

# INCIDENT ACTION PLAN STEPTOE CANYON

WA-WFS-211  
PNN6KC

Saturday



Information 509-800-7177

## DAY SHIFT

7/24/2021 0600  
to  
7/24/2021 2000



# INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b> Steptoe Canyon	<b>2. Operational Period:</b>	Date From: 7/24/2021 Time From: 0600	Date To: 7/24/2021 Time To: 2000
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**3. Objective(s):**

- Management Objectives**
- Provide for emergency personnel and public safety at all times.
  - Ensure COVID-19 precautions and best practices are met at all times.
  - Protect property, improvements, and infrastructure.
  - 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**
- Tactical Patrol of the fire lines.
  - Rehab all of the dozer lines to include putting in waterbars
  - Mop up 50' in from the fire line
  - Notify the Division of any property damage that occurred as a result of fire suppression activities.
  - Ensure good community relations during the mop up phase of the fire.

**General Situational Awareness:**

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

In the COVID-19 environment, high density populations or large groups are particularly at risk. To help protect yourself, your family and to ensure all employees return home safely, make sure to practice social distancing.

Enhanced hygiene (especially handwashing), PPE & monitoring practices help limit the infection rate of first responders.

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

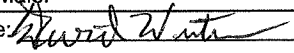
**Approved Site Safety Plan(s) Located at:**

**6. Incident Action Plan**

<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 215A	<input checked="" type="checkbox"/> ICS 205 A	<input type="checkbox"/>
<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"/> Facility Maps	<input checked="" 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"/> County Health Message
<input checked="" type="checkbox"/> ICS 208	<input type="checkbox"/> Fire Behavior	<input type="checkbox"/> Finance Message	<input checked="" type="checkbox"/> ICS 214

<b>7. Prepared By:</b> David Winter	Position/Title: PSC	Signature:
<b>8. Approved by Incident Commander:</b>	Walter Escobar	Signature:

## ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b> Stephoe Canyon		<b>2. Operational Period: Date From:</b> 7/24/2021		<b>Date To:</b> 7/24/2021	
		<b>Time From:</b> 0600		<b>Time To:</b> 2000	
<b>3. Incident Commander(s) and Command Staff:</b>			<b>7. Operation Section:</b>		
IC/UC's	Walter Escobar	Operations	Ryan Nicholls		
Deputy		Deputy Operations			
Safety Officer	Ryan Cloud,	Night Ops			
Information Officer	Heather Appelhof,	Staging Area			
		<b>Branch</b>	<b>I</b>		
<b>4. Agency/Organization Representatives:</b>		Division/Group	A	Seth Jones	
Agency/Organization	Name	Division/Group	M	Wes Long/Carson Zapp (T)	
		Division/Group	Z	Brandon Burton	
		Division/Group			
		Division/Group			
		<b>Branch</b>	<b>II</b>		
		Division/Group			
		Division/Group			
		Division/Group			
		Division/Group			
		Division/Group			
		Division/Group			
		<b>Branch</b>	<b>III</b>		
		Division/Group			
		Division/Group			
		Division/Group			
		Division/Group			
		Division/Group			
		<b>Branch</b>	<b>IV</b>		
		Division/Group			
<b>5. Planning Section:</b>		Division/Group			
Chief	David Winter	Division/Group			
Deputy	Patrick Reid	Division/Group			
Resource Unit	Bill Box	Division/Group			
Situation Unit		<b>Branch</b>	<b>V</b>		
Documentation Unit		Division/Group			
Demobilization Unit		Division/Group			
GISS		Division/Group			
FBAN		Division/Group			
IMET		Division/Group			
Training Tech Spec		<b>Air Operations Branch</b>		<b>Director:</b>	
		Air Support Group Supervisor			
		Air Tactical Group Supervisor			
<b>6. Logistics Section</b>		Helibase Manager			
Chief	Daniel Lennon				
Supply Unit		<b>8. Finance/Administration Section:</b>			
Facilities Unit		Chief	Kelli Mansfield		
Ground Support Unit		Time Unit	Maryam MajDian		
Communications Unit		Procurement Unit			
Medical Unit		Comp/Claims Unit			
Base Manager	Rhetta Cypert	Cost Unit			
		Deputy	Barbara Maier		
<b>Prepared By: Name:</b> David Winter		<b>Position/Title:</b> PSC		<b>Signature:</b> 	
<b>ICS 203</b>		<b>Date/Time:</b> 7/23/2021 2300 hours			

# Steptoe Canyon Fire Weather

## DISCUSSION

Today will bring near normal temperatures but with northwest winds gusting up to 15 mph in the afternoon. Humidity recoveries will be poor tonight with temperatures warming to above normal this weekend along with continued low relative humidity.

## SATURDAY

Sky/weather.....Sunny. Haze and areas of smoke.

CWR.....0 percent.

LAL.....1.

Max temperature....93-97.

Min humidity.....13 percent.

Wind (20 ft) .....Southeast winds 2 to 5 mph in the morning shifting to the northwest 3 to 6 mph in the afternoon.

Mixing height.....Near surface through 1000 increasing to 6000 ft AGL in the afternoon.

Transport winds.... Southeast around 5 mph in the morning then northwest around 5 mph in the afternoon.

Haines Index.....4 or low potential for large plume dominated fire growth.

# Steptoe Canyon Safety Message

July 24, 2021

## Mission Analysis and Engagement

- What is the mission, what is the assignment
- Are all hazards identified and made known
- Is additional information needed
- Lookouts - Communications - Escape Routes - Safety Zones
- Maintain Situational Awareness

## Division A Hazards - Rock fall, Steep Terrain, Unburned Fuel between containment line and fire.

- Access is restricted in Division A (vehicle or foot)
- Unexpected Incident within an Incident
- Firefighter Complacency and Distraction
- If traveling thru the area remain alert and limit exposure

## Division M and Z Hazards

- Driving and Road Related Hazards including Public Traffic
- Be alert for unauthorized public intrusion
- Public Interactions and Fire Area Intrusions
- Unexpected Incident within an Incident
- Firefighter Complacency and Distraction

**Risk = Exposure Time x Probability of Hazard Occurrence**

Limiting exposure is almost always an Option  
And  
Controlled by You

Mitigate Hazards  
Maintain Situational Awareness









<b>INCIDENT RADIO COMMUNICATIONS PLAN</b>		1. Incident Name STEPTOE CANYON		2. Date/ Time Prepared 7/22/2021 22:00		3. Operational Period Date/Time 7/23/2021 6:00	
<b>4. Basic Radio Channel Utilization</b>							
Mode: W=Wideband Analog, N=Narrowband Analog, D=Digital, M=Mixed							
Channel	Function		Frequency	Tone	Mode	Assignment	Remarks
1	TAC 1	RX:	151.3100	192.8	N	DIV A / NIGHT	TACTICAL CHANNEL
		TX:	151.3100	192.8			
2	TAC 2	RX:	151.2125	192.8	N	DIV M	TACTICAL CHANNEL
		TX:	151.2125	192.8			
3	TAC 3	RX:	151.3325	192.8	N	DIV Z	TACTICAL CHANNEL
		TX:	151.3325	192.8			
4	CMD 4	RX:	159.4275	192.8	N	ALL INCIDENT	COMMAND CHANNEL
		TX:	151.2725	192.8			
5	CMD 5	RX:	159.3300	192.8	N	NEAR ICP	COMMAND CHANNEL
		TX:	151.1675	192.8			
6	DNR A/G 2	RX:	151.2875	103.5	N	PRIMARY A/G	AIR TO GROUND
		TX:	151.2875	103.5			
7	DNR A/G 3	RX:	156.0225	103.5	N	SECONDARY A/G	AIR TO GROUND
		TX:	156.0225	103.5			
8	BLANK	RX:	0.0000	0.0	N	BLANK	BLANK
		TX:	0.0000	0.0			
9	BLANK	RX:	0.0000	0.0	N	BLANK	BLANK
		TX:	0.0000	0.0			
10	BLANK	RX:	0.0000	0.0	N	BLANK	BLANK
		TX:	0.0000	0.0			
11	BLANK	RX:	0.0000	0.0	N	BLANK	BLANK
		TX:	0.0000	0.0			
12	BLANK	RX:	0.0000	0.0	N	BLANK	BLANK
		TX:	0.0000	0.0			
13	BLANK	RX:	0.0000	0.0	N	BLANK	BLANK
		TX:	0.0000	0.0			
14	WA REDNET	RX:	153.8300	0.0	N	INTEROP	TACTICAL CHANNEL
		TX:	153.8300	0.0			
15	EAST FIRE	RX:	154.3850	151.4	N	LOCAL	LOCAL REPEATER
		TX:	150.7750	127.3			
16	AIRGUARD	RX:	168.6250	0.0	N	ALL INCIDENT	EMERGENCY COMMS WITH AIRCRAFT
		TX:	168.6250	110.9			
5. Prepared by (Communications Unit) CHRIS PUGH (COMT)							

# Code of Conduct Incident Personnel



Each individual on this incident is responsible for:

- 👤 Being *ready and able* to perform their assigned duties effectively.
- 👤 Conducting themselves in a manner that treats people with dignity, equality, courtesy, and respect.
- 👤 Abiding by agency ethics and conduct regulations.
- 👤 Reporting any harassment or other inappropriate behavior.

Each individual of this incident has the right to:

- 👤 Work in an environment characterized by safe work practices.
- 👤 Work in a fair and harassment free environment.
- 👤 Say "No" to unwelcome advances or requests for favors.
- 👤 File complaints or grievances through appropriate avenues.

There is zero tolerance for inappropriate behavior while assigned to the incident, including:

- 👤 Illegal drug use
- 👤 Alcohol use
- 👤 Unsafe work practices and activities
- 👤 Discrimination
- 👤 Sexual harassment
- 👤 Fighting, threatening, and abusive behaviors
- 👤 Using social media and electronic communication devices for personal business while engaged in fire assignment duties.
- 👤 Other violations of Fire Service, Washington DNR, and Federal agency standards of conduct.

Failure to adhere to the Code of Conduct could result in dismissal from the incident, with notification to your home unit.

The public expects our best efforts; they see us as professionals in what we say and do. Let's continue to show them we are!



# Finance

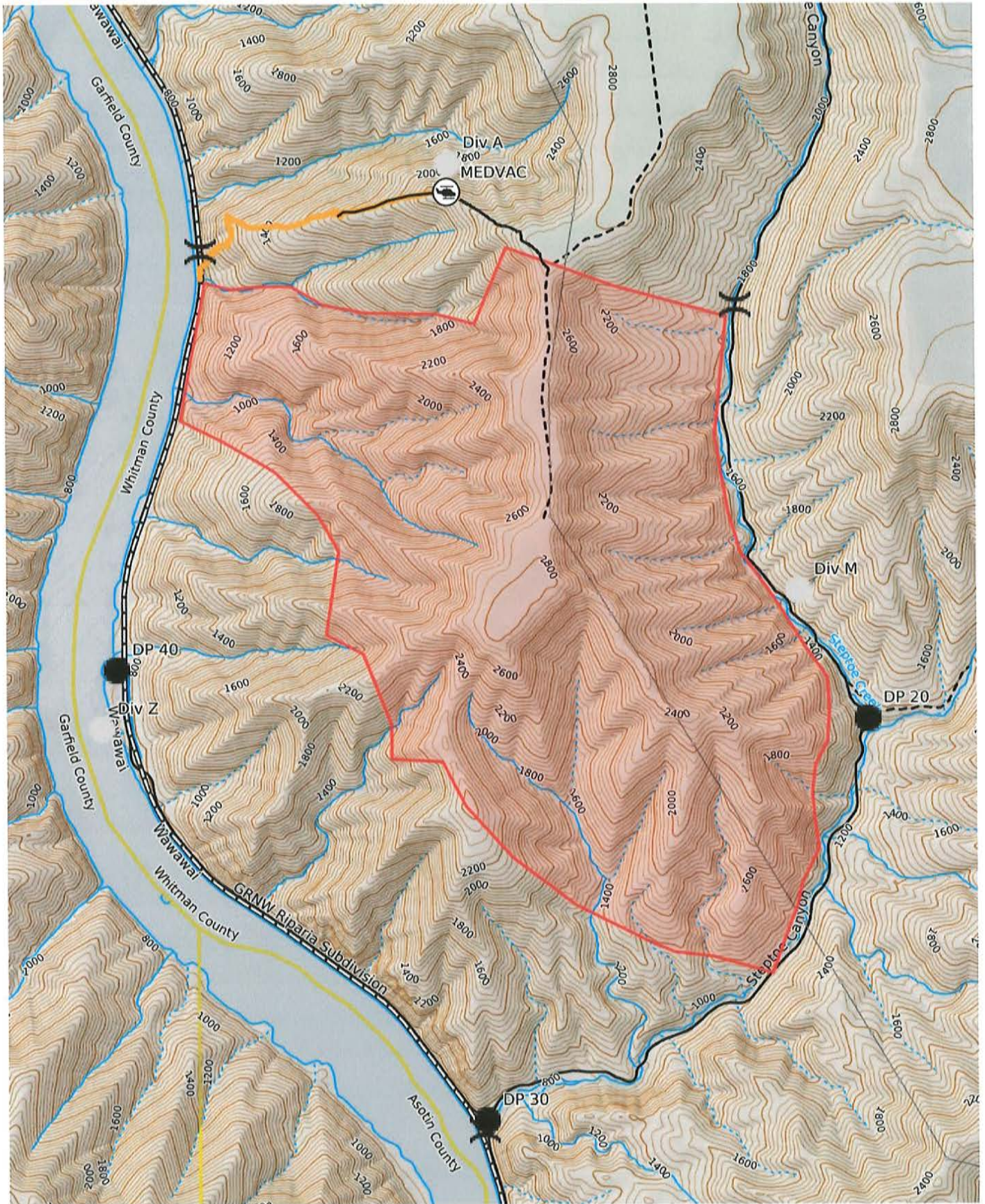
***“Employees are paid for actual hours worked, with no guarantee of a maximum shift length, unless otherwise specified in a formal, authorized agreement.”*** –Interagency Incident Business Management Handbook, Chapter 10

## **\*\*\*Morning\*\*\***

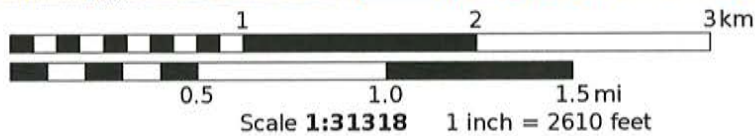
- Only those invited to the Operations meeting may record time before the morning briefing starting time.
- Contract crews and equipment will start time according to terms of their contract.
- Hourly apparatus time starts upon leaving camp.
- Exception time recorded will be justified on the CTR/Shift Ticket.
- Crew/Single Resource 30 minute lunches will be shown OR justified on the CTR.

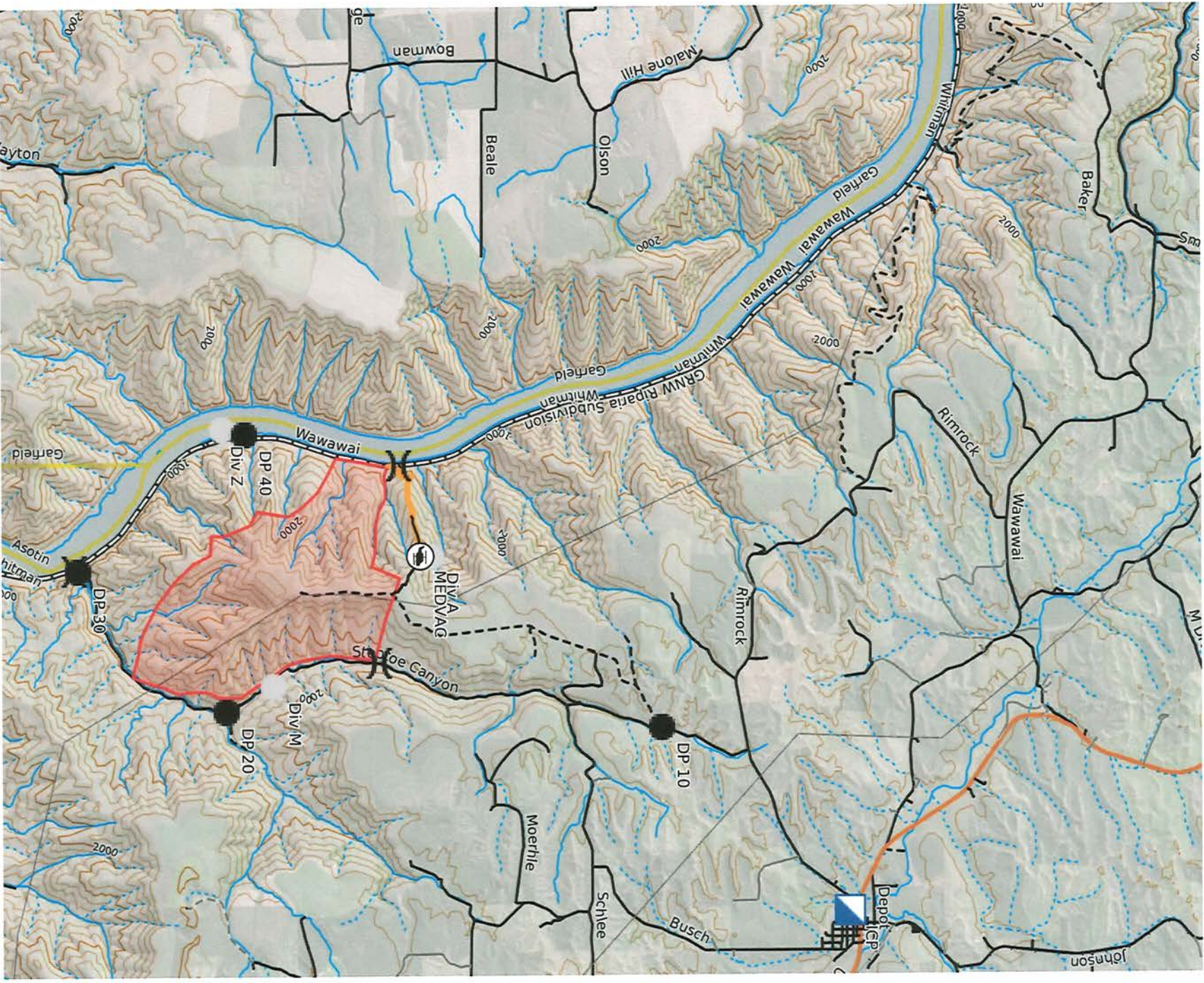
## **\*\*\*End of Shift\*\*\***

- All Contract Crew time stops when they return to camp.
- Hourly apparatus time stops when they enter camp.
- All other personnel are allowed a reasonable time to do vehicle and tool maintenance, generally no more than 30 minutes.

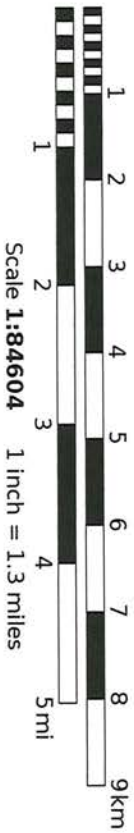


Mercator Projection  
 NAD27 Conus  
 USNG Zone 11TMM  



Mercator Projection  
 NAD27 Conus  
 USNG Zone 11TMM  
**CALTOPO**





<b>Medical Plan</b> (ICS 206)	<b>1. Incident Name</b>	<b>2. Operational</b>	Date From/To:	7-22-21 1800
	Step toe Canyon	Period:	Time From/To:	7-24-21 1200

<b>3. Medical Aid Stations:</b>			
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

<b>4. Transportation (indicate air or ground):</b>			
Name	Location	Contact Number(s)/Frequency	Level of Service
City of Lewiston	Located at Asotin Co FD #1, Clarkston, WA	911 (WHITCOM)	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
Lifeflight Network (Air)	Lewiston, ID	800.521.2444	<input type="checkbox"/> ALS <input type="checkbox"/> BLS
Lifeflight Network (Air)	Pullman, WA	800.422.2440	<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS

<b>5. Hospitals:</b>							
Hospital Name	Address Latitude/Longitude	Contact Number(s)/Frequency	Travel Time		Trama Center	Burn Center	Helipad
			Air	Ground			
Harborview Medical Cntr	325 9th Ave, Seattle, WA N47 36.1 W121 19.3	206.744.3000 206.744.4074 ER		5 hr	<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
Legecy Emanuel Medical Cntr	2801 Gentenbein, Portland, OR N45 32.59 W122 40.16	503.413.2200 503.413.4121 ER			<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
St Joseph Regional Med Ctr	415 6th St, Lewiston, ID N46 25.00 W117 1.46	208.799.5799 ER	10	45	<input checked="" type="checkbox"/> Yes Level: 3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Tri State Hospital	1221 Highland Ave, Clarkston N46 24.16 W117 3.29	509.758.4665 ER	10	45	<input checked="" type="checkbox"/> Yes Level: 4	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Pullman Regional	835 SE Bishop BLVD, Pullman, WA 99163	509-332-2541	10	45	<input checked="" type="checkbox"/> Yes Level: 4	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Providence Sacred Heart	101 West 8th Ave, Spokane WA 99204	509-474-3131	30	2 hr	<input checked="" type="checkbox"/> Yes Level: 2	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**6. Special Medical Emergency Procedures:**

Identify crew EMTs on the line for each Division prior to engaging. In case of urgent situation, notify your supervisor and **follow the MEDICAL INCIDENT REPORT "8-line" procedure on pages 108-109 in the 2014 IRPG.** Notify operations of needs and location on command channel. Operations will notify BMIDC and base camp. Minimize radio traffic and maintain situational awareness.

Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.

<b>7. Prepared by (Medical Unit Leader):</b>	Name:	Signature:
<b>8. Approved by (Safety Officer):</b>	Name: Ryan Cloud SOFR	Signature:

# MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

Medical Incident Report					
<p><b>FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.</b></p> <p><b>FOR A MEDICAL EMERGENCY: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.</b></p>					
<p><b>Use the following items to communicate situation to communications/dispatch.</b></p>					
<p><b>1. CONTACT COMMUNICATIONS / DISPATCH</b> (Verify correct frequency prior to starting report)  <i>Ex: "Communications, Div. Alpha. Stand-by for Emergency Traffic."</i></p>					
<p><b>2. INCIDENT STATUS:</b> 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></p>					
Severity of Emergency / Transport Priority	<input type="checkbox"/> <b>RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE</b> <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2° - 3° burns more than 4 palm sizes, heat stroke, disoriented.</i> <input type="checkbox"/> <b>YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary.</b> <i>Ex: Significant trauma, unable to walk, 2° - 3° burns not more than 1-3 palm sizes.</i> <input type="checkbox"/> <b>GREEN / PRIORITY 3 Minor Injury or Illness. Non-Emergency transport</b> <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>		
Transport Request			<i>Air Ambulance / Short Haul/Hoist Ground Ambulance / Other</i>		
Patient Location			<i>Descriptive Location &amp; 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>		
<p><b>3. INITIAL PATIENT ASSESSMENT:</b> Complete this section for each patient as applicable (start with the most severe patient)</p>					
<p>Patient Assessment: See IRPG page 106</p>					
<p>Treatment:</p>					
<p><b>4. TRANSPORT PLAN:</b></p>					
<p>Evacuation Location (if different): (Descriptive Location (drop point, intersection, etc.) or Lat. / Long.) Patient's ETA to Evacuation Location:</p>					
<p>Helispot / Extraction Site Size and Hazards:</p>					
<p><b>5. ADDITIONAL RESOURCES / EQUIPMENT NEEDS:</b></p>					
<p><i>Example: Paramedic/EMT, Crews, Immobilization Devices, AED, Oxygen, Trauma Bag, IV/Fluid(s), Splints, Rope rescue, Wheeled litter, HAZMAT, Extrication</i></p>					
<p><b>6. COMMUNICATIONS: Identify State Air/Ground EMS Frequencies and Hospital Contacts as applicable</b></p>					
Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *
COMMAND					
AIR-TO-GRND					
TACTICAL					
<p><b>7. CONTINGENCY: Considerations:</b> If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead.</p>					
<p><b>8. ADDITIONAL INFORMATION:</b> Updates/Changes, etc.</p>					
<p><b>REMEMBER:</b> Confirm ETA's of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.</p>					