



KENTUCKY COMMUNITY AND TECHNICAL COLLEGE SYSTEM  
 COMMISSION ON FIRE PROTECTION PERSONNEL STANDARDS AND EDUCATION  
**FIREFIGHTER 1 COMPETENCY EVALUATION**



Objective(s): 5.3.10  Primary Task: Operate Charged Hoseline From Ladder Candidate # \_\_\_\_\_  
 2002 NFPA 1001 Standard

Skill No. **5-59** PERFORMANCE CRITERIA AND INSTRUCTIONS

INSTRUCTIONS TO THE MONITOR/EVALUATOR

1. The candidate shall be provided with a charged, 1-1/2" or 1-3/4" firehose.
2. The candidate shall be supplied with an extension ladder already in place, heeled and secured.
3. The candidate shall be provided with several hose straps.
4. The candidate shall be permitted to position self on the ladder and have the charged hose passed to him/her.
5. The candidate shall be given the instructions below before beginning the task.

INSTRUCTIONS TO THE CANDIDATE

**1. "The candidate, given the firehose provided and several hose straps, shall demonstrate procedures for operating a hoseline from a ladder."**

Minimum PPE: Full PPE with SCBA.

**PERFORMANCE**

	YES	NO
1. After the hoseline is passed up the ladder, projects the nozzle between the rungs where they will be working.	<input type="checkbox"/>	<input type="checkbox"/>
2. Secures the hose with a hose strap or rope to a beam or rung against the nozzle.	<input type="checkbox"/>	<input type="checkbox"/>
3. Secures the hoseline at a point several rungs below the one on which they will be standing.	<input type="checkbox"/>	<input type="checkbox"/>
➤ 4. Uses a leg lock or a ladder belt to secure themselves to the ladder before opening the nozzle.	<input type="checkbox"/>	<input type="checkbox"/>
5. Slowly opens the nozzle and flows water.	<input type="checkbox"/>	<input type="checkbox"/>

Reference: IFSTA Essentials 4th Edition, Chapter 12

TOTALS

➤ **Critical Step-** Failure on this step mandates failure on task !

**CRITICAL TASK**

CANDIDATE MUST COMPLETE STEPS TOTAL TO PASS SKILL. **4**

REMEMBER, YOU ARE AN EVALUATOR, NOT A TRAINER OF THE CANDIDATES DO NOT COACH, GRADE ONLY OBSERVED BEHAVIOR.

TEST DATE \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 EVALUATOR NAME (Print): \_\_\_\_\_  
 EVALUATOR SIGNATURE: \_\_\_\_\_