Type III Designation Application to their ACE Liaisons for review. As with any other application for designation, the ACE Liaisons must review the application and believe the individual can successfully perform the duties of the position. If the ACE Liaisons feel the individual can do this, they will sign and submit the application to the State IMT Coordinator. ACE Liaisons must ensure documentation is loaded into D4H.
4. The fourth step is for the State IMT Coordinator to ensure all paperwork is completed and appropriately loaded into D4H. The State IMT Coordinator will also independently verify some of the listed experience by contacting a minimum of two of the references listed on the self-assessment submission.
5. The fifth step is review of the application by the AHIMT designation subcommittee. The subcommittee will first thoroughly review the self-assessment and the documentation within the candidate’s portfolio that has been submitted, as well as ensure appropriate certificates are loaded into D4H. If the subcommittee determines additional information or clarification is needed, they may instruct the State IMT Coordinator to contact the candidate directly with the additional questions or information needed.
6. The final step is for the designation subcommittee to provide their recommendation to the EMHSD commander for their final review. The designation subcommittee may find a



candidate to be either “competent” or “not yet competent” dependent on the information provided. The EMHSD commander will review and provide a letter to the candidate either granting them their Type III designation or advising them of their status as “not yet competent” and the recommendations provided by the subcommittee to reach status as “competent”.



## Application & Designation Process

### Type III Individual Designation Process

Prior to submitting the application for AHIMT Type III Designation, personnel must have their agency head/director's approval.

1. The individual seeking Type III designation shall submit to their ACE Liaison a request to be issued a Type III PTB.
2. The ACE Liaison will, at their discretion, issue a Type III PTB and create a profile for the individual in D4H for tracking purposes.
3. The individual will work through the PTB, and upon its completion, and the completion of the required state training courses, submit the appropriate certificates, completed PTB, and Type III Designation Application (see Attachment B to their ACE Liaison for review).
4. The ACE Liaison verifies all qualifications are met for the position they are applying, PTBs are complete, and all documentation is uploaded properly to D4H.
5. The State IMT Coordinator gathers applications for review at the next designation subcommittee meeting.
6. The designation subcommittee reviews applicant information and determines if the individual meets the appropriate criteria and training for Type III designation.
7. The designation subcommittee makes their decision, and the State IMT Coordinator forwards the Type III Team Letter of Designation (see Attachment E) to the ACE Liaison and individual informing them of their designation.
8. The designation subcommittee periodically reviews the list of designated personnel to ensure all designated personnel and teams have properly documented their qualifications and trainings are current.

### Type III Team Application Process

1. When an ACE believes they meet the AHIMT program standards for a Type III IMT, they may petition the designation subcommittee for approval. The ACE Liaison ensures the minimum number of designated Type III AHIMT personnel are properly entered into D4H, and their ACE meets all standards as defined in the Qualifications and Training Requirements listed in Attachment B of this document.
2. The ACE Liaison completes the application for team Type III designation and submits it to the State IMT Coordinator.
3. The State IMT Coordinator gathers applications for review at the next AHIMT advisory committee meeting.



4. The AHIMT advisory committee approves the ACE as a designated Type III AHIMT.
5. The State IMT Coordinator sends a Type III Letter of Designation to the ACE Liaison and updates the team status in D4H.





## **Code of Conduct & Liability**

### **Code of Conduct**

The EMHSD reserves the right to set ethical and behavioral standards for State of Michigan AHIMT Program members while deployed. Team members will be representing EMHSD and the state of Michigan, and thusly will be held to the highest standards of ethical and moral conduct. The State of Michigan AHIMT Program's code of conduct will be included in materials available to AHIMT program members and agencies.

### **Liability**

While operating as part of an IMT within the state, members are covered by their local jurisdictions. When deployed under the Emergency Management Assistance Compact (EMAC), members of the team are entitled to the liability protections provided by the compact and adopted under state law. Workers' compensation for each member shall be provided by their employer or sponsoring agency.



## Activation

Type III AHIMT personnel or teams may be activated by the SEOC or the Deputy State Director of Emergency Management during statewide emergencies or disasters within the state or Michigan or deployed to other US states and territories through the EMAC.

Type III AHIMT personnel may be deployed to operate a state staging area or logistics staging area, run or assist at an Incident Command Post within a local jurisdiction, support a planned event at the request of a local jurisdiction, or any specific request through the EMAC if the team assembled meets the mission outlined in the resource request within the EMAC operations system. Deployed personnel shall be prepared to operate for up to 14 days and pack necessary items to support this length of deployment. All IMT personnel shall have a team issued identification card that will be worn at all times.

### AHIMT Resource Request when the SEOC is not activated

1. The AHIMTs are available to assist local jurisdictions in planning and response to incidents prior to or when the SEOC is not activated.
2. Agencies/jurisdictions in need of an IMT can contact their MSP/EMHSD DC and request an IMT for their incident. Requesting agencies shall also ensure their local emergency managers (EMs) are informed of the incident and request.
3. The DCs will gather information from the requesting agency using the AHIMT Request Worksheet.
4. The DCs will contact the closest appropriate IMT with the request to respond.
5. Once a team has accepted the mission, the DC will brief the IMT leadership via conference call and connect them with the requesting agency/IC.
6. During this conference call, the requesting agency and IMT leadership shall discuss the scope of work and Letter of Expectations. The requesting agency shall be made aware that an IMT will not begin operations until such documents are signed.
7. The DC will contact the State IMT Coordinator and notify them of a team activation and provide a brief on the incident.
8. The DC will stay in touch with the IMT leadership and requesting agency throughout the deployment and provide support, as necessary.
9. State IMT Coordinator will schedule a debrief with leadership from the IMT and requesting agency within thirty days following the completion of the event.



## AHIMT Resource Request when the SEOC is activated

1. All-Hazards Incident Management Teams are available to assist local jurisdictions in planning and response to incidents when the SEOC is activated.
2. Local jurisdictions or agencies in need of an IMT when the SEOC is activated shall submit a MI CIMS Resource Request. Contact should also be made with their DC.
3. The SEOC Logistics Section Chief (LSC) and/or Supply Unit Leader (SPUL) will discuss the request and ensure information provided is complete.
4. The SEOC LSC or SPUL will contact the closest appropriate team with the request to respond.
5. Once a team has accepted the mission, the SEOC LSC will brief the IMT leadership and SEOC Operations Section Chief (OSC) via conference call and connect them with the requesting agency/IC.
6. During this conference call, the requesting agency and IMT leadership shall discuss the scope of work and Letter of Expectations. Requesting agency shall be made aware that an IMT will not begin operations until such documents are signed.
7. The SEOC LSC or SPUL will contact the State IMT Coordinator and notify them of a team activation and provide a brief on the incident if they are not already in the SEOC.
8. The SEOC OSC will stay in touch with the IMT leadership and requesting agency throughout the deployment and provide support, as necessary.
9. The State IMT Coordinator should be notified of the deployment of an IMT via the program when appropriate.
10. The State IMT Coordinator will schedule a debrief with leadership from the IMT, requesting agencies, and appropriate SEOC staff within thirty days following the completion of the event.

## AHIMT Resource Request for Planned Event or Exercise Support

1. All-Hazard Incident Management Teams are available to assist local jurisdictions in planning and response to large scale events within their jurisdictions and/or events that cross multiple jurisdictions.
2. Contact your MSP/EMHSD DC or the State IMT Coordinator to request planned event AHIMT Support. Requesting agency should ensure their local EM is also aware of the request.
3. Requests should be made at least 14 days in advance when possible.
4. Requesting agency will share information about the event and mission and discuss how the IMT would be used to support the event.



5. Contact will be made with leadership from the closest appropriate team to discuss the event, requests, and team's ability to respond.
6. The team will have 24 hours to accept or decline the mission.
7. If declined, the next appropriate team will be contacted.
8. Once a team has accepted the mission, the requesting agency will be connected with the team leadership via conference call to share initial details.
9. The requesting agency and assisting team leadership shall discuss scope of work and expectations as part of the planning for support.
10. At this point, the response is managed between the IMT leadership and the requesting agency. The DC will assist as requested.
11. The DC will notify the State IMT Coordinator of the request and the team that accepted the mission.
12. The State IMT Coordinator will schedule a debrief with leadership from the IMT and requesting agency within 30 days following the completion of the event.

### Letter of Expectations

The state of Michigan AHIMT Program has developed a template for the Letter of Expectations that can be used by programs around the state. A Letter of Expectations shall be completed by any team deploying prior to initiating response efforts. This document shall define the scope in which the AHIMT will operate and what roles and responsibilities are being given to them by the AHJ. This document will grant specific authorities to a team and define reporting structures for the operation. See Attachment F for a template Letter of Expectations.



## **Demobilization and Reimbursement**

### **Demobilization**

At the completion of the mission assignment, the Team Leader or IC of the deployed resource will complete any required demobilization paperwork and ensure copies of all pertinent information are left with the AHJ. Unless otherwise indicated, the AHJ will remain the custodian of the official records related to the response. If activated by the SEOC, the SEOC will clarify and issue demobilization orders via the SEOC OSC. All paperwork, reimbursements, and supporting documentation shall be submitted to the AHJ within 30 days of demobilization unless additional time is approved to process these requests. The State IMT Coordinator will conduct a debrief with the responding team and requesting agency within 90 days of demobilization to discuss the response and any successes or challenges faced.

### **Reimbursement**

The AHIMT program members' employers or sponsoring agencies will be reimbursed according to the provisions of the memorandum of understanding and any policies or procedures issued by the division for this purpose. Reimbursement for deployments under an EMAC or Michigan Emergency Management Assistance Compact request shall follow the appropriate related policies and procedures.



# Michigan AHIMT Program ACE Application

## Program Guidance Attachment A

### ORGANIZATION INFORMATION

AHIMT Certifying Entity (ACE) Name: \_\_\_\_\_

Governing Body/Organization: \_\_\_\_\_

Governing Body/Organization Contact: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

### ACE LIAISONS

ACE Liaison: \_\_\_\_\_

ACE Liaison Phone: \_\_\_\_\_ ACE Liaison Email: \_\_\_\_\_

ACE Liaison: \_\_\_\_\_

ACE Liaison Phone: \_\_\_\_\_ ACE Liaison Email: \_\_\_\_\_

ACE Liaison: \_\_\_\_\_

ACE Liaison Phone: \_\_\_\_\_ ACE Liaison Email: \_\_\_\_\_

ACE Liaison: \_\_\_\_\_

ACE Liaison Phone: \_\_\_\_\_ ACE Liaison Email: \_\_\_\_\_

### GOVERNING BODY/ORGANIZATION APPROVAL

As a leadership member of the Governing Body/Organization listed above, I hereby authorize the ACE to participate in the State of Michigan AHIMT Program and designate the persons listed above as our ACE Liaisons.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





# Michigan AHIMT Program Code of Conduct

## Program Guidance Attachment C

While on deployments you represent yourself, your agency, your state, and your Governor. Past training, exercising, and experiences have helped prepare you for the responsibility of responding on behalf of your agency and state. Many assignments involve highly structured responses in unusual conditions including on and off scene activities during your deployment. You are expected to follow rules of general good conduct on and off the disaster scene.

Behavior during on or off-duty hours and/or off incident can be subject to local, state, and/or federal policies, laws, or regulations. Off-duty behavior that negatively affects other employees or your ability to perform work upon return to duty can be grounds for discipline by the sending agency and ineligibility for future deployments.

General guidelines for behavior during deployments:

1. Drive agency/rental vehicles in a safe and lawful manner to and from your incident assignment, your lodging, and to obtain necessary supplies.
2. You are an emergency response resource. You must be well rested and in an alert condition so you can perform safely and effectively at all times. *NEVER drive any vehicle under the influence of alcohol or other mind-altering substances or allow unauthorized persons to operate them.*
3. Respect the local public. You are in their hometown.
4. You will encounter people of diverse racial and ethnic backgrounds. Behavior or language which could be interpreted as racial or sexual harassment will not be tolerated.
5. You are responsible for understanding the conditions of your deployment. If you have concerns or questions, contact your agency or your Team Leader.
6. You are responsible for your own actions. Stay together and work together as a team.
7. If you have an issue that needs resolution, talk to your Team Leader.
8. Remember you are working for (under the operational control of) the jurisdiction that requested you.
9. You may be recalled home at any time (under the command and control of your home agency). If recalled home, you will demobilize in accordance with the direction of your home agency.

I have read the above, understand these expectations and agree to follow them.

---

Printed Name

---

Signature

---

Date





# Michigan AHIMT Program Individual Type III Designation Letter

## Program Guidance Attachment D

Dear \_\_\_\_\_,

On behalf of the Michigan All-Hazards Incident Management Team (AHIMT) Designation Subcommittee, please accept our sincerest congratulations on achieving your designation as a Type III \_\_\_\_\_ for the state of Michigan.

Effective immediately, you are being moved into the operational category and can be requested as part of a team or single resource request for responses in state or through Emergency Management Assistance Compact requests for out of state responses. A copy of this letter is also being distributed to your AHIMT Certifying Entity (ACE) and ACE Liaisons.

Please let us know if you have any questions, and please be sure to review the requirements to maintain your Type III status.

Thank you,

Commander  
Michigan State Police  
Emergency Management and Homeland Security Division



# **Michigan AHIMT Program** **Team Type III Designation Letter**

## **Program Guidance Attachment E**

Dear \_\_\_\_\_,

On behalf of the Michigan All-Hazards Incident Management Team (AHIMT) Advisory Committee and the Michigan State Police, Emergency Management and Homeland Security Division, please accept our sincerest congratulations on achieving your designation as a Type III Incident Management Team for the state of Michigan.

Effective immediately, your team is being moved into the operational category and can be requested for responses in state or through Emergency Management Assistance Compact requests for out of state responses. A copy of this letter is also being distributed to your AHIMT Certifying Entity (ACE) and ACE Liaisons.

If you have any questions, please feel free to contact DESIGNEE NAME, State IMT Coordinator, at any time.

Thank you,

Commander  
Michigan State Police  
Emergency Management and Homeland Security Division



# Michigan AHIMT Program Letter of Expectations

## Program Guidance Attachment F

Incident Name: \_\_\_\_\_

Date: \_\_\_\_\_

AHJ: \_\_\_\_\_

Agency Representative: \_\_\_\_\_

AHIMT: \_\_\_\_\_

### **PURPOSE and SCOPE:**

This letter serves as the agreement between the AHJ and AHIMT listed above to provide incident support and/or incident command related to this response. This document describes the responsibilities, expectations, and authorities granted to the team as part of their requested response to this incident.

Your primary responsibility is to organize and direct the assigned and ordered resources for efficiently and effectively supporting the above municipality within the framework of its Emergency Operations Plan and/or Incident Action Plan. Specifically, your team is tasked with the following elements (list below or attach document describing):

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

### **SAFETY:**

The accountability for and safety of all assigned personnel and the public is your responsibility. As the IMT/Incident Support Team (IST) Incident Commander, please take the appropriate actions to ensure that all team personnel on this incident are working in a safe and efficient manner. The team has the authority to stop all potentially dangerous work and re-evaluate tactics to ensure safety of all personnel operating in the area. This includes ensuring appropriate work/rest schedules to reduce the risk of fatigue related hazards.

### **TRACKING RESOURCES:**

Track the distribution of resources under your control throughout the incident. Your team shall ensure that resources are being appropriately assigned and tracked from request through assignment and to demobilization. This includes any personnel, equipment, or commodities requested by the team or assigned to the team for management.



# Michigan AHIMT Program Letter of Expectations

## Program Guidance Attachment F

### **COST ACCOUNTABILITY:**

Cost effectiveness and use of critical resources and economic expenditures shall be an important part of all decision-making processes. The AHJ may provide the Finance/Administration Section Chief with guidelines for purchasing based on existing procedures. Best efforts will be made to ensure cost comparisons and bids are taken for equipment when time allows. Purchasing using existing contracts and with consideration or overall expenses shall be the standard practice. Upon demobilization the Finance/Administration Section Chief shall provide the AHJ with documentation of all incurred expenses.

### **PUBLIC INFORMATION:**

Information releases and media contacts will be coordinated through the AHJ's Incident Commander and Public Information Officer unless otherwise directed.

### **DOCUMENTATION:**

A standard final Incident Documentation package will be provided to the Agency Administrator, or their designee, prior to the team's release.

### **DURATION OF OPERATIONS:**

The team listed is granted the responsibilities, expectations, and authorities listed above until \_\_\_\_\_ unless rescinded or extended in writing by the AHJ.

### **ADDITIONAL REQUIREMENTS:**

Additional pages outlining specific expectations, reporting information, requesting procedures, or finance criteria may be added to this document and should be noted below.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



# Michigan AHIMT Program Letter of Expectations

## Program Guidance Attachment F

### **AHJ APPROVAL:**

As the Administrator for the AHJ, I hereby grant the responsibilities, expectations, and authorities listed to the AHIMT listed above.

\_\_\_\_\_  
Agency Administrator Signature

\_\_\_\_\_  
Agency Administrator Name – Print

\_\_\_\_\_  
Date

### **IMT/IST APPROVAL:**

As the Incident Commander for the responding AHIMT, I hereby accept the responsibilities, expectations, and authorities listed above on behalf of the team and will ensure compliance and cooperation with the AHJ throughout the response.

\_\_\_\_\_  
IMT/IST Team Leader Signature

\_\_\_\_\_  
IMT/IST Team Leader Name - Print

\_\_\_\_\_  
Date

### **DEMOBILIZATION APPROVAL:**

Having completed the requested assignment and ensuring a transfer of information, documentation, ongoing activities, and command (when applicable) is complete, the team listed above is hereby demobilized as of \_\_\_\_\_.

\_\_\_\_\_  
IMT/IST Team Leader Signature

\_\_\_\_\_  
Agency Administrator Signature

\_\_\_\_\_  
IMT/IST Team Leader Name - Print

\_\_\_\_\_  
Agency Administrator Name – Print

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date



# Michigan AHIMT Program Self-Assessment Worksheet

## Program Guidance Attachment G

### SECTION I: CONTACT INFORMATION

Name: \_\_\_\_\_

ICS Position(s) Applying For: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

ACE Organization: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer Contact Info: \_\_\_\_\_

Current Position: \_\_\_\_\_

Are you now, or have you previously been designated at the Type III level or above in the position you are applying for? If yes, please indicate the state, agency, or organization in which you had previous Type III designation.

\_\_\_\_\_  
\_\_\_\_\_

### SECTION II: REFERENCES

List any personal or professional references who may be contacted during the review process to help provided knowledge of your experience while performing the duties of the position you have applied for.

<u>Name</u>	<u>Relationship</u>	<u>Phone</u>	<u>Email</u>

### SECTION III: DOCUMENTATION

Please submit all supporting documentation related to the listed experience that proves you have met the requirements laid out in the AHIMT Program Guidance. Documentation should include IAPs and/or AARs that include applicants name and provide an idea of the type of incident the applicant responded to.



# Michigan AHIMT Program Self-Assessment Worksheet

## Program Guidance Attachment G

### SECTION IV: RELEVANT HISTORICAL EXPERIENCE

<u>Name and Location of Incident or Event</u>	<u>Specific Position Filled</u>	<u>Dates of Participation (starting and ending)</u>
<u>Incident Description</u>	<u>Number and Type of Resources Pertinent to the Position you Filled</u>	<u>Complexity of the Incident or event (Type 1-4) or Number of Total Resources Involved.</u>

<u>Name and Location of Incident or Event</u>	<u>Specific Position Filled</u>	<u>Dates of Participation (starting and ending)</u>
<u>Incident Description</u>	<u>Number and Type of Resources Pertinent to the Position you Filled</u>	<u>Complexity of the Incident or event (Type 1-4) or Number of Total Resources Involved.</u>

<u>Name and Location of Incident or Event</u>	<u>Specific Position Filled</u>	<u>Dates of Participation (starting and ending)</u>
<u>Incident Description</u>	<u>Number and Type of Resources Pertinent to the Position you Filled</u>	<u>Complexity of the Incident or event (Type 1-4) or Number of Total Resources Involved.</u>



# Michigan AHIMT Program AHIMT Request Worksheet

## Program Guidance Attachment H

### AHIMT REQUEST WORKSHEET

Requesting Agency: \_\_\_\_\_

Incident Commander: \_\_\_\_\_

IC Phone Number: \_\_\_\_\_ IC MPSCS Talkgroup: \_\_\_\_\_

Point of Contact (if different from IC): \_\_\_\_\_

Point of Contact Phone Number: \_\_\_\_\_

Incident Location: \_\_\_\_\_

Incident Staging Area: \_\_\_\_\_

Incident Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Response Type (Check one): \_\_\_\_\_ Emergent \_\_\_\_\_ Non-Emergent

Anticipated Length of Deployment: \_\_\_\_\_

\_\_\_\_\_

Additional Information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_