



Incident Action Plan

October 20-24, 2022



SRF Lightning Complex

CA-SRF-000620
P5PY38 (0510)

2022.lightningcomplex.finance@firenet.gov



Current Maps/ IAP

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: SRF LIGHTNING COMPLEX	2. Operational Period: Date From: 10/20/2022 Date To: 10/24/2022 Time From: 0700 Time To: 1900
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Strategic Direction
The SRF Lightning Complex is managed with a full suppression strategy. Firefighting resources will follow risk-based decision making and implement tactics that offer the highest probability of success to achieve the strategy of suppressing the fire and restoring suppression related damages while protecting local values.

Values at risk include the safety of the public and firefighters; privately and tribally held timberlands; the communities and outlying areas near Willow Creek, Hawkins Bar, Burnt Ranch, and Salyer; water, transportation, electrical infrastructure as well as natural and cultural resources.

Leaders' Intent
Everyone will work as a team to provide the highest level of service and safety while assigned to the incident. All assigned resources will ensure transparent, timely, and accurate communication at all levels of the incident while working to strengthen relationships with each other and with cooperators. All incident personnel should be prepared to take appropriate actions regarding:

- Safety - including the identification and mitigation of hazards to yourself and others.
- Timely and thoughtful risk-based decision making.
- Manage fatigue by taking breaks and maintaining work/rest cycles.
- Professional behavior, conduct, and timely/effective communication.
- Manage health and wellbeing and environmental impacts by following common sense, practicing good hygiene, communicable disease mitigations, and recycling.

Management Objectives

- Provide for firefighter and public safety through hazard recognition and application of the risk management process.
- Coordinate public information to provide timely and continuous situation updates to affected agency partners, cooperators, and public.
- Coordinate suppression and repair activities with READs to minimize impacts on natural and cultural resources.
- Effectively manage and track costs for all incidents identified within the SRF Lightning Complex.
- Reduce incident generated waste by encouraging recycling throughout the incident.

Control Objectives
Prevent the fire from spreading to private property, surrounding communities and values at risk.

Campbell Fire
- Keep the fire within the current perimeter.

Ammon Fire
- Keep the fire within the current perimeter.

5. Site Safety Plan Required? No

Approved Site Safety Plan(s) Located at:

6. Incident Action Plan

<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 215A	<input type="checkbox"/> Line Order Form	<input type="checkbox"/> Suppression Repair Cheat Sheet
<input checked="" type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 220	<input type="checkbox"/> Training Message	<input checked="" type="checkbox"/> COVID Message
<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Weather Forecast	<input checked="" type="checkbox"/> Camp Map	<input type="checkbox"/> HR Message
<input checked="" type="checkbox"/> ICS 206	<input type="checkbox"/> Fire Behavior	<input type="checkbox"/> Demob List	<input type="checkbox"/>
<input type="checkbox"/> ICS 208	<input type="checkbox"/> Fire Behavior Advisory	<input checked="" type="checkbox"/> Finance Message	<input checked="" type="checkbox"/> ICS 214

7. Approved by Incident Commander: Ben Peterson, ICT4(t) Signature:

ICS 202 NIMS IAP

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operational Period: 0700-2100	
2022 SRF LIGHTNING COMPLEX		Date/Time From: 10/20/2022 0700 THU	Date/Time To: 10/24/2022 2100 MON
3. Incident Commander(s) and Command Staff:			
IC/UC	FERMIN SANCHEZ [LWD 10/23] 707-951-6510		
IC TRAINEE	BEN PETERSON [LWD 10/26] 707-499-6499 (T)		
INFORMATION OFFICER	MARITZA GUZMAN 707-672-3184		
4. Agency/Organization Representative(s):			
Agency/Organization	Name		
SRF AA	NOLAN COLEGROVE		
SRF AR	JEN DYER		
BIA AA	NATHAN GOGNA		
DFMO	FRED BURGER		
ADFMO	BRYAN LANNING		
HOOPA TRIBE	GREG MOON		
YUROK TRIBE	ROD MENDES		
5. Planning Section:			
PSC3	MARK HUFF (V) 720-480-3429 (T)		
ITSS	LYDELL BELL [LWD 10/31] (T)		
GIS SPECIALIST	BRANDY CLARK 707-362-9491		
6. Logistics Section:			
LSC3	JASON NIEHAUS 707-572-6211 (T)		
7. Operations Section:			
TFLD	GEORGE CHAMBERS [LWD 10/24] 208-589-9824		
8. Finance/Administration Section:			
FSC2	DENISE MIDDLESWORTH [LWD 10/31] 406-249-2428		
COST UNIT	MARLENE PROTSMAN [LWD 10/29]		
TIME UNIT	NICHOLE L NICKOLS [LWD 10/22]		
EQTR	TIFFANY WARD [LWD 10/21]		
PTRC	ALYSSA KELLY (V)		
PROCUREMENT UNIT	BONNY JOHNSON (V)		
9. Prepared By:		Position/Title:	Signature:
Name: MARK HUFF		PSC3(T)	<i>Mark Huff</i>
ICS 203	IAP Page	Date/Time: 10/19/2022 1328	

Spot Forecast for SRF Lightning Complex...Thursday 10/20

DISCUSSION...Warm and dry conditions will continue across the area through Thursday, with slightly cooler weather expected Friday, and then sharply cooler weather probable during the weekend. In addition, north-northwest winds gusting to 20-30 mph across exposed terrain are forecast to occur in the wake of a cold front Saturday and Sunday. Light rain is also expected Saturday, followed by drier and milder conditions Monday, and then additional rainfall during the middle to late portions of next week.

THURSDAY...

Sky/weather.....Sunny then becoming partly cloudy.

CWR.....0 percent.

LAL.....1.

Max temperature.....75-83.

Min humidity.....12-17 percent.

Wind (20 ft).....South winds 5 to 6 mph shifting to the west 5 to 9 mph in theafternoon.

Transport winds.....North around 3 mph.

THURSDAY NIGHT...

Sky/weather.....Mostly cloudy then becoming mostly clear.

CWR.....0 percent.

LAL.....1.

Min temperature.....53-56.

Max humidity.....38-45 percent.

Wind (20 ft).....Northwest winds 5 to 9 mph shifting to the east 5 to 7 mphafter midnight.

Transport winds.....North around 4 mph.

FRIDAY...

Sky/weather.....Sunny then becoming partly cloudy.

CWR.....0 percent.

LAL.....1.

Max temperature.....63-71.

Min humidity.....25-33 percent.

Wind (20 ft).....North winds 5 to 8 mph shifting to the northwest 7 to 14 mphin the afternoon.

Transport winds.....North around 5 mph.

FORECAST DAYS 3 THROUGH 7...

SATURDAY...

Cooler. Mostly cloudy with chance of showers. Lows 42 to 47. Highs 46 to 55.

Northwest winds around 12 mph.

SUNDAY...

Partly cloudy. Slight chance of showers. Lows near 40. Highs 46 to 57. Northwest winds around 6 mph.

MONDAY...

Partly cloudy with chance of showers. Lows in the lower to mid 40s. Highs 51 to 63. Winds generally less than 5 mph.

TUESDAY...

Partly cloudy with chance of showers. Lows in the mid 40s. Highs in the upper 50s.

WEDNESDAY...

Mostly cloudy with chance of showers. Lows in the mid 40s. Highs in the lower 50s.

Division/Group Assignment List (ICS 204 WF)
Controlled Unclassified Information//Basic


1. Incident Name:				3.		
2022 SRF LIGHTNING COMPLEX				Branch:	Division/Group	
2. Operational Period: 0700-2100						
Date/Time From: 10/20/2022 0700 THU		Date/Time To: 10/24/2022 2100 MON		SRF LIGHTNING COMPLEX		
4. Operations Personnel						
TFLD	GEORGE CHAMBERS					
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
O-971 HEQB JUSTIN M LUSK (T)		10/24		1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-940 HEQB STEPHEN C DUBIE (T)		10/23		1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
E-614 EXC2 FRANK ZABEL TRUCKING INC.		10/24	FRANK ZAEBEL	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
E-415 EXC2 TOM'S EARTHMOVING		10/22	STEVEN FUNES	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
E-573 CHP1 WARNER ENTERPRISES, INC		11/01	BILL NIEMANN	3	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
E-82 DZR2 MILLER TRUCKING 2		10/23	HAROLD MILLER	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
C-155 CR2I UKONOM		10/24	BERG/PETERS	19	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
E-316 GRD2 HUMPHREY 316		10/23	RONALD HUMPHREY	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
E-472 WTS2 DARRAH LOGGING		11/08	BODIE	1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
E-476 WTS2 DARRAH LOGGING		11/03	JOE CORP	1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-954 TFLD GEORGE HENRY CHAMBERS		10/24		1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-968 HEQB CARL BERNARDI		10/25		1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-965 FELB JAKE MCCAULEY DAVIS		10/25		1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-966 FELB JOSHUA T BLOCK (T)		10/25		1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-586 FMOD LONE PINE CUTTING		10/26	RANDALL BELL	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-585 FMOD TIMBERWOLF		10/26	ROCKY SULLIVAN	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-531 FMOD PACIFIC RIDGELINE		10/25	SERGIO SOTO	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
	See Comm Plan					
9. Prepared By (Resource Unit Leader)		Approved By (Planning Section Chief)		Date	Time	
M HUFF		MARK HUFF		10/19/2022	1328	

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1. Incident Name:			3.			
2022 SRF LIGHTNING COMPLEX			Branch:		Division/Group	
2. Operational Period: 0700-2100			SRF LIGHTNING COMPLEX			
Date/Time From: 10/20/2022 0700	THU	Date/Time To: 10/24/2022 2100				
4. Operations Personnel						
TFLD	GEORGE CHAMBERS					
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time	
O-484 FMOD NORTH ZONE FALLERS	10/31	HOMER BENNETT	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
O-485 FMOD NORTH ZONE FALLERS	10/30	MIKE LEE	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
O-978 SMOD - ELK MTN	10/26	WHEELER WAGENET	14	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-419 EXC2 HACKER MACHINES LLC	10/31	DOUG WALKER	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-534 EXC3 DEANS INNOVATIONS	11/03	GARY HAYES	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-535 EXC4 DEAN INNOVATIONS	11/03	ETHAN MICHAELS	1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-578 SKD1 CECIL LOGGING, INC	10/30	DENNIS PALMER	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-612 SKD2 CECIL LOGGING	10/24		2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-462 SKG2 LET-ER-BUCK	10/29	DARREN WARD	1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-611 CHP1 DAVIS CORPORATION	11/06	JOSE FABELA	3	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-587 LOGL CHILTON LOGGING	10/28		2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-613 DUMP ZABEL TRUCKING -	10/24	BRYAN PHILIPS	1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-615 DUMP DUMP - ZABEL TRUCKING	10/28	GARY WOODS	1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-482 WTS1 NORTHSTATE	11/06	KEMBER BAKER	1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-605 ENG6 ENG6 - 9561	10/29	DERRICK BRANHAM	5	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-608 ENG6 ENG6 - 9462	10/23		3	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
E-261 AMB2 ROUGH COUNTRY	10/25	CHAS CARLSON	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800	
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
	See Comm Plan					
9. Prepared By (Resource Unit Leader)		Approved By (Planning Section Chief)		Date	Time	
M HUFF		MARK HUFF		10/19/2022	1328	

Division/Group Assignment List (ICS 204 WF)
Controlled Unclassified Information//Basic

1. Incident Name:				3.		
2022 SRF LIGHTNING COMPLEX				Branch:	Division/Group	
2. Operational Period: 0700-2100						
Date/Time From: 10/20/2022 0700 THU		Date/Time To: 10/24/2022 2100 MON		SRF LIGHTNING COMPLEX		
4. Operations Personnel						
TFLD	GEORGE CHAMBERS					
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
E-548 MESU WILDERNESS MEDICS INC		10/25	DUSTIN ERICKSON	4	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-961 MESU REMS - HART		10/26	JOE DECKER	2	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-351 READ CAW-TEP WOLFE LEE SYLVIA		11/01		1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-552 READ EUGENE MASTEN		10/24		1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
O-812 READ JEFFERY MARSHALL		11/05		1	BIG ROCK DAY USE/0800	LOCAL/SELF SUFFICIENT/1800
6. Control Operations/Work Assignments:						
<ul style="list-style-type: none"> • Implement rehabilitation operations in conjunction with Resource Advisors • Repair hand and mechanical control line to identified standards • Check and clear culverts impacted by the incident and repair roadways 						
7. Special Instructions:						
<ul style="list-style-type: none"> • Camping is available at Big Rock Day Use Area. See map in this IAP 						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
	See Comm Plan					
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
M HUFF			MARK HUFF		10/19/2022	1328

INCIDENT RADIO COMMUNICATIONS PLAN I-205				1. INCIDENT NAME		2. DATE/TIME PREPARED		3. OPERATIONAL PERIOD DATE/TIME			
				SRF LIGHTNING COMPLEX		9/30/22 1130		10/20/22 0800- 10/24/2022 2200			
4. BASIC RADIO CHANNEL UTILIZATION											
Ch #	Function	Channel Name	Assignment	RX Freq	NW	RX Tone/NAC	TX Freq	NW	TX Tone/NAC	Mode Analog (A) Digital (D) Mixed (M)	Remarks
1	COMMAND	FOREST RPT	ALL DIVISIONS	172.3750	N	0.0	164.1750	N	141.3	A	HORSE MOUNTAIN (TONE 13)
2	COMMAND	ADMIN RPT	ALL DIVISIONS	170.4750	N	0.0	165.7500	N	141.3	A	BACKUP TO FOREST RPT
3	INITIAL ATTACK	R5 PROJ	ALL DIVISIONS	168.6625	N	0.0	168.6625	N	0.0	A	R5 PROJECT
4	INITIAL ATTACK	TAC 2	ALL DIVISIONS	168.2000	N	0.0	168.2000	N	0.0	A	NIFC TAC 2/ R5 CREW NET
5	INITIAL ATTACK	TAC 5	ALL DIVISIONS	167.1125	N	0.0	167.1125	N	0.0	A	R5 TAC 5
6	A/G	A/G PRI	ALL DIVISIONS	167.6000	N	0.0	167.6000	N	0.0	A	FS AIR TO GROUND PRIMARY A/G 43
7	SECONDARY A/G	SEC A/G	ALL DIVISIONS	166.8750	N	0.0	166.8750	N	0.0	A	SECONDARY AIR TO GROUND
8	TACTICAL	TAC 1	CAMPBELL	168.0500	N	136.5	168.0500	N	136.5	A	TX/RX (TONE 4)
9	TACTICAL	TAC 3	AMMON	168.6000	N	136.5	168.6000	N	136.5	A	TX/RX (TONE 4)
10	TACTICAL	TAC 6	UNASSIGNED	168.7750	N	136.5	168.7750	N	136.5	A	TX/RX (TONE 4)
11	COOPERATOR RESPONSE	HIARPT>6	ALL DIVISIONS	155.3850	N	0.0	150.8050	N	156.7	A	HOOPA FIRE REPEATER (TONE 6)
12	COOPERATOR RESPONSE	SHFRPT>5	ALL DIVISIONS	171.5750	N	0.0	165.0125	N	165.0	A	SHASTA TRINITY FOREST NET (TONE 5)
13	COOPERATOR RESPONSE	HUM CF>3	ALL DIVISIONS	154.0700	N	0.0	159.0000	N	131.8	A	HUMBOLDT COUNTY FIRE (TONE 3)
14	COOPERATOR RESPONSE	TRICOM	ALL DIVISIONS	154.7850	N	0.0	158.7600	N	141.3	A	TRINITY COUNTY FIRE (TONE 13)
15	MEDICAL	CALCORD	EMS AIR	156.0750	N	0.0	156.7000	N	156.7	A	MEDEVAC COORDINATION (TONE 6)
16	AIRGUARD	AIRGUARD	EMERGENCY	168.6250	N	0.0	168.6250	N	110.9	A	EMERGENCY ONLY
5. Special Instructions: CLONE SRF924											
6. I-205 Prepared By: Communications Unit Leader				Name: JASON NIEHAUS LSC3(T)				Signature: 			

MEDICAL PLAN (ICS 206)

1. Incident Name:	2. Operational Period: Date From: _____ Time From: _____	Date To: _____ Time To: _____
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3. Medical Aid Stations:			
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

4. Transportation (indicate air or ground):			
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS

5. Hospitals:							
Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

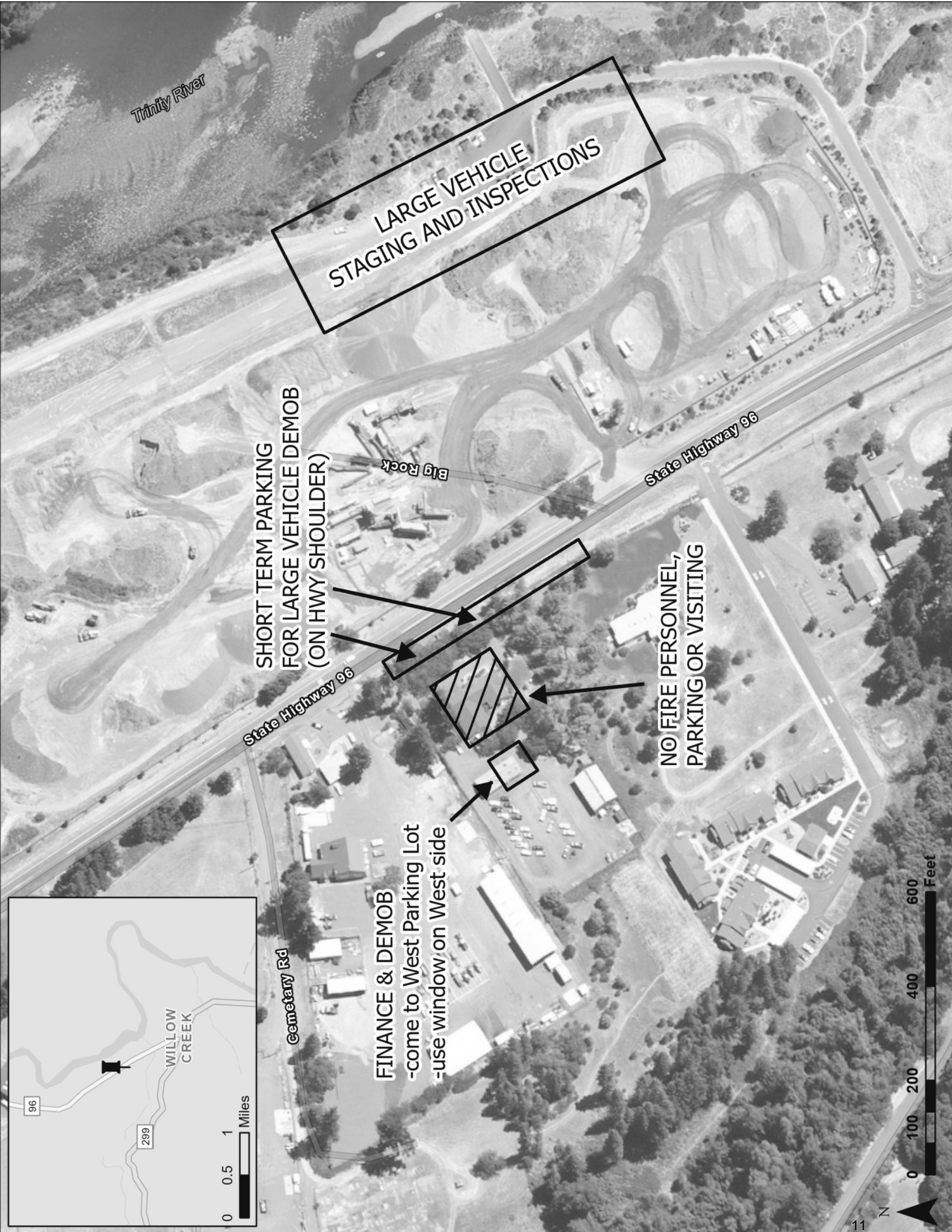
6. Special Medical Emergency Procedures:	
<p>Line "Medical Emergency"</p> <p>Crew Supervisor to contact Task force leaders/ICs with:</p> <ul style="list-style-type: none"> • Patient Complaint, Condition and Location via Command Channel for Red/Yellow patients <p>Triggers Incident within Incident</p> <p>Point of Contact (POC) will run the "Medical-Emergency" on Command</p> <p>POC to use Medical Plan (ICS 206 WF) worksheet in IAP or IRPG</p> <p>POC will contact <u>North Coast Dispatch</u> via Command or 707-441-3644</p>	<p>Line "Non-Emergency"</p> <p>Crew Supervisor to contact Task force leaders/ICs with:</p> <ul style="list-style-type: none"> • Patient Complaint, Condition and Location via Command Channel for Green patients <p>DOES NOT trigger Incident within Incident</p> <p>Point of Contact (POC) will run the "Non-Emergency Incident" on Command</p> <p>POC to use Medical Plan (ICS 206 WF) worksheet in IAP or IRPG</p> <p>POC will contact determine notification</p>

7. Prepared by (Plans Section): Name: _____ Signature: _____

8. Approved by (ICT4 (t)): Name: _____ Signature: _____

ICS 206	IAP Page _____	Date/Time: _____
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COVID-19 PLAN	1. INCIDENT NAME 2022 SRF Lightning Complex	2. DATE PREPARED 09/25/2022	3. TIME PREPARED 1500	4. OPERATIONAL PERIOD 10/20/22 – 10/24/22	
	5. INCIDENT MEDICAL AID STATIONS				
MEDICAL AID STATIONS		LOCATION		ALS	
				YES	NO
ROUGH COUNTRY AMBULANCE		Drop Point 185 (may vary, contact via radio)		X	
REMS 4		Drop Point 170 (may vary, contact via radio)		X	
6. LOCAL SUPPORT					
A. OFF-SITE ISOLATION FACILITIES					
NAME		LOCATION		PHONE	
				MEDICAL	
				YES	NO
MOTEL 6		1934 Broadway, Eureka, CA 95501		707-497-4481 POC: Pedro Matias	
B. MEDICAL FACILITIES					
NAME		LOCATION		TESTING	
				YES	NO
WILLOW CREEK COMMUNITY HEALTH CENTER		WILLOW CREEK, CA (530) 629-3111		X	
MAD RIVER COMMUNITY HOSPITAL		ARCATA, CA (707) 822-3621		X	
ST. JOSEPH HOSPITAL		EUREKA, CA (707) 445-8121		X	
7. COVID-19 PROCEDURES					
<u>FOR SYMPTOMATIC PERSONNEL</u>			<u>FOR DEMOBILIZING PERSONNEL</u>		
<ul style="list-style-type: none"> Symptomatic personnel must notify supervisor upon symptom onset and isolate from others immediately. 			<ul style="list-style-type: none"> Screening testing is recommended for all demobilizing personnel prior to travel. Personnel may alternately take a test kit home with them. 		
<ul style="list-style-type: none"> Supervisor notifies DIVS/TFLD. DIVS/TFLD notifies I.C. or I.C.(t) 			<ul style="list-style-type: none"> Incident-provided test kits are self-administered OTC tests. All personnel are expected to read and follow all manufacturer's instructions for use and storage. 		
<ul style="list-style-type: none"> I.C. or I.C. (t) notifies Neil Dresser (707) 798-7833 			<ul style="list-style-type: none"> Positive test results for all personnel should be reported to Neil Dresser @ (707) 798-7833 		
<ul style="list-style-type: none"> Self-administered testing and contact assessment will be coordinated for affected personnel. 					
<ul style="list-style-type: none"> R-5 Response Action Process will be referenced for appropriate follow-up. 					
<ul style="list-style-type: none"> For positive/exposed USFS and Cooperator personnel, logistical needs and reporting will be coordinated by Neil Dresser (707) 798-7833 					
<ul style="list-style-type: none"> For positive/exposed Contractor personnel, logistical needs are the responsibility of the Contractor. 					
ICS COVID-19 206	9. PREPARED BY (FOREST SAFETY MANAGER) NEIL DRESSER, (707) 798-7833 / neil.dresser@usda.gov		10. REVIEWED BY (INCIDENT COMMANDER)		



Trinity River

LARGE VEHICLE
STAGING AND INSPECTIONS

SHORT TERM PARKING
FOR LARGE VEHICLE DEMOB
(ON HWY SHOULDER)

Big Rock

State Highway 96

State Highway 96

NO FIRE PERSONNEL,
PARKING OR VISITING

FINANCE & DEMOB
-come to West Parking Lot
-use window on West side

Cemetary Rd

WILLOW
CREEK

96

299

0 0.5 1 Miles

0 100 200 400 600 Feet



Will the following resources please contact Finance. We have questions.

E-472 Need shift tickets 10/4 through today

E-548 Need mileage for 10/11

E-261 Need shift ticket 10/8

E-415 Need pre-inspection

E-482 Need Lodging receipts for 10/9 through 10/16

E-535 Need shift tickets 10/10-10/12

E-578 Shift tickets do not reflect transport retained 9/25-10/2 and missing shift ticket for 10/8

E-587 Need shift ticket for 10/9

E-612 Need shift ticket for 10/12

E-613 Need ALL shift tickets since arrival

E-614 Need ALL shift tickets since arrival

E-615 Need ALL shift tickets since arrival

O-968 Need CTRs 10/14 to current

ACTIVITY LOG (ICS 214)

1. Incident Name:	2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____	
3. Name:	4. ICS Position:	5. Home Agency (and Unit):
6. Resources Assigned:		
Name	ICS Position	Home Agency (and Unit)
7. Activity Log:		
Date/Time	Notable Activities	
8. Prepared by: Name: _____ Position/Title: _____ Signature: _____		
ICS 214, Page 1	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.