

# INCIDENT ACTION PLAN

# PINE INCIDENT

CA-LAC-144343

Friday



## OPERATIONAL PERIOD

5/14/2021 0700

to

5/15/2021 0700



# INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b> <p style="text-align: center;">PINE</p>	<b>2. Operational Period:</b>	Date From: 5/14/2021 Time From: 0700	Date To: 5/15/2021 Time To: 0700
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**3. Objective(s):**

Management Objectives

- Provide for emergency personnel and public safety at all times.
- Protect property, improvements, and infrastructure.
- Ensure repopulation takes place in a quick, efficient, and effective manner.
- Ensure coordinated, timely and accurate release of public information.
- Foster and maintain relationships with all cooperators and stakeholders.
- Protect economic, natural, cultural and heritage resources.
- Maintain fiscal accountability and keep costs commensurate with values at risk.

Control Objectives

- Keep the fire East of Jesus Canyon Road
- Keep the fire South of Highway 138
- Keep the fire West of Oasis Road
- Keep the fire North of Panorama Motorway

**General Situational Awareness:**

Rocky and rugged terrain, critically dry and receptive fuel beds, active area for fire history and drought stressed trees.

**5. Site Safety Plan Required?** Yes  No

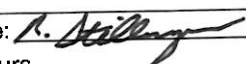
**Approved Site Safety Plan(s) Located at:**

**6. Incident Action Plan**

<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 215A	<input type="checkbox"/> Phone List	<input type="checkbox"/> Fire Suppression Repair Plan
<input checked="" type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 220	<input type="checkbox"/> Training Message	<input type="checkbox"/>
<input checked="" type="checkbox"/> ICS 205	<input type="checkbox"/> Incident Map	<input type="checkbox"/> Travel Map	<input type="checkbox"/>
<input checked="" type="checkbox"/> ICS 206	<input checked="" type="checkbox"/> Weather Forecast	<input type="checkbox"/> Demob Plan	<input type="checkbox"/>
<input checked="" type="checkbox"/> ICS 208	<input checked="" type="checkbox"/> Fire Behavior	<input checked="" type="checkbox"/> Finance Message	<input checked="" type="checkbox"/> ICS 214

<b>7. Prepared By:</b>	A. Yanagisawa/R. Stillwagon	Position/Title: PSC	Signature:
<b>8. Approved by Incident Commander:</b>	T. Stukey		Signature:

## ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b> PINE		<b>2. Operational Period: Date From:</b> 5/14/2021		<b>Date To:</b> 5/15/2021	
		<b>Time From:</b> 0700		<b>Time To:</b> 0700	
<b>3. Incident Commander(s) and Command Staff:</b>			<b>7. Operation Section:</b>		
IC/UC's	Tom Stukey	Operations	Mike Inman		
Deputy		Deputy Operations			
Safety Officer	John Hamer	Night Ops			
Information Officer		Staging Area			
Liaison Officer	CSR Mackey	<b>Branch</b>			
<b>4. Agency/Organization Representatives:</b>		Division/Group	A	Pat Sprengel	
Agency/Organization	Name	Division/Group	Z	Chad Hunter	
LAC	Jon O'Brien	Division/Group			
CAL Fire	Duran Goddy	Division/Group			
ANF	Seth Mitchell	Division/Group			
BDC	Chris Gormon	<b>Branch</b>			
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		<b>Branch</b>			
		Division/Group			
<b>5. Planning Section:</b>					
Chief	Al Yanagisawa	Division/Group			
Deputy	Richard Stillwagon	Division/Group			
Resource Unit	Juan Padilla / Patrick O'Neill (t)	Division/Group			
Situation Unit	John Hamer / Jay Sartoris (t)	<b>Branch</b>			
Documentation Unit		Division/Group			
Demobilization Unit		Division/Group			
GISS		Division/Group			
FBAN	Garett Hazelton	Division/Group			
IMET		Division/Group			
Training Tech Spec		<b>Air Operations Branch</b>	<b>Director:</b>		
		Air Support Group Supervisor			
		Air Tactical Group Supervisor			
		Helibase Manager			
<b>6. Logistics Section</b>					
Chief	Scott Garner				
Supply Unit		<b>8. Finance/Administration Section:</b>			
Facilities Unit	Daniel Sheng	Chief	Muriel Jones / Jack Franklin		
Ground Support Unit	Mark Martinez	Time Unit			
Communications Unit	Travis Wight	Procurement Unit			
Medical Unit	Eric Goetz	Comp/Claims Unit			
ORDM	Juan Cueva	Cost Unit	Tammy Hasert		
<b>Prepared By: Name:</b> Yanagisawa / Stillwagon		<b>Position/Title:</b> PSC		<b>Signature:</b> 	
<b>ICS 203</b>		<b>Date/Time:</b> 5/13/2021 2300 hours		<small>NIMS IAP</small>	

.DISCUSSION...

Warm and dry conditions with gusty south to southwest winds are expected through the period. The winds will increase through the day, becoming southerly and gusty in the afternoon, strongest on Saturday. Lighter winds are expected for the overnight period. Afternoon humidities will be in the lower teens on Friday, and may rise a small amount on Saturday, by a percent or two. The overnight recoveries should also rise slightly as the marine layer deepens, but are likely to remain in the 35-40 percent range. More significant changes are expected for Sunday, with highs near 70 degrees, and humidities potentially rising around 20 percent for both the daytime and overnight periods. However, gusty onshore flow will continue.

.FRIDAY...

Sky/weather.....Sunny.

Max temperature.....82-85.

Min humidity.....10-12 percent.

Eye level winds.....Southwest 3-5 mph becoming south 4-8 mph with gusts to 10 mph in the afternoon.

Ridgetop.....Southwest 6-12 mph becoming south 10-20 mph with gusts to 25 mph in the afternoon.

.FRIDAY NIGHT...

Sky/weather.....Clear.

Min temperature.....57.

Max humidity.....35-40 percent.

Eye level winds.....South 4-8 mph with gusts to 12 mph in the evening, becoming southwest 4-6 mph overnight.

Ridgetop.....South 10-20 mph with gusts to 25 mph in the evening evening becoming southwest 10-15 mph overnight.

# FIRE BEHAVIOR FORECAST

FORECAST NUMBER: 002	TYPE OF FIRE: Wildfire
FIRE NAME: Pine	OPERATIONAL PERIOD: May 14, 2021
UNIT: LAC	TIME ISSUED: 1700 May 13, 2021
	SIGNED: GARRETT HAZELTON
	Typed/printed: Garrett Hazelton FBAN(T)

## INPUTS

### WEATHER SUMMARY:

**Day:** Sunny with temps around 83° RH min 10% *Eye Level Winds:* Southwest in the morning 3 to 5 mph then South at 4 to 8mph with gust to 10 mph. *Ridgetop Winds:* Southwest 6 to 12 mph then increasing to 10 to 20 mph with gusts to 25 mph in the afternoon.

**Night:** Clear temps around 57° RH min 35% *Eye Level Winds:* South 4 to 8 mph with gusts to 12 mph in the evening diminishing to 4 to 6 mph overnight. *Ridgetop Winds:* South 10 to 20 mph with gusts to 25 mph in the evening diminishing to 10 to 15 mph overnight.

**Extended:** The onshore winds are forecasted to continue to thru Saturday with Sunday returning to temps in the 70s and Rh near 50%

## OUTPUTS

### FIRE BEHAVIOR

**GENERAL:** Fire activity was minimal with no increase in acreage. Larger fuels will be entering into the latter stages of complete burn down; with isolated pockets of latent heat left in the 100hr and 1000hr fuels. Suppression efforts have been successful in lessening threats to the fire line from any remaining heat in the larger fuels.

#### Fuels:

South end of the fire is a blend of Pinyon-juniper and Yucca with annual grasses understory fuels then transition to sparse grasses and desert shrubs to the north. There is a recent burn scar on the north end that limits fire spread. Lack of rain this season has resulted in 100hr and 1000hr fuels setting record low values.

### SPECIFIC:

Probability of Ignition: 100% at peak weather conditions

Spotting Potential: 1/4 mile possible from ridge tops when supported with wind.

All Divisions: As the fire is entering into the smoldering phase the threat of vertical whirls caused by the solar heating of the recent burn area can move an ember across the fire line into unburned fuels and generate an unplanned ignition. Any unplanned ignition that are within the heavy fuels could be resistant to control efforts with supported by the strong afternoon winds. The area adjacent to the burn scar should be better suited for directed attack given the lighter fuel loading.

**AIR OPERATIONS:** Watch for snags and burned trees if dropping water around crews.

### SAFETY:

As the larger fuels burn down be alert for ash pots and smoldering material that can cause burns.



# ASSIGNMENT LIST (ICS 204 WF)

<b>1. Incident Name:</b> <b>PINE</b>	<b>2. Operational Period:</b> Date From: 05/14/21 Date To: 05/15/21 Time From: 0700 Time To: 0700	<b>3. Branch</b> <b>Z</b> <b>Division</b> <b>Zulu</b>
<b>4. Operations Personnel:</b>		Page 1 of 1

Operations Section Chief: <b>Mike Inman</b>	Night Ops:
Branch Director:	Branch Safety:
Division/Group Supervisor: <b>Chad Hunter</b>	Air Attack:


5. Resources Assigned:		** Resources Below in Bold are 12 Hour **					Hours	Reporting Location
Resource Identifier	ALS	LWD	Leader	Personnel	Request #			
CRW BDU Pilot Rock 1			<b>Peteeso</b>	18	<b>C-11</b>		<b>ICP</b>	
CRW BDU Pilot Rock 2			<b>Skul</b>	18	<b>C-12</b>		<b>ICP</b>	
S/T ENG T3 LAC 1151C			<b>J. Stangl</b>	22	<b>E-53</b>		<b>ICP</b>	
S/T ENG T3 VNC 9324C			<b>R.Szczetaneck/A.Romero(t)</b>	17	<b>E-22</b>		<b>ICP</b>	
WT LAC 128			<b>Browne</b>	2	<b>E-52</b>		<b>ICP</b>	
WT BDC 304			<b>Jerkins</b>	2	<b>E-60</b>		<b>ICP</b>	
WT BLM WT 3690				2	<b>E-61</b>		<b>ICP</b>	
SOFR Hamer			<b>John Hamer</b>	1			<b>ICP</b>	

**6. Work Assignments:**  
 Complete and validate any hand and dozer lines  
 Mop up minimum 300ft from structure perimeter  
 Mitigate any interior smokes  
 Validate and report damages or lost values at risk  
 Identify any suppression repair needs

**7. Special Instructions:**  
 Watch your speed on dirt road and maintain pedestrian situation awareness.

**8. Communications**

Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
LAC V-1	1	COMMAND	152.1500	T14 - 151.4	158.6100	T14 - 151.4	
LAC V-11D	3	TACTICAL	154.4300	CSQ	154.4300	T14 - 151.4	
LAC V-13D	14	Air-to-Ground	159.0900	T14 - 151.4	159.0900	T14 - 151.4	
LAC BLU11	15	ADMIN	470.5875	CSQ	473.5875	T14 - 151.4	
AIR GUARD	16	EMERGENCY	168.6250	CSQ	168.6250	T1 - 110.9	

**9. Prepared by: Name:** Juan Padilla      RESL      Signature: 

ICS 204      Date/Time: 5/13/2021 2200      Personnel Count: 82



INCIDENT RADIO COMMUNICATIONS PLAN		Incident Name		PINE		Date/Time Prepared		Operational Period Date/Time					
Utilization of any frequency other than those listed on this form are prohibited, subject to fines by the FCC and demobilization from the incident.		5/13/21 1600		5/14/21 0700 - 5/15/21 0700									
Zh	Function	Channel Name/Talkgroup Radio System	Assignment	RX Freq	N or W	RX Tone/NAC	TX Freq	N or W	Tx Tone/NAC	Dev	Pwr	Mode	Remarks
Zn2	ADMIN	LAC BLUE11	IC/LA	470.5875		CSQ	473.5875		Tone 14 151.4	W	H	A	
Zn4	COMMAND	LAC V-1	OPERATIONS	152.1500		Tone 14 151.4	158.6100		Tone 14 151.4	N	H	A	
Zn4	TACTICAL	LAC V-8D	DIV A	154.0700		Tone 14 151.4	154.0700		Tone 14 151.4	N	H	A	
Zn4	TACTICAL	LAC V-11D	DIV Z	154.4300		CSQ	154.4300		Tone 14 151.4	N	H	A	
Zn4	Air-to-Ground	LAC V-13D	ALL PERSONNEL	159.0900		Tone 14 151.4	159.0900		Tone 14 151.4	N	H	A	
Zn4	EMERGENCY	AIR GUARD	ALL PERSONNEL	168.6250		CSQ	168.6250		Tone 1 110.9	N	L	A	EMERGENCY ONLY
Prepared By (Communications Unit Leader)										Llano			
Grant Grunbaum										County: LAC State: CA Latitude: " N Longitude: W			
The convention calls for frequency lists to show four digits after the decimal place (five digits for 700 MHz frequencies). The letter "U", "N", or "W" in the deviation (Dev) column reflects whether the frequency is ultranarrow (6.25 kHz), narrow (12.5 kHz) or wide band (25 kHz). Mode refers to either "A" indicating Analog, "D" indicating Digital (e.g. Project 25) or "M" indicating Mixed Mode. All channels are shown as if programmed in a control station, mobile or portable radio. Repeaters (and depending on use, base stations) must be programmed with the Rx and Tx reversed.													



# MEDICAL PLAN (ICS 206)

<b>1. Incident Name: Pine Incident</b>	<b>2. Operational Period: Date From: 05/14/21</b> Time From: 0700	<b>Date To: 05/15/21</b> Time To: 0700
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<b>3. Medical Aid Stations:</b>			
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?
Sq 4124	SBCoFD FS13 10433 Mountain Ave. Pinion, CA.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ESU 93	ICP		

<b>4. Transportation (indicate air or ground):</b>			
Location	Contact Number(s)/Frequency	Level of Service	
AMR 113 (Ground) LACoFD (AIR) ALS	SBCoFD FS13 10433 Mountain Ave. Pinion, CA. Contact Command and Control	Gusman (818) 731-3814 (323) 881-6183	<input type="checkbox"/> ALS <input checked="" type="checkbox"/> BLS

<b>5. Hospitals:</b>							
Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
Palmdale Regional MC (LCH)	38600 Medical Center Dr. Palmdale, CA. N34.34.95'/W118.08.73'	(661) 382-5200	15	45	<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
San Antonio Community Hospital (SAC)	999 San Bernardino Rd. Upland, CA. N34.06.15'/W117.38.18'	(909) 985-2811	15	45	<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Antelope Valley Hospital (AVH)	1600 West Avenue J Lancaster, CA. N34.41.28'/W118.09.52'	(661) 723-7181	15	50	<input checked="" type="checkbox"/> Yes Level: 2	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Grossman Burn Center	7325 Medical Center Dr. West Hills CA. 91307 N34.12.10'/W118.37.47'	(818) 678-4000	10	25	<input type="checkbox"/> Yes Level: _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
LAC + USC Medical Center	1200 North State Street Los Angeles, 90033 N34.03.345 / W 118.12.48	(323) 226-2622	15	45	<input checked="" type="checkbox"/> Yes Level: 1	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**6. Medical Emergency Procedures:**  
**In the event of a medical emergency follow the 8-Step Medical Incident Report, pages 118-119 of the IRPG.**

1. Contact Communications
  - a. "Stand-by for Emergency Traffic"
2. Incident Status:
  - a. Severity of Emergency (Red/Yellow /Green)
  - b. Nature of injury/illness/MOI
  - c. Transport request (Air, ground)
  - d. Patient Location (Lat/Long, WGS84)
  - e. Incident name (Geographic name + medical)
  - f. Incident Commander
  - g. Patient Care (provider name)
3. Initial patient assessment - Refer to Page 106
4. Develop transport plan
  - a. Air/Ground, Need for hoist, drop point, Helispot
5. Determine need for additional resources
6. Confirm Communications
  - a. A/G EMS Frequencies
7. Contingency Plan
8. Additional Information
  - a. Updates/changes, etc.

**In Camp Emergency: Contact Medical Unit at ICP**

**EMERGENCY REPORTING WORKSHEET**

SEVERITY RED (Immediate) YELLOW (Delayed) GREEN (Minor)

NATURE OF EMERGENCY \_\_\_\_\_

LOCATION OF PATIENT \_\_\_\_\_

TRANSPORTATION REQUESTED BY: AIR\_\_ GROUND\_\_

POINT OF PICKUP \_\_\_\_\_

WGS84 LAT \_\_\_\_\_ LONG \_\_\_\_\_

PATIENT UNIT ID \_\_\_\_\_

REMINDER: **DO NOT** GIVE PT NAME OVER RADIO

IS AN EMT WITH PATIENT: YES \_\_\_\_ NO \_\_\_\_

AGE \_\_\_\_\_ SEX: MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

**ALL EMERGENCIES--Secure the area and identify witnesses for later investigation. Keep an accurate log of events.**

**NOTE: IWI NOTIFICATIONS**

1. Incident Commander
2. Operations
3. Safety Officer
4. Medical Unit Leader

7. Prepared by (Medical Unit Leader): Name: A. Linton MEDL(t) Signature: \_\_\_\_\_

8. Approved by (Safety Officer): Name: J. Hamer Signature: \_\_\_\_\_

ICS 206 IAP Page \_\_\_\_\_ Date/Time: 05/14/2021

# SAFETY MESSAGE/PLAN (ICS 208)

<b>1. Incident Name:</b> PINE	<b>2. Operational Period:</b> Date From: 05/14/21 Time From: 0700	Date To: 05/15/21 Time To: 0700
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**3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan:**

### SPECIFIC HAZARDS AND RISKS:

- Downed Power Lines
- Roadway Safety
- Rattlesnakes
- Trip Hazards
- Communications
- Fatigue & Over Exertion
- COVID-19 Prevention & Proper PPE

### NARRATIVE

- Don appropriate PPE in the operational area and within the ICP.
- Be sure all personnel have been briefed. Be sure to check communications on your Division prior to initiating work assignments. Be sure you can hear and be heard.
- Provide Look Outs for identified hazard areas within operational area.
- Maintain a high level of Situational Awareness and report hazards.
- Provide for appropriate work rest cycles during the operational period: maintain hydration and food intake.
- Contact your supervisor and incident safety officer of any injury or illness.
- Ask if you do not know – Ask questions in unfamiliar situations. The only dumb question is the one not asked.

### COVID-19 PREVENTATIVE MEASURES

- Adhere to agency COVID-19 policies and procedures to minimize risk of spread.
- Assess crew members and yourself for signs and symptoms throughout the shift.

**4. Site Safety Plan Required?** Yes  No   
**Approved Site Safety Plan(s) Located At:** N/A

**5. Prepared by:** Name: John Hamer Position/Title: Safety Officer Signature: 

ICS 208      IAP Page \_\_\_\_\_      Date/Time: 5/13/21

# LACOFD FINANCE MESSAGE



- **ALL LA COUNTY FIRE RESOURCES ASSIGNED TO THE PINE INCIDENT ARE TO COMPLETE A FORM 662**
- **INCIDENT # CA-LAC-144343**
- **BACKFILLED EMPLOYEES MUST SUBMIT A 662 ALSO**
- **THE 662 MUST BE COMPLETED AND SUBMITTED TO THE LACOFD FINANCE SECTION DURING DEMOB**

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# INCIDENT ACTIVITY REPORT FOR COST RECOVERY TYPE OR PRINT LEGIBLY

<b>Incident Name:</b> <small>(Street, Pothole, Faulty, Street Call, Staffing Pattern)</small> <b>PINE INCIDENT</b>	<b>Incident #:</b> <small>(LAC0912985 AMF552005, BDU-007229)</small> <b>CA-LAC-144343</b>	<b>Request #:</b> <small>(O-12, C-79, E-425)</small> <b>IO-12, C-79, E-425</b>	<b>Incident Assignment:</b> <small>(ST1180K, PSC1, ST1103A, DIV5)</small> <b>ST1180K, PSC1, ST1103A, DIV5</b>	<b>Unit Responded To:</b> <small>(Address, Intersection, ICP, Station, School/Park Name)</small>  
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Employee #:	Employee Name: Last	First Initial	Employee Title/Rank: <small>(BC, PFS, FS)</small>	Unit ID: <small>(W773, E27, CC13-4)</small>	Committed to Incident:		Returned to Quarters:		Incident Time:		Total Incident Hours:
					Date	Time	Date	Time	Regular Hrs	OT Hrs	
Vehicle/Equip Type: <small>(CCV, Engine, PU, Station)</small>	County Vehicle #:	Unit ID: <small>(W773, E27, CC13-4)</small>	Vehicle License #:	Odometer Start:	Odometer End:	Vehicle/Equip Total Miles:	Vehicle/Equip Total Hours:				

**Describe Incident Activities/Additional Assignment Information:**  
(Structure, Protection Group, Call Area, East Flank, Sand Bagging, IMT1, Division B, Staging, Backfill, Water Drops)

Report Prepared By: _____	Supervisory Approval By: _____
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Signature: \_\_\_\_\_ Employee #: \_\_\_\_\_ Date: \_\_\_\_\_

Attach a copy of the signed/approved timecard, or IPFIRS Screen #17, for each reported employee that includes the incident time described above.  
 Send package ASAP to: Cost Recovery Unit - Financial Management Division



## UNIT LOG (ICS 214)

<b>1. Incident Name:</b> <p style="text-align: center; margin: 0;">PINE</p>	<b>2. Operational Period:</b> Date From: 5/14/21 Date To: 5/15/21 Time From: 0700 Time To: 0700
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<b>3. Unit Name/Designators</b>	<b>4. Unit Leader (Name and ICS Position)</b>
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5. Personnel Assigned/Designators		
NAME	ICS POSITION	HOME BASE

6. Activity Log (Continue on Reverse)	
TIME	MAJOR EVENTS

<b>7. Prepared By:</b>	<b>Date/Time:</b>
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