



Kitsap County Training & Safety Officers

Skill Guide



Hose Slide

Name: _____
Date: _____

Description: This Skill Guide is intended to instruct and/or evaluate the firefighter in a Self Rescue/Abandon the Building Scenario due to a simulated Hostile Fire Event or Eminent Collapse Scenario where the firefighter(s) use their Hose-line as a means of Egress from an elevated floor in a building

Related Instructor Guide:

- Self Rescue II

Performance Standards:

Hose-Line Slide

Task: Given a 1 3/4" Charged Hand-line a firefighter, while wearing full PPE and SCBA will demonstrate sliding down the hose-line out of a window or balcony.

Conditions: Given a Hostile Fire event or eminent collapse scenario, with an Abandon the building order, the firefighter(s) will place themselves onto a Hand-Line that is placed outside a window or off a balcony, and slide down the Hose to the ground. ****Note-** This drill shall be conducted with a belay line on the participant at all times, and the upmost care and safety practices shall be followed throughout******

	Objectives	P	F
1.	**Stop Drill- Attach Belay Line**Safety Check System**		
2.	Receive/Communicate Abandon the Building Order		
3.	Communicate Plan to partner		
4.	Take Charged Hose-Line and place Bale out of Window, lowering to ground		
5.	**Ensure all slack is out of hose; Tie off to Furniture/walls if necessary		
4.	Straddle Window Sill, lower onto abdomen feet out of building		
5.	Wrap legs around hose-line		
6.	Grab Hose outside of window below window sill with both Hands (Beware of pinch point on window sill edge)		
7.	Slide down hose to ground		
8.	Ensure Team Integrity, Communicate status		
Performance Outcome; The firefighter(s), in a controlled manner, will be able to demonstrate abandoning a structure with no other means of egress from an elevated story in a building than the hose-line they brought in with them. The team will maintain team integrity/communication, and will be able to successfully exit the building in 30 seconds or less.			

Evaluator Comments: _____

Evaluator Signature: _____



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