

Northern New Mexico Fire Summit 2024

NM-CAF-000070

Monday, April 8th, 2024, thru
Thursday, April 11th, 2024

Operational Period 0800-1630



UNM Taos / Bataan Hall
121 Civic Plaza Drive Taos, NM 87571
April 8-11, 2024

INCIDENT INFORMATION

OPS (505)218-0053

Incident Commander (575)741-0609



INCIDENT OBJECTIVES (ICS 202)

1. Incident Name:	2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____
3. Objective(s):	
4. Operational Period Command Emphasis:	
General Situational Awareness	
5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input type="checkbox"/> Approved Site Safety Plan(s) Located at:	
6. Incident Action Plan (the items checked below are included in this Incident Action Plan):	
<input type="checkbox"/> ICS 203 <input type="checkbox"/> ICS 207 <input type="checkbox"/> ICS 204 <input type="checkbox"/> ICS 208 <input type="checkbox"/> ICS 205 <input type="checkbox"/> Map/Chart <input type="checkbox"/> ICS 205A <input type="checkbox"/> Weather Forecast/Tides/Currents <input type="checkbox"/> ICS 206	Other Attachments: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
7. Prepared by: Name: _____ Position/Title: _____ Signature: _____	
8. Approved by Incident Commander: Name: _____ Signature: _____	
ICS 202	IAP Page _____ Date/Time: _____

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____	
3. Incident Commander(s) and Command Staff:		7. Operations Section:	
IC/UCs		Chief	
		Deputy	
Deputy		Staging Area	
Safety Officer		Branch	
Public Info. Officer		Branch Director	
Liaison Officer		Deputy	
4. Agency/Organization Representatives:		Division/Group	
Agency/Organization	Name	Division/Group	
		Division/Group	
		Division/Group	
		Division/Group	
		Branch	
		Branch Director	
		Deputy	
5. Planning Section:		Division/Group	
Chief		Division/Group	
Deputy		Division/Group	
Resources Unit		Division/Group	
Situation Unit		Division/Group	
Documentation Unit		Branch	
Demobilization Unit		Branch Director	
Technical Specialists		Deputy	
		Division/Group	
		Division/Group	
		Division/Group	
6. Logistics Section:		Division/Group	
Chief		Division/Group	
Deputy		Air Operations Branch	
Support Branch		Air Ops Branch Dir.	
Director			
Supply Unit			
Facilities Unit		8. Finance/Administration Section:	
Ground Support Unit		Chief	
Service Branch		Deputy	
Director		Time Unit	
Communications Unit		Procurement Unit	
Medical Unit		Comp/Claims Unit	
Food Unit		Cost Unit	
9. Prepared by: Name: _____ Position/Title: _____ Signature: _____			
ICS 203	IAP Page ____	Date/Time: _____	

DIVISION/GROUP ASSIGNMENT LIST (ICS 204 WF)

Controlled Unclassified Information//Basic

1. Incident Name				3.			
				Branch		Division	
2. Operational Period							
Date/Time From:		Date/Time To:					
4. Operations Personnel							
Operations Chief				Division/Group Supervisor			
Branch Director				Air Attack Supervisor			
5. Resources Assigned this Period							
Strike Team/Task Force/ Resource Designator		EMT	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
6. Control Operations/Work Assignments:"							
7. Special Instructions:							
8. Division/Group Communication Summary							
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode	
Command							
Tactical Div/Group							
Logistics							
Air to Ground							
9. Prepared by (Resource Unit Leader)			Approved by (Planning Section Chief)			Date	Time

INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

1. Incident Name:

2. Date/Time Prepared:

Date:
Time:

3. Operational Period:

Date From:
Time From:

Date To:
Time To:

4. Basic Radio Channel Use:

Zone Grp.	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	TX Tone/NAC	Mode (A, D, or M)	Remarks

5. Special Instructions:

6. Prepared by (Communications Unit Leader) Name:

Signature:

ICS 205

IAP Page

Date/Time:

MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

1. Incident/Project Name		2. Operational Period						
		Date/Time						
3. Ambulance Services								
Name	Complete Address	Phone & EMS Frequency	Advanced Life Support (ALS)					
			Yes	No				
4. Air Ambulance Services								
Name	Phone	Type of Aircraft & Capability						
5. Hospitals								
Name Complete Address	GPS Datum – WGS 84 Coordinate Standard Degrees Decimal Minutes DD° MM.MMM' N - Lat DD° MM.MMM' W - Long		Travel Time Air Gnd		Phone	Helipad Yes No	Level of Care Facility	
	Lat:					<input type="checkbox"/>	<input type="checkbox"/>	
	Long:					<input type="checkbox"/>	<input type="checkbox"/>	
	VHF:					<input type="checkbox"/>	<input type="checkbox"/>	
	Lat:					<input type="checkbox"/>	<input type="checkbox"/>	
	Long:					<input type="checkbox"/>	<input type="checkbox"/>	
	VHF:					<input type="checkbox"/>	<input type="checkbox"/>	
	Lat:					<input type="checkbox"/>	<input type="checkbox"/>	
	Long:					<input type="checkbox"/>	<input type="checkbox"/>	
	VHF:					<input type="checkbox"/>	<input type="checkbox"/>	
6. Division Branch Group		Area Location Capability						
		EMS Responders & Capability:						
		Equipment Available on Scene:						
		Medical Emergency Channel:						
		ETA for Ambulance to Scene:						
		Air:						
		Ground:						
		Approved Helispot:						
		Lat:						
		Long:						
		EMS Responders & Capability:						
		Equipment Available on Scene:						
		Medical Emergency Channel:						
		ETA for Ambulance to Scene:						
		Air:						
		Ground:						
		Approved Helispot:						
		Lat:						
		Long:						

MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

7. Name & Location	Remote Camp Location(s)		
	Point of Contact:		
	EMS Responders & Capability:		
	Equipment Available on Scene:		
	Medical Emergency Channel:		
	ETA for Ambulance to Scene:		
	Air:		
	Ground:		
	Approved Helispot:		
	Lat:		
	Long:		
	Point of Contact:		
	EMS Responders & Capability:		
	Equipment Available on Scene:		
	Medical Emergency Channel:		
	ETA for Ambulance to Scene:		
	Air:		
	Ground:		
	Approved Helispot:		
	Lat:		
	Long:		
8. Prepared By (Medical Unit Leader)	9. Date/Time	10. Reviewed By (Safety Officer)	11. Date/Time

MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

Medical Incident Report

FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.

FOR A MEDICAL EMERGENCY: IDENTIFY ON-SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.

Use the following items to communicate situation to communications/dispatch.

1. CONTACT COMMUNICATIONS / DISPATCH (Verify correct frequency prior to starting report)

Ex: "Communications, Div. Alpha. Stand-by for Emergency Traffic."

2. INCIDENT STATUS: Provide incident summary (including number of patients) and command structure.

Ex: "Communications, I have a Red priority patient, unconscious, struck by a falling tree. Requesting air ambulance to Forest Road 1 at (Lat./Long.) This will be the Trout Meadow Medical, IC is TFLD Jones. EMT Smith is providing medical care."

Severity of Emergency / Transport Priority	<input type="checkbox"/> RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2° – 3° burns more than 4 palm sizes, heat stroke, disoriented.</i> <input type="checkbox"/> YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary. <i>Ex: Significant trauma, unable to walk, 2° – 3° burns not more than 1-3 palm sizes.</i> <input type="checkbox"/> GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport <i>Ex: Sprains, strains, minor heat-related illness.</i>	
Nature of Injury or Illness & Mechanism of Injury		<i>Brief Summary of Injury or Illness (Ex: Unconscious, Struck by Falling Tree)</i>
Evacuation Request		<i>Air Ambulance / Short Haul/Hoist Ground Ambulance / Other</i>
Patient Location		<i>Descriptive Location & Lat. / Long. (WGS84)</i>
Incident Name		<i>Geographic Name + Medical (Ex: Trout Meadow Medical)</i>
On-Scene Incident Commander		<i>Name of on-scene IC of Incident within an Incident (Ex: TFLD Jones)</i>
Patient Care		<i>Name of Care Provider (Ex: EMT Smith)</i>

3. INITIAL PATIENT ASSESSMENT: Complete this section for each patient as applicable (start with the most severe patient)

Patient Assessment: See IRPG PAGE 106

Treatment:

4. EVACUATION PLAN:

Evacuation Location (if different): (Descriptive Location (drop point, intersection, etc.) or Lat. / Long.) Patient's ETA to Evacuation Location:

Helispot / Extraction Site Size and Hazards:

5. ADDITIONAL RESOURCES / EQUIPMENT NEEDS:

Example: Paramedic/EMT, crews, immobilization devices, AED, oxygen, trauma bag, IV/fluid(s), splints, rope rescue, wheeled litter, HAZMAT, extrication

6. COMMUNICATIONS: Identify State Air/Ground EMS Frequencies and Hospital Contacts as applicable

Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *
COMMAND					
AIR-TO-GRND					
TACTICAL					

7. CONTINGENCY: Considerations: If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead..

8. ADDITIONAL INFORMATION: Updates/Changes, etc.

REMEMBER: Confirm ETAs of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.

NNM Fire Summit Safety Message 04/08/2024

TEN STANDARD FIRE ORDERS

*Rules Of Engagement Checklist – Start from the top and work down. Use the ticklers to help trigger awareness.
Work back up as needed to re-assess and re-engage.*

1) Keep informed on FIRE WEATHER conditions and forecasts.

- What conditions in today's forecast will affect the part of the fire where I am assigned?
- Have I provided for weather monitoring so I know when important changes will affect my assignment?
- Do I know the weather trigger points (Wind speed, RH, Temp.) that will affect what I do?

2) Know what your FIRE is doing at all times. Observe personally; use scouts.

- Have I sized up today's assignment?
- Can I see what is happening that may affect my actions?
- Am I aware of the changing situation around me?
- Will the resources be able to handle, or disengage from, a worst-case scenario?

3) Base all actions on current and expected BEHAVIOR of FIRE.

- How will the fuels, weather and topography affect my assignment?
- What indicators will I look for to see when changed actions are needed?
- What action will I take if the fire behavior changes?

4) Have ESCAPE ROUTES for everyone and make them known.

- Have I identified where to go and whether I can get there, based on the worst possible fire behavior?
- Are safety zones large enough to withstand the expected flame lengths, if needed?
- Do I have more than one escape route?

5) Post a LOOKOUT when there is possible danger.

- Can the lookout(s) see what the fire is doing?
- Can the lookout see and identify critical fire behavior factors?
- Can the lookout see the sky and weather conditions that may affect my assignment?
- Are the lookouts in communication? Check-in times established?

6) Be ALERT, keep CALM, THINK clearly, and ACT decisively.

- Have I been working long shifts, and getting adequate rest? Meeting the 2:1 work/rest ratios?
- Am I paying attention to what the fire is doing, and changes in the fire's behavior because of fuels, weather and topography? (Think "situational awareness").
- Am I keeping a cool head when things are going bad?
- Do I stop and think, based on the fire behavior?

7) Maintain prompt COMMUNICATION with your crew, your boss and adjoining forces.

- Are radios and assigned channels working properly?
- Are there glitches in the system that need to be solved before proceeding?
- Have I provided for what to do if the radios aren't effective and things go bad?
- Am I keeping people informed of what's happening?

8) Give CLEAR INSTRUCTIONS and be sure they are understood.

- Am I asking for feedback to clarify assignments?
- Do people look or act confused?
- Am I comfortable that I understand my assignment?

9) Maintain CONTROL of your people at all times.

- Does everyone know who's the boss?
- What about crew cohesion?
- Have check-in times and LCES instructions been established?

10) Fight fire aggressively but provide for SAFETY FIRST.

- Am I ready to engage, having provided for a safe assignment?
- Have I provided for the 18 situations to be mitigated?
- Do I need to re-cycle through any of the orders to get back on track?

18 SITUATIONS THAT SHOUT WATCH OUT

Mitigation Checklist – Using the Ten Standard Orders as Rules of Engagement

1) Identify and mark the situations that apply to your assignment. 2) Review the listed fire orders to see if enacting the order will solve the problem. 3) Review pertinent guidelines and note what you did to manage the situation. 4) Disengage if orders cannot be satisfied or situations cannot be handled.

<input checked="" type="checkbox"/> if a problem exists	SITUATION	FIRE ORDER #s	HOW I HANDLED THE SITUATION
<input type="checkbox"/>	1. Have I scouted and sized up the fire?	2	
<input type="checkbox"/>	2. Have I seen this country in daylight?	2	
<input type="checkbox"/>	3. Have I identified Safety zones and escape routes?	4	
<input type="checkbox"/>	4. Do I understand weather and local factors affecting fire behavior?	3	
<input type="checkbox"/>	5. Am I clear on strategy, tactics and hazards?	8	
<input type="checkbox"/>	6. Do I have clear instructions and assignments?	8	
<input type="checkbox"/>	7. Have I established communication with my crew and supervisor?	7	
<input type="checkbox"/>	8. Am I constructing line from a safe anchor point?	4	
<input type="checkbox"/>	9. Am I building fireline downhill with the fire below?	2,3,4,5	
<input type="checkbox"/>	10. Am I attempting a frontal assault on the fire?	2,3,4,5	
<input type="checkbox"/>	11. Is there unburned fuel between me and the fire?	2,3,4,5	
<input type="checkbox"/>	12. Can I see main fire, or can I contact someone who can?	2,5,7	
<input type="checkbox"/>	13. Will I be on a hillside where rolling material can ignite fuel below?	2,3,4,5	
<input type="checkbox"/>	14. Is the weather becoming hotter and drier?	1,2,3	
<input type="checkbox"/>	15. is the wind increasing and/or changing direction?	1,2,3	
<input type="checkbox"/>	16. Am I getting frequent spot fires across the line?	1,2,3,4,5	
<input type="checkbox"/>	17. Are terrain and fuels making escape to safety zones difficult?	2,3,4,5	
<input type="checkbox"/>	18. Have long hours made me feel like taking a nap near the fireline?	2	

2024 Northern New Mexico Fire Summit

