

INCIDENT ACTION PLAN MCKINNEY INCIDENT

CA-KNF-006177
P5PX2F (0505)

IQCS# 00000620392



IAP
MAPS
VIRTUAL CHECK-IN
PERSONNEL SUBSTITUTION
FINANCE DOCUMENTATION
COVID INFORMATION
PIO INFORMATION


OPERATIONAL PERIOD

10/30/2022 0700
to
11/5/2022 1900

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: <p style="text-align: center;">McKinney</p>	2. Operational Period: <table style="width: 100%; border: none;"> <tr> <td style="border: none;">Date From:</td> <td style="border: none;">10/30/2022</td> <td style="border: none;">Date To:</td> <td style="border: none;">11/5/2022</td> </tr> <tr> <td style="border: none;">Time From:</td> <td style="border: none;">0700</td> <td style="border: none;">Time To:</td> <td style="border: none;">1900</td> </tr> </table>	Date From:	10/30/2022	Date To:	11/5/2022	Time From:	0700	Time To:	1900												
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Time From:	0700	Time To:	1900																		
3. Objective(s):																					
<p><u>Strategic Framework</u></p> <p>Implement a full suppression strategy on the McKinney Fire. Values at risk include human safety, private timberlands, communities, critical infrastructure and associated improvements. Apply tactics that offer the highest probability of success.</p>																					
<p><u>Management Objectives</u></p> <ul style="list-style-type: none"> - Provide for firefighter and public safety through hazard recognition and application of the risk management process. - Coordinate all public information to provide timely and continuous information to affected agency partners, cooperators, and the public. - Work with Resource Advisors to implement the fire suppression repair plan. - Ensure timely, efficient mobilization and demobilization of critical resources. 																					
<p><u>Leaders Intent</u></p> <p>Provide the highest level of customer service to all involved with or impacted by the McKinney Fire. Ensure transparent, timely and accurate communication at all levels of the incident and strengthen relationships with cooperators. All incident assigned personnel should be prepared to take appropriate actions regarding:</p> <ul style="list-style-type: none"> - Personal safety and the safety of others, including driving slowly and defensively. - Fatigue management by taking breaks and maintaining work/rest cycles. - Limiting exposure to infectious disease by implementing Center of Disease Control, California Department of Public Health, and agency guidelines. - Professional behavior, and timely/effective communication. - Keep supervisor informed on personnel changes to ensure LWD and personnel names assigned to the incident are accurate. 																					
<p><u>Control Objectives</u></p> <ul style="list-style-type: none"> - Keep the McKinney Fire contained to the current fire perimeter to prevent the fire from spreading to private property, surrounding communities, and other values at risk. 																					
5. Site Safety Plan Required? <table style="width: 100%; border: none;"> <tr> <td style="border: none;">Yes <input type="checkbox"/></td> <td style="border: none;">No <input checked="" type="checkbox"/></td> </tr> </table>		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>																		
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Approved Site Safety Plan(s) Located at:																					
<p>6. Incident Action Plan</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;"><input checked="" type="checkbox"/> ICS 203</td> <td style="width: 25%;"><input type="checkbox"/> ICS 215A</td> <td style="width: 25%;"><input checked="" type="checkbox"/> 8-Line</td> <td style="width: 25%;"><input type="checkbox"/> Check-in DEMOB Message</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 204</td> <td><input type="checkbox"/> ICS 220</td> <td><input type="checkbox"/> Training Message</td> <td><input type="checkbox"/> COVID Info</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205</td> <td><input type="checkbox"/> Facility Maps</td> <td><input checked="" type="checkbox"/> Safety Message</td> <td><input type="checkbox"/> Danger Tree Specs</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 206</td> <td><input checked="" type="checkbox"/> Weather Forecast</td> <td><input type="checkbox"/> Demob Plan</td> <td><input checked="" type="checkbox"/> ICS 214</td> </tr> <tr> <td><input type="checkbox"/> ICS 208</td> <td><input type="checkbox"/> Fire Behavior</td> <td><input checked="" type="checkbox"/> Finance Message</td> <td><input type="checkbox"/> Flagging Guide</td> </tr> </table>		<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 215A	<input checked="" type="checkbox"/> 8-Line	<input type="checkbox"/> Check-in DEMOB Message	<input checked="" type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 220	<input type="checkbox"/> Training Message	<input type="checkbox"/> COVID Info	<input checked="" type="checkbox"/> ICS 205	<input type="checkbox"/> Facility Maps	<input checked="" type="checkbox"/> Safety Message	<input type="checkbox"/> Danger Tree Specs	<input checked="" type="checkbox"/> ICS 206	<input checked="" type="checkbox"/> Weather Forecast	<input type="checkbox"/> Demob Plan	<input checked="" type="checkbox"/> ICS 214	<input type="checkbox"/> ICS 208	<input type="checkbox"/> Fire Behavior	<input checked="" type="checkbox"/> Finance Message	<input type="checkbox"/> Flagging Guide
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7. Prepared By: PSC	Position/Title: Frank Henderosn	Signature:																			
8. Approved by Incident Commander:	Ben Molitor	Signature: _____																			
ICS 202		<small>NIMS IAP</small>																			

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: McKinney		2. Operational Period: Date From: 10/30/2022		Date To: 11/5/2022	
		Time From: 0700		Time To: 1900	
3. Incident Commander(s) and Command Staff:					
IC	Ben Molitor	Operations			
IC Trainee		Incoming Operations			
Safety Officer		Night Ops			
Information Officer					
Liaison Officer		Branch			
4. Agency/Organization Representatives:					
Klamath NF AADM	Kris Sexton	Division/Group	REPAIR		
Klamath NF AREP		Division/Group			
District Ranger Happy Camp	Roberto Beltran	Division/Group			
Lead Resource Advisor		Division/Group			
Cal OES Fire/Rescue	Pat Titus	Division/Group			
Cal OES EM	Ron Quigley	Division/Group			
Cal OES LE		Branch			
Cal Trans		Division/Group			
Yreka CHP	Stacy Barr	Division/Group			
Siskiyou Sheriff	Jeremiah LaRue	Division/Group			
Yreka PD	Mark Gilman	Division/Group			
Timber Representative	Darren Quigley	Branch			
Board of Supervisors	Ray Haupt	Division/Group			
Director Public Works	Tom Deany	Division/Group			
BAER Lead	Bill Wall	Division/Group			
5. Planning Section:					
Chief		Branch			
Deputy		Division/Group			
Resources Unit		Division/Group			
Situation Unit	Matt Snyder (11/4)	Division/Group			
Demob Unit		Division/Group			
HRSP		Division/Group			
GISS	Dan LaBarre(11/4)	Branch			
Fire Behavior Analyst		Division/Group			
Incident Meteorologist		Division/Group			
Status Check In		Division/Group			
Training Tech Spec		Division/Group			
Info Tech. Support Specialist		Division/Group			
RIST PSC		Air Operations Branch			
6. Logistics Section					
Chief	Chuck House	Air Operations			
Logs Trainee		Air Tactical Group Supervisor			
Ordering Manager		Air Support Group Supervisor			
Supply Unit		Helibase Manager			
Facilities Unit		8. Finance/Administration Section:			
Security	Nathaniel Brdlik(11/3)	Chief	Sarah Rietz		
Ground Support Unit		Deputy Chief/Cost			
Communications Unit		Equipment Time			
Base Camp Manager		Equipment Time (Virtual)			
Medical Unit		Personnel Time (Virtual)			
Food Unit Leader		Cost Unit			
		IBA	Emily Towers		
Prepared By: Name: PSC		Frank Henderson		Signature: 	
ICS 203		Date/Time: 10/29/2022 2000 hours		NIMS IAP	

McKinney Weather – October 30 & 31

DISCUSSION

Dry conditions are expected beginning this afternoon and lasting through Sunday. An active weather pattern begins Monday as a strong cold front reaches the area. This approaching front will induce gusty west winds, especially across the higher terrain. Colder and wetter weather will occur near and behind this front Monday evening through Wednesday. Snow levels will drop to 6000 feet Monday evening and light snow/sleet accumulations will be possible across the ridges through Tuesday as the snow level lowers to 3000 feet by Tuesday evening.

SUNDAY 10/30

Sky/weather.....Sunny.

Max temperature.....Ridges: 52-59 degrees. Valleys: 70-74 degrees.

Min humidity.....Ridges:20-35 percent. Valleys: 27-32 percent.

Eye level winds.....Downslope 0-1 mph becoming upslope 1-3 mph in the afternoon.

Wind (20 ft).....Downslope 0-2 mph becoming upslope 2-5 mph in the afternoon.

CWR.....0 percent.

SUNDAY NIGHT 10/30

Sky/weather.....Mostly clear (10-20 percent).

Min temperature.....Ridges: 38-43 degrees. Valleys: 36-38 degrees.

Max humidity.....Ridges: 48-54 percent. Valleys: 75-90 percent.

Eye level winds.....West 2-5 mph with gusts up to 15 mph, mainly along the ridges.

Wind (20 ft).....West 4-7 mph with gusts up to 20 mph, mainly along the ridges.

CWR.....0 percent.

LAL.....1.

MONDAY 10/31

Sky/weather.....Mostly sunny (20-30 percent), with a 15% chance for light rain late in the afternoon.

Max temperature.....Ridges:54-72.


Min humidity.....30-45 percent.

Eye level winds.....Southwest 2-7 mph shifting to the west 6-10 mph with gusts to around 17 mph in the afternoon.

Wind (20 ft).....Southwest 4-10 mph shifting to the west 6-15 mph with gusts to around 25 mph in the afternoon.

CWR.....0 percent.

LAL.....1.

ICS 205 - INCIDENT RADIO COMMUNICATIONS PLAN										CONTROLLED UNCLASSIFIED INFORMATION//BASIC	
1. Incident Name:		McKinney			3. Operational Period:			Date From: 10/30/22			Date To: 11/05/22
		Incident Channels			Time From: 0700			Time To: 1900			
4. Communications											
Ch#	Function	Name	Assigned To	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes			
1	DISPATCH	KNF RPT T-1	All Divisions	171.5250	NONE	165.4125	110.9				
2	DISPATCH	KNF RPT T-2	All Divisions	171.5250	NONE	165.4125	123.0				
3	COMMAND	BLACK T-1	All Divisions	169.6375	NONE	168.7750	110.9				
4	COMMAND	BLACK T-2	All Divisions	169.6375	NONE	168.7750	123.0				
5	COMMAND	BLACK T-10	All Divisions	169.6375	NONE	168.7750	107.2				
6	COMMAND	RIVER T-2	All Divisions	172.2500	NONE	165.0750	123.0				
7	COMMAND	RIVER T-7	All Divisions	172.2500	NONE	165.0750	167.9				
8	COMMAND	RIVER T-10	All Divisions	172.2500	NONE	165.0750	107.2				
9	COMMAND	CDF SKU T-1	All Divisions	151.3250	NONE	159.3600	110.9	Communication with local Ambulances			
10	TACTICAL	NIFC T3	All Divisions	168.6000	156.7	168.6000	156.7				
11	TACTICAL	NIFC T5	Unassigned	166.7250	156.7	166.7250	156.7				
12	TACTICAL	NIFC T6	Unassigned	166.7750	156.7	166.7750	156.7				
13	TACTICAL	NIFC T7	Unassigned	168.2500	156.7	168.2500	156.7				
14	IA A/G	R5 A/G 43	A/G IA	167.6000		167.6000					
15	MEDICAL	CALCORD	CALCORD	156.0750	T6-156.7	156.0750	T6-156.7	Air Ambulance / Contact with Local Ambulances			
16	AIRGUARD	AIRGUARD	AIRGUARD	168.6250	NONE	168.6250	T1-110.9	<Emergency Use Only>			
17											
18											
19											
20											
5. Special Instructions											
6. Prepared by (Communications Unit Leader): Name: _____ Signature: 											
ICS 205 - CONTROLLED UNCLASSIFIED INFORMATION//BASIC											
										Date/Time: 10/29/2022 1930	

FINANCE MESSAGE

Fire Name: Mckinney
Fire Number: CA-KNF-006177
Accounting Code: P5 PX2F (0505)
Email: 2022.mckinney.finance@firenet.gov
Phone Number: 928-575-5808 (Sarah Rietz)

Finance Documents Needed upon "Check In" (If Not Already Submitted):

Please email these documents or scan the QR Code below, attach & submit.			
FED Equipment/ Crews:	Overhead:	Contract Equipment/ Contract Crews:	Cooperator:
<ul style="list-style-type: none"> Manifest - showing employment type (GS or WG) or AD rates if applicable 	<ul style="list-style-type: none"> AD/Casual Hire Form If regular Agency please ensure "GS" or "WG" is written on your first CTR 	<ul style="list-style-type: none"> Agreement Manifest Resource Order Inspections 	<ul style="list-style-type: none"> Cooperative Agreement Resource Order

When emailing finance:

- Overhead/FED: *subject line:* TIME, Resource #, Resource Name
- Equipment/Cooperator: *subject line:* EQTR, Resource #, Resource Name

Per the IC's letter dated 8/28, lodging and per diem have been authorized since the fire is currently not providing a camp, food, water. Therefore, federal and cooperators are to follow their agency's travel guidelines. Contractors are to comply with their contract.

Please note, in Yreka, California, US General Service Administrations (GSA) locality rate is \$98(as of 10/01/22) for lodging and per diem (includes food and water) is \$59.

For contractors, please note, the Government will pay actual lodging expenses or the per diem locality rate published by the GSA, whichever is less. Double occupancy of hotel rooms is required. Any associated lodging taxes are reimbursable as documented. Lodging receipts, as well as documentation by incident personnel that a campsite was not provided, shall be submitted as supporting documentation with payment documents.

All resources when demobbing MUST check out with finance in person at ICP.



SAFETY MESSAGE

SAFETY IS OUR FIRST PRIORITY

Fire fighter safety comes first on every fire, every time



Incident: McKinney Fire (Suppression Repair) | Date: October 30 – November 5, 2022

SAFETY THOUGHT

Incident attitude needs to stay positive so that it does not impair our ability to think clearly and act decisively.



MAJOR HAZARDS AND RISKS

A - Driving – traffic – mountain roads	D - Rehab Equipment	H- Communications
B - Steep Slopes	E - Rolling Debris / Rocks	I – Weather
C - Dehydration/Hypothermia (possibly even hyperthermia)	F - Wildlife / Livestock	J – Flash Flooding
	G – Hazard Trees	K – Lack of EMS on site

THINK-----SAFETY-----FIRST

Recognize Potential Hazards Ahead of Time!

Step Back
Think
Organize
Proceed



The cornerstone of safety is to take time to assess the job and its environment. In order to encourage this principle, please consider using the “STOP” acronym to act as a reminder to pursue all jobs in a safe manner.

MCKINNEY FIRE

FIRELINE EMERGENCY 0800-1900 HRS (DURING OPERATIONAL HOURS)

- First person on scene is incident commander of the incident within an incident (IWI) until relieved by a more highly qualified person (HEQB, TFLD, DIVS, etc)
- IWI IC contacts Division Supervisor with nature of incident and location.
- IWI IC contacts:
 1. Dispatch (“Yreka”) on Command (Black tone 1, 2 or 10)
 2. Closest incident medical resource (Line EMT/Medic/AMBU) on Command
- Dispatch notifies McKinney IC, who will notify:
 1. Medical Response
 2. Operations
 3. Safety
 4. Comps/Claims
 5. Agency Administrator
- Division Supervisor will support needs of the IWI.
- IWI IC will complete the Medical Incident Report (8 Line):
 1. Identify emergency: life threatening (red) or non-life threatening (yellow or green)
 2. Identify nature of emergency, # of patients, patient assessment
 3. Identify location, transport/evac possibilities
- Dispatch will mobilize ground and/or air ambulance as needed
 1. Contact incoming ground ambulance on CDF SKU Local tone 1 Channel 9
 2. Contact incoming air ambulance on CALCORD tone 6 Channel 15

AFTER-HOURS EMERGENCY 1900-0800 HRS

- Utilize 911 system to initiate medical response, **Identify yourself as a member of the McKinney Fire.**
- Contact your supervisor via phone with patient complaint/ condition and location.
- The 911 dispatch will contact Cal-Fire Dispatch who will in turn contact McKinney IC.
- McKinney IC contacts:
 1. Operations
 2. Safety
 3. Comps/Claims
 4. Agency Administrator

MEDICAL PLAN (ICS 206)

1. Incident Name: <p style="text-align: center;">McKinney</p>		2. Operational Period: Date From: 10/30/22 Date To: 11/05/22 Time From: 0700 Time To: 1900						
3. Incident Ambulances / Ambulance Services								
Name	Location	Contact Number/Freq	ALS					
Mount Shasta Ambulance	Yreka, CA	Yreka-YICC,9-1-1 530-841-4600	<input checked="" type="checkbox"/> Yes					
Happy Camp Ambulance	Happy Camp, CA	Yreka-YICC,9-1-1 530-841-4600	<input checked="" type="checkbox"/> Yes					
4. Air Rescue / Air Ambulance Services								
Ambulance Service	Phone	Type of Aircraft & Capability						
CHP H14	Yreka-YICC (530-841-4600), 9-1-1	HELICOPTER, ALS, 24/7 - HOIST						
MERCY AIR	Yreka-YICC,(530-841-4600), 9-1-1	AIR AMBULANCE ALS, 24/7 - NO HOIST						
REACH	Yreka-YICC, (530-841-4600), 9-1-1	AIR AMBULANCE ALS, 24/7 - NO HOIST						
PHI	Yreka-YICC, (530-841-4600),9-1-1	AIR AMBULANCE ALS, 24/7 - NO HOIST						
5. Hospitals:								
Hospital Name	GPS Datum - WGS 84 Degrees Decimal Minutes	Phone / Address	Travel Time		Trauma Center	Burn Center	Helipad	
			Air	Ground				
U.C. DAVIS MEDICAL CENTER	N. 38° 33.2963' W. 121° 27.3918'	ER DIRECT LINE: 916-734-2011 2315 Stockton BLVD Sacramento, CA 95817	1.5 HRS	6 HRS	Level 1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
ASANTE ROGUE VALLEY MEDICAL CENTER	N. 42° 19.0505' W. 122° 49.8392'	ER DIRECT LINE: 541-789-7116 2825 Barnett Rd. Medford, OR 97504	20 MIN	2 HRS	Level 2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
MERCY MEDICAL CENTER MOUNT SHASTA	N. 41° 19.0943' W. 122° 19.2806'	ER Direct line: 530-926-9360 914 Pine St. Mount Shasta, CA 96067	45 MIN	1.5 HRS	Level 3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
FAIRCHILD MEDICAL CENTER	N. 41° 43.167' W. 122° 38.7483	ER Direct Line: 530-841-6292 444 Bruce St. Yreka, CA 96097	15 MIN	60 MIN	Level 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
6. Division / Crew Emergency Pre-Plan					Update and discuss with assigned resources daily.			
Fireline EMT / Medic's Division Location								
Air Hoist site locations: Lat: / Long: / Elevation:								
Helispot: Lat: / Long: / Elevation:								
8. Approved by (Safety Officer):					Signature: <i>Bruce Mally</i>			
ICS 206	NIMS IAP		Date/Time:	10/29/22	1800 <i>J</i>			

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) <i>Ex: "Communications, Div. Alpha. Stand-by for Emergency Traffic."</i>					
2. INCIDENT STATUS: Provide incident summary (including number of patients) and command structure. <i>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."</i>					
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^o – 3^o 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^o – 3^o 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			Brief Summary of Injury or Illness <i>(Ex: Unconscious, Struck by Falling Tree)</i>		
Transport Request			Air Ambulance / Short Haul/Hoist Ground Ambulance / Other		
Patient Location			Descriptive Location & Lat. / Long. (WGS84)		
Incident Name			Geographic Name + "Medical" <i>(Ex: Trout Meadow Medical)</i>		
On-Scene Incident Commander			Name of on-scene IC of Incident within an Incident <i>(Ex: TFLD Jones)</i>		
Patient Care			Name of Care Provider <i>(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. TRANSPORT 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: <i>Example: Paramedic/EMT, Crews, Immobilization Devices, AED, Oxygen, Trauma Bag, IV/Fluid(s), Splints, Rope rescue, Wheeled litter, HAZMAT, Extrication</i>					
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: <u>Considerations:</u> 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 ETA's of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.					