

Porphyry Fire IAP

September 29-October 3, 2020

ID-PAF-000495

P4NH7C



INCIDENT OBJECTIVES (ICS 202)

| | | | |
|---|---|--|--------------------------------------|
| 1. Incident Name: | | 2. Operational Period: | |
| PORPHYRY | | Date/Time From: 09/29/2020 0600 TUE | Date/Time To: 10/03/2020 2200 SAT |
| 3. Objective(s): | | | |
| <p>Provide for the protection of firefighter and public safety by implementing a course of action that achieves incident objectives with the least firefighter exposure necessary, mitigates any public safety issues, and is based on sound risk management principles.</p> <p>Protect private property and infrastructure by preventing the spread of fire onto private lands.</p> <p>Maintain positive relationships with partners, forest users and outfitters by providing timely and accurate information to all interested parties.</p> <p>Protect any threatened FS infrastructure from fire as necessary, see Risk Decision Framework for identified FS infrastructure values.</p> | | | |
| 4. Operational Period Command Emphasis: | | | |
| <p>Continue protection of the identified values at risk.</p> <p>Continue share fire information with the public, hunters, and recreationist to the best of your ability or direct questions/concerns up to your supervisor.</p> | | | |
| General Situational Awareness: | | | |
| <p>Monitor L.C.E.S through out each shift adjust your strategies and tactics to meet the need.</p> <p>Take time to gather situational awareness and utilize the risk management process to help determine course of actions.</p> <p>Be prepared for an increase in fire behavior. Have a plan in place if an increase in fire behavior should occur.</p> <p>If you see something say something.</p> | | | |
| 5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> ICS 202 | <input type="checkbox"/> ICS 207 | Other Attachments: | |
| <input checked="" type="checkbox"/> ICS 203 | <input checked="" type="checkbox"/> ICS 208 | <input type="checkbox"/> _____ | |
| <input checked="" type="checkbox"/> ICS 204 | <input type="checkbox"/> ICS 220 | <input type="checkbox"/> _____ | |
| <input checked="" type="checkbox"/> ICS 205 | <input type="checkbox"/> Map/Chart | <input type="checkbox"/> _____ | |
| <input type="checkbox"/> ICS 205A | <input checked="" type="checkbox"/> Weather Forecast/Tides/Currents | <input type="checkbox"/> _____ | |
| <input checked="" type="checkbox"/> ICS 206 | | | |
| 7. Prepared by: ALEXIS MARTIN | | Signature: | |
| 8. Approved by Incident Commander: | | Signature: | |
| Name: NICK BOHNSTEDT ICT3 (T) | | Date/Time: 09/28/2020 1600 | |
| ICS 202 | | IAP Page | |

ORGANIZATION ASSIGNMENT LIST (ICS 203)

| | | | |
|--|---|---|--------------------------------------|
| 1. Incident Name: | | 2. Operational Period: | |
| PORPHYRY | | Date/Time From: 09/29/2020 0600 TUE | Date/Time To: 10/03/2020 2200 SAT |
| 3. Incident Commander(s) and Command Staff: | | DIVISION/GROUP | |
| IC/UC | ASHLEIGH D'ANTONIO (LWD 10/6) PETE KOCH (LWD 10/6) (T) | DIVISION/GROUP | |
| DEPUTY | | DIVISION/GROUP | |
| SAFETY OFFICER | | 7b. Air Operations Branch: | |
| INFORMATION OFFICER | | AIR OPS BRANCH DIRECTOR | |
| LIAISON OFFICER | | AIR ATTACK SUPERVISOR | |
| 4. Agency/Organization Representative(s): | | AIR SUPPORT SUPERVISOR | |
| Agency/Organization | Name | HELICOPTER COORDINATOR | |
| KRASSEL RD, PAYETTE NF | JENNI BLAKE | AIR TANKER COORDINATOR | |
| 5. Planning Section: | | 8. Finance/Administration Section: | |
| DEPUTY | | CHIEF | |
| RESOURCES UNIT | | DEPUTY | |
| SITUATION UNIT | | TIME UNIT | |
| DOCUMENTATION UNIT | | PROCUREMENT UNIT | |
| DEMOBILIZATION UNIT | | COMPENSATION UNIT | |
| FIRE BEHAVIOR ANALYST | | COST UNIT | |
| HUMAN RESOURCE SPECIALIST | | | |
| TRAINING SPECIALIST | | | |
| TECHNOLOGY SUPPORT SPECIALIST | | | |
| INCIDENT METEOROLOGIST | | | |
| 6. Logistics Section: | | | |
| CHIEF | DOUG WILLIAMS (LWD 10/3) | | |
| DEPUTY | | | |
| SUPPLY UNIT | | | |
| FACILITIES UNIT | | | |
| GROUND SUPPORT UNIT | | | |
| COMMUNICATIONS UNIT | | | |
| MEDICAL UNIT | | | |
| SECURITY UNIT | JESSE LUTZ, SEC2 (LWD 10/1) | | |
| FOOD UNIT | | | |
| 7. Operations Section: | | | |
| DAY OPS SECTION CHIEF | | | |
| NIGHT OPS SECTION CHIEF | | | |
| PLANNING OPS | | | |
| OPS SECTION CHIEF | | | |
| DEPUTY OPS SECTION CHIEF | | | |
| STAGING AREA | | | |
| 9. Prepared By: Name: ALEXIS MARTIN | | Position/Title: PSC3 | Signature: |
| ICS 203 | IAP Page | Date/Time: 09/28/2020 1230 | |

FNUS55 KBOI 282057
FWFBOI

Fire Weather Planning Forecast for SW Idaho and SE Oregon
National Weather Service Boise ID
257 PM MDT Mon Sep 28 2020

...RIDGE CONTINUES WARM AND DRY CONDITIONS...

.DISCUSSION...

Northwest flow continues this evening. Some spots of gusty wind possible into the evening hours, with winds diminishing tonight. The ridge axis will continue its eastward progression over the next few days, keeping warm and dry conditions present across the forecast area. The warmest day under this system is expected to be Wednesday. Winds should generally remain light, though periods of gusty conditions will be possible in the afternoons, mainly south of the Snake River Plain.

IDZ401-402-291530-
Western Payette National Forest-Eastern Payette National Forest-
257 PM MDT Mon Sep 28 2020

.TONIGHT...

Sky/weather.....Clear.
Min temperature.....37 to 49.
24 hr trend.....On average, 8 degrees warmer.
Max humidity.....48 to 73 percent.
24 hr trend.....On average, 14 percent drier.
20-foot winds.....
Valleys/lwr slopes...Light downslope winds less than 8 mph.
Ridges/upr slopes....Light winds less than 8 mph.
Haines Index.....5 moderate.
LAL.....1.
CWR /0.10 inch/.....0 percent.
Smoke Dispersal:
Mixing Height.....400 ft AGL.
Transport Winds....Southeast around 5 mph.

.TUESDAY...

Sky/weather.....Sunny.
Max temperature.....64 to 78.
24 hr trend.....On average, 12 degrees warmer.
Min humidity.....18 to 26 percent.
24 hr trend.....On average, 13 percent drier.
20-foot winds.....
Valleys/lwr slopes...Light upslope winds less than 8 mph.
Ridges/upr slopes....Light winds less than 8 mph.
Haines Index.....5 moderate.
LAL.....1.
CWR /0.10 inch/.....0 percent.
Smoke Dispersal:
Mixing Height.....3000-4000 ft AGL.
Transport Winds....West 5 to 10 mph.

.TUESDAY NIGHT...

Sky/weather.....Clear.

Min temperature.....39 to 51.
24 hr trend.....On average, 2 degrees warmer.
Max humidity.....41 to 61 percent.
24 hr trend.....On average, 6 percent drier.
20-foot winds.....
Valleys/lwr slopes...Light downslope winds less than 8 mph.
Ridges/upr slopes...Light winds less than 8 mph.
Haines Index.....5 moderate.
LAL.....1.
CWR /0.10 inch/.....0 percent.
Smoke Dispersal:
Mixing Height.....500 ft AGL.
Transport Winds....Southeast up to 5 mph.

.WEDNESDAY...

Sky/weather.....Sunny.
Max temperature.....67 to 81.
24 hr trend.....On average, 2 degrees warmer.
Min humidity.....17 to 23 percent.
24 hr trend.....On average, 2 percent drier.
20-foot winds.....
Valleys/lwr slopes...Light upslope winds less than 8 mph.
Ridges/upr slopes...Light winds less than 8 mph.
Haines Index.....5 moderate.
LAL.....1.
CWR /0.10 inch/.....0 percent.
Smoke Dispersal:
Mixing Height.....4000-6000 ft AGL.
Transport Winds....Northwest around 5 mph.

.FORECAST DAYS 3 THROUGH 7...

.THURSDAY...Clear. Lows 39 to 52. Highs 71 to 86. North winds up to 10 mph.
.FRIDAY...Mostly clear. Lows 41 to 52. Highs 69 to 84. North winds up to 10 mph.
.SATURDAY...Clear. Lows 42 to 52. Highs 69 to 84. Northwest winds up to 10 mph.
.SUNDAY...Clear. Lows 41 to 51. Highs 69 to 84.
.MONDAY...Mostly clear. Lows 42 to 52. Highs 68 to 83.

DIVISION/GROUP ASSIGNMENT LIST (ICS 204 WF)

| 1. Incident Name | | | 3. | | | | |
|---|---------|---------------------------|--------------------------------------|------------------|-------------------|------------------|--|
| 2. Operational Period | | | Branch | Division | | | |
| | | | Date/Time From: | | | | |
| 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 | |
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| 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)

Controlled Unclassified Information//Basic

| | | | |
|--------------------------|--------------------------------|--|--------------------------------------|
| 1. Incident Name: | 2. Date/Time Prepared: | 3. Operational Period: | |
| PORPHYRY | Date: 09/28/2020 Time: 1230 | Date/Time From: 09/29/2020 0600 TUE | Date/Time To: 10/03/2020 2200 SAT |

4. Basic Radio Channel Use:

| Zone Group | Ch # | Function | Channel Name/Trunked Radio System Talkgroup | Assignment | RX Freq | RX Tone/NAC | TX Freq | TX Tone/NAC | Mode (A,D, or M) | Remarks |
|------------|------|---------------|---|------------|-----------|-------------|-----------|-------------|------------------|---------|
| 1 | 8 | LOGISTICS | TAC2 | | 167.42500 | | 167.42500 | | | |
| 1 | 2 | COMMAND | | | 169.9000 | 131.8 | 164.7875 | 131.8 | | |
| 1 | 7 | TACTICAL | TAC1 | | 166.9875 | | 166.98756 | | | |
| 1 | 6 | AIR TO GROUND | AG46 | | 167.7000 | | 167.7000 | | | |

5. Special Instructions:

| | | |
|--|--------------------------|----------------------------|
| 6. Prepared By (Communications Unit Leader) | Name: ALEXIS MARTIN PSC3 | Signature: |
| ICS 205 | IAP Page | Date/Time: 09/28/2020 1230 |

MEDICAL PLAN (ICS 206 WF)

| 1. Incident/Project Name | | 2. Operational Period | | | | | | |
|--|---|--|-----------------------------|--|--------------|-------------------------------------|--------------------------|---|
| Porphyry | | Date/Time 09/29/2020-10/3/2020, 0600-2200 | | | | | | |
| 3. Ambulance Services | | | | | | | | |
| Name | Complete Address | Phone & EMS Frequency | Advanced Life Support (ALS) | | | | | |
| | | | Yes | No | | | | |
| McCall Fire and EMS | 201 Deinhard Lane, McCall, ID 83638 | 911 | X | | | | | |
| | | | | | | | | |
| 4. Air Ambulance Services | | | | | | | | |
| Name | Phone | Type of Aircraft & Capability | | | | | | |
| Air St Luke's Medical Transport | 208-381-8900 | Bell 429 | | | | | | |
| Two Bear Air | 406-755-4297 | Bell 429 | | | | | | |
| 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 checked="" type="checkbox"/> | <input type="checkbox"/> | |
| St Lukes McCall Medical Center 1000 Hwy 55 McCall ID 83638 | Long: | 44 54.797 116 06.252 | | | 208-634-2221 | | | Level 3 Trauma Center and Rapid COVID Testing |
| | VHF: | | | | | | | |
| Cascade Medical Center 402 lake Cascade Parkway, Cascade ID 83611 | Lat: | 44 31.105 | | | 208-382-4242 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Rapid COVID Testing |
| | Long: | 116 2.973 | | | | | | |
| | VHF: | | | | | | | |
| St. Alphonsus 1055 N Curtis Road Boise, ID 83706 | Lat: | 43 36.81 | | | 208-367-2121 | x | <input type="checkbox"/> | Level 2 Trauma Center |
| | Long: | 116 15.69 | | | | | | |
| | VHF: | | | | | | | |
| University of Utah Medical Center 50 N. Medical Dr., Salt Lake City UT | Lat: | 40 46.34 | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Level 1 Trauma Center with Burn Center |
| | Long: | 111 50.24 | | | | | | |
| | VHF: | | | | | | | |
| 6. Division Branch Group | | Area Location Capability | | | | | | |
| All Divisions | | EMS Responders & Capability: | | 6 EMT Basic | | | | |
| | | Equipment Available on Scene: | | | | | | |
| | | Medical Emergency Channel: | | Command: Payette East Tone 3 (Elk Summit Repeater) | | | | |
| | | ETA for Ambulance to Scene: | | | | | | |
| | | Air: | | 30 minutes | | | | |
| | | Ground: | | 4 hours. | | | | |
| | | Approved Helispot: | | Pueblo Summit. | ICP | | | |
| | | Lat: | | 45 13.392 | 45 12.750 | | | |
| | | Long: | | -115 19.313 | -115 32.307 | | | |

MEDICAL PLAN (ICS 206 WF)

| | | |
|--|---|--|
| | EMS Responders & Capability: | |
| | Equipment Available on Scene: | |
| | Medical Emergency Channel: | |
| | ETA for Ambulance to Scene: | |
| | Air: | |
| | Ground: | |
| | Approved Helispot: | |
| | Lat: | |
| | Long: | |

| 7. Name & Location | Remote Camp Location(s) | | | |
|---|---|---|---|----------------------|
| Snowslide Camp | Point of Contact: | Ashleigh D'Antonio | | |
| | EMS Responders & Capability: | 5 EMT Basic | | |
| | Equipment Available on Scene: | Trauma kit w/SKED. | | |
| | Medical Emergency Channel: | Command: Payette East Tone 3 (Elk Summit Repeater). | | |
| | ETA for Ambulance to Scene: | | | |
| | Air: | | | |
| | Ground: | | | |
| | Approved Helispot: | | | |
| | | Lat: | | |
| | Long: | | | |
| Click here to enter text. | 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 |
| Alexis Martin PSC3 | | 09/28/2020 1230 | Nick Bohnstedt ICT3 (t) | 09/28/2020 1600 |

MEDICAL PLAN (ICS 206 WF)

| Medical Incident Report | | | | | |
|---|--------------------------|---|--|--|--------------------------------|
| FOR ALL MEDICAL EMERGENCIES: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH. | | | | | |
| Use items one through nine to communicate situation to Communications/Dispatch. | | | | | |
| 1. CONTACT COMMUNICATIONS/DISPATCH <i>Ex: "Communications, Div. Alpha. Stand-by for Priority Medical Incident Report." (If life threatening request designated frequency be cleared for emergency traffic.)</i> | | | | | |
| 2. INCIDENT STATUS: <i>Provide incident summary and command structure.</i> | | | | | |
| Nature of Injury/Illness | | | <i>Describe the injury (Ex: Broken leg with bleeding)</i> | | |
| Incident Name | | | <i>Geographic Name + "Medical" (Ex: Trout Meadow Medical)</i> | | |
| Incident Commander | | | <i>Name of IC</i> | | |
| Patient Care | | | <i>Name of Care Provider (Ex: EMT Smith)</i> | | |
| 3. INITIAL PATIENT ASSESSMENT: <i>Complete this section for each patient. This is only a brief, initial assessment. Provide additional patient info after completing this 9 Line Report.</i> | | | | | |
| Number of Patients | Male / | Age: | Weight: | | |
| Conscious? <input type="checkbox"/> YES <input type="checkbox"/> NO = MEDEVAC! | | | | | |
| Breathing? <input type="checkbox"/> YES <input type="checkbox"/> NO = MEDEVAC! | | | | | |
| Mechanism of Injury: <i>What caused the injury?</i> | | | | | |
| Lat/Long (Datum WGS84) <i>Ex: N 40° 42.45' x W 123° 03.24'</i> | | | | | |
| 4. SEVERITY OF EMERGENCY, TRANSPORT PRIORITY | | | | | |
| SEVERITY | | | TRANSPORT PRIORITY | | |
| <input type="checkbox"/> URGENT-RED Life threatening injury or illness. <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2° – 3° burns more than 4 palm sizes, heat stroke, disoriented.</i> | | | Ambulance or MEDEVAC helicopter. Evacuation need is IMMEDIATE. | | |
| <input type="checkbox"/> PRIORITY-YELLOW Serious Injury or illness. <i>Ex: Significant trauma, not able to walk, 2° – 3° burns not more than 1-2 palm sizes.</i> | | | Ambulance or consider air transport if at remote location. Evacuation may be DELAYED. | | |
| <input type="checkbox"/> ROUTINE-GREEN Not a life threatening injury or illness. <i>Ex: Sprains, strains, minor heat-related illness.</i> | | | Non-Emergency. Evacuation considered Routine of Convenience. | | |
| 5. TRANSPORT PLAN: | | | | | |
| Air Transport: (Agency Aircraft Preferred) | | | | | |
| <input type="checkbox"/> Helispot | | <input type="checkbox"/> Short-haul/Hoist | | <input type="checkbox"/> Life Flight | <input type="checkbox"/> Other |
| Ground Transport: | | | | | |
| <input type="checkbox"/> Self-Extract | | <input type="checkbox"/> Carry-Out | | <input type="checkbox"/> Ambulance | <input type="checkbox"/> Other |
| 6. ADDITIONAL RESOURCE/EQUIPMENT NEEDS: | | | | | |
| <input type="checkbox"/> Paramedic/EMT(s) | | <input type="checkbox"/> Crew(s) | | <input type="checkbox"/> SKED/Backboard/C-Collar | |
| <input type="checkbox"/> Burn Sheet(s) | | <input type="checkbox"/> Oxygen | | <input type="checkbox"/> Trauma Bag | |
| <input type="checkbox"/> Medication(s) | | <input type="checkbox"/> IV/Fluid(s) | | <input type="checkbox"/> Cardiac Monitor/AED | |
| <input type="checkbox"/> Other (i.e. splints, rope rescue, wheeled litter) | | | | | |
| 7. COMMUNICATIONS: | | | | | |
| Function | Channel Name/Number | Receive (Rx) | Tone/NAC * | Transmit (Tx) | Tone/NAC * |
| <i>Ex: Command</i> | <i>Forest Rpt, Ch. 2</i> | <i>168.3250</i> | <i>110.9</i> | <i>171.4325</i> | <i>110.9</i> |
| COMMAND | | | | | |
| AIR-TO-GRND | | | | | |
| TACTICAL | | | | | |
| *(NAC for digital radio system) | | | | | |
| 8. EVACUATION LOCATION: | | | | | |
| Lat/Long (Datum WGS84) <i>EX: N 40 42.45' x W 123 03.24'</i> | | | | | |
| Patient's ETA to Evacuation Location: | | | | | |
| Helispot/Extraction Size and Hazards: | | | | | |
| 9. CONTINGENCY: | | | | | |
| Considerations: <i>If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead...</i> | | | | REMEMBER: Confirm ETA's of resources ordered Act according to your level of training Be Alert. Keep Calm. Think Clearly. Act Decisively. | |

Porphyry Fire-COVID-19 SCREENING TOOL 2020

Date:

Incident Resource Order Number (A, C, E, O):

How many Personnel are with your module?

Today or in the past 24 hours, have you or anyone on your crew had any of the following symptoms?

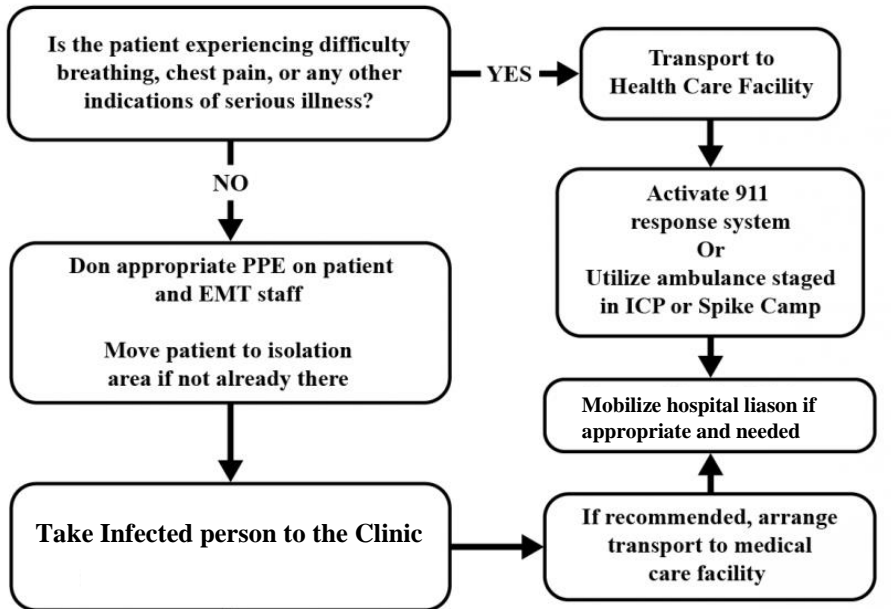
Cough more than expected?

- Shortness of breath or difficulty breathing?
- Fever greater than 100 degrees? Chills?
- Muscle pain outside your normal fire firefighting?
- Sore Throat?
- New loss of taste or smell?
- Fatigue, outside your normal for firefighting?
- Headache, outside your normal for firefighting?
- Congestion or runny nose, outside your normal for firefighting?
- Nausea or vomiting?
- Diarrhea?
- No symptoms

In the past 14 days, have you or any of your Crew/Module/Group had contact with a person known to be infected with the coronavirus (COVID-19)?

An individual is identified with a possible COVID-19 infection based on the screening tool.

Cough more than expected? Shortness of breath or difficulty breathing? Fever? Chills? Muscle pain outside your normal for firefighting? Sore throat? New loss of taste or smell? Temperature greater than 100.4?



Following COVID-19 Test Results options are:

- Return to work**
- Isolate**
- Demobilization off Incident**

Porphyry Fire Covid Response Procedures

How to respond:

- Notify immediate supervisor including OPS, if necessary, contact designated first responder.
- Contact the Covid Liaison Jess Asmussen (208)-739-1561
- Refer to the ICS 206 and supporting documentation for guidelines and medical contact information.
- Infected individual's crew will provide transportation to the med unit and clinic.
- Crew with infected individual will stay isolated on fire till test results come back.
- After test results come back, direction will be given to either continue isolation or continue working.

