

INCIDENT ACTION PLAN

PINE INCIDENT

CA-LAC-144343

Sunday - Monday



OPERATIONAL PERIOD

5/16/2021 0700

to

5/18/2021 0700



INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: <p style="text-align: center;">PINE</p>	2. Operational Period:	Date From: 5/16/2021 Time From: 0700	Date To: 5/18/2021 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

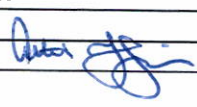
Approved Site Safety Plan(s) Located at:

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

7. Prepared By: A. Yanagisawa	Position/Title: PSC	Signature:	
8. Approved by Incident Commander:	T. Stukey	Signature:	

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: PINE		2. Operational Period: Date From: 5/16/2021		Date To: 5/18/2021	
		Time From: 0700		Time To: 0700	
3. Incident Commander(s) and Command Staff:			7. Operation Section:		
IC/UC's	Jurisdictional BC		Operations		
Deputy			Deputy Operations		
Safety Officer			Night Ops		
Information Officer			Staging Area		
Liaison Officer			Branch		
4. Agency/Organization Representatives:			Division/Group	A/Z	Kevin DeJong
Agency/Organization	Name		Division/Group		
			Division/Group		
			Division/Group		
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			Branch		
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5. Planning Section:					
Chief			Division/Group		
Deputy			Division/Group		
Resource Unit			Division/Group		
Situation Unit			Branch		
Documentation Unit			Division/Group		
Demobilization Unit			Division/Group		
GISS			Division/Group		
FBAN			Division/Group		
IMET			Division/Group		
Training Tech Spec			Air Operations Branch		Director:
			Air Support Group Supervisor		
			Air Tactical Group Supervisor		
			Helibase Manager		
6. Logistics Section			8. Finance/Administration Section:		
Chief	Scott Garner		Chief	Jack Franklin	
Supply Unit			Time Unit		
Facilities Unit			Procurement Unit	David Haas	
Ground Support Unit			Comp/Claims Unit		
Communications Unit			Cost Unit	Tammy Hasert	
Medical Unit					
ORDM					
Prepared By: Name: A. Yanagisawa			Position/Title: PSC		
ICS 203			Date/Time: 5/15/2021 2300 hours		
			Signature: 		

.DISCUSSION...

High pressure over the region will maintain warm and dry conditions with gusty south to southwest winds through Saturday. Winds are expected to be strongest early this evening, and again Saturday afternoon and evening - potentially a little stronger on Saturday. Afternoon humidities are expected to rise slightly by Saturday, but will remain in the lower to mid teens. Overnight recoveries should also rise slightly as the marine layer deepens, but are likely to remain near 40 percent.

More significant changes are expected for Sunday, as an approaching low pressure system brings a cooling and moistening trend. Highs will lower into the upper 60s, with afternoon humidities also rising significantly. Gusty onshore flow will continue.

.SUNDAY...

Sky/weather.....Mostly sunny.

Max temperature.....65-69.

Min humidity.....30-35 percent.

Eye level winds.....South to southwest 5-7 mph becoming southwest
6-10 mph with gusts to 12 mph in the
afternoon.

Wind (20 ft).....

Slope/valley.....South to southwest 10-15 mph becoming southwest
12-20 mph with gusts to 25 mph in the afternoon.

Ridgetop.....South to southwest 15-20 mph becoming southwest
15-25 mph with gusts to 30 mph in the afternoon.

Wind (20 ft).....

MEDICAL PLAN (ICS 206)

1. Incident Name: Pine Incident	2. Operational Period: Date From: 05/16/21 Time From: 0700	Date To: 05/18/21 Time To: 0700					
3. Medical Aid Stations:							
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				
4. Transportation (indicate air or ground):							
	Location	Contact Number(s)/Frequency	Level of Service				
AMR (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				
5. Hospitals:							
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.				EMERGENCY REPORTING WORKSHEET			
<ol style="list-style-type: none"> 1. Contact Communications <ol style="list-style-type: none"> a. "Stand-by for Emergency Traffic" 2. Incident Status: <ol style="list-style-type: none"> 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 <ol style="list-style-type: none"> a. Air/Ground, Need for hoist, drop point, Helispot 5. Determine need for additional resources 6. Confirm Communications <ol style="list-style-type: none"> a. A/G EMS Frequencies 7. Contingency Plan 8. Additional Information <ol style="list-style-type: none"> a. Updates/changes, etc. <p>In Camp Emergency: Contact Medical Unit at ICP</p>				<p>SEVERITY RED (Immediate) YELLOW (Delayed) GREEN (Minor)</p> <p>NATURE OF EMERGENCY _____</p> <p>LOCATION OF PATIENT _____</p> <p>TRANSPORTATION REQUESTED BY: AIR__ GROUND__</p> <p>POINT OF PICKUP _____</p> <p>WGS84 LAT _____ LONG _____</p> <p>PATIENT UNIT ID _____</p> <p style="text-align: center;">REMINDER: DO NOT GIVE PT NAME OVER RADIO</p> <p>IS AN EMT WITH PATIENT: YES ____ NO ____</p> <p>AGE _____ SEX: MALE _____ FEMALE _____</p> <p>ALL EMERGENCIES—Secure the area and identify witnesses for later investigation. Keep an accurate log of events.</p> <p>NOTE: IWI NOTIFICATIONS</p> <ol style="list-style-type: none"> 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: 05/16/2021					

SAFETY MESSAGE/PLAN (ICS 208)

1. Incident Name:
PINE

2. Operational Period: Date From: 05/16/21
Time From: 0700

Date To: 05/18/21
Time To: 0700

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: 5/15/21

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**
