

# **NCAR Fire**



BLX73-PH6F

## **Incident Action Plan**

**3/30/22 6:00**

**TO**

**4/2/22 6:00**

Dave Buchanan ICT-3

Brian Oliver ICT-3(t)

**INCIDENT OBJECTIVES (ICS 202)**

<b>1. Incident Name:</b> NCAR Fire	<b>Date From:</b> 3/30/22 <b>Date To:</b> 4/2/22 <b>Time From:</b> 6:00 <b>Time To:</b> 6:00
<b>3. Objective(s):</b>	
<p><b>1.Keep firefighter’s risk at reasonable levels necessary to meet objectives through aggressive risk management.</b></p> <p><b>2.Minimize the risk to the public through extensive public information and coordination with law enforcement for potential evacuations, evacuation planning, and closures.</b></p> <p><b>3.Mop up perimeter to an extent necessary to lessen the likelihood of escape.</b></p> <p><b>4.Establish and maintain internal and external communications and relationships with cooperating agencies, local government, private landowners and local businesses.</b></p> <p><b>5.Utilize ground resources to contain fire:</b></p> <ul style="list-style-type: none"> <li>oSouth of NCAR</li> <li>oWest of Boulder city limits</li> <li>oNorth of South Boulder Creek</li> <li>oEast of first prominent hogback</li> </ul> <p><b>6.Provide appropriate and timely evacuation notices based on current and predicted fire behavior as needed.</b></p>	
<b>4. Operational Period Command Emphasis:</b>	
<b>General Situational Awareness</b>	
<p align="center">Eldorado State Park - Open</p> <p align="center">TFR- Clear</p>	
5. Site Safety Plan Required? <input type="checkbox"/> <input checked="" type="checkbox"/>	
Approved Site Safety Plan(s) Loca	
<b>6. Incident Action Plan (the items checked below are included in this Incident Action Plan):</b>	
<input checked="" type="checkbox"/> ICS 202	<input checked="" type="checkbox"/> ICS 206
<input checked="" type="checkbox"/> ICS 203	<input checked="" type="checkbox"/> ICS 208
<input checked="" type="checkbox"/> ICS 204 (6)	<input checked="" type="checkbox"/> Map/Chart
<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Weather
<input type="checkbox"/> ICS 205A	<input checked="" type="checkbox"/> Forecast
	<input checked="" type="checkbox"/> ICS-220
	<input checked="" type="checkbox"/> ICS-214
	<input checked="" type="checkbox"/> 8 Line
	<input type="checkbox"/>
<b>7. Prepared by: Name:</b>	<b>Position/Title:</b>
Thomas Trujillo	Deputy PSC
	Signature:
	/s/
<b>8. Approved by Incident Commander: Name:</b>	
Dave Buchanan IC	
<b>ICS 202</b>	<b>IAP Page</b>

**ORGANIZATION ASSIGNMENT LIST (ICS 203)**

<b>1. Incident Name:</b> NCAR Fire		<b>2. Operational Period: Date:</b> 03/30/2022 to 04/02/2022 <b>Time:</b> 0600 to 0600	
<b>3. Incident Commander(s) and Command Staff:</b>		<b>7. Operations Section:</b>	
<b>IC</b>	Dave Buchanan	<b>OSC</b>	Erin Doyle
<b>IC(t)</b>	Brian Oliver	<b>OSC(t)</b>	
<b>Safety Officer</b>			
<b>Line Safety Officer</b>		<b>Staging Area</b>	
<b>Public Info. Officer</b>			
<b>Public Info. Officer</b>		<b>Group Supervisor</b>	
<b>Liaison Officer</b>		<b>Group Supervisor</b>	
<b>4. Agency/Organization Representatives:</b>		<b>Group Supervisor LE</b>	
<b>Agency/Organization</b>	<b>Name</b>		
<b>BCSO</b>	R. Wilber	<b>Division A</b>	Jamie Carpenter
<b>BFD</b>	M. Calderazzo	<b>Division A</b>	
<b>Mountain View FPD</b>	D. Beebe	<b>Division Z</b>	Matt Hise
<b>Mountain View FPD</b>	S. Folden	<b>Division</b>	
		<b>Night Ops Division</b>	
		<b>Division/Group</b>	
<b>5. Planning Section:</b>		<b>Division/Group</b>	
<b>Chief</b>			
<b>Deputy</b>			
<b>Resource Unit</b>			
<b>Situation Unit</b>			
<b>Documentation Unit</b>		<b>AMR</b>	TBD
<b>Demobilization Unit</b>			
<b>GIS</b>			
		<b>Division Supervisor</b>	
		<b>Group Supervisor</b>	
<b>6. Logistics Section:</b>			
<b>LSC</b>		<b>Group Supervisor</b>	
<b>Deputy</b>		<b>Deputy</b>	
<b>Support Branch</b>		<b>Division/Group</b>	
<b>Director</b>		<b>Division/Group</b>	
<b>Supply Unit</b>		<b>Division/Group</b>	
<b>Facilities Unit</b>		<b>8. Finance/Administration Section:</b>	
<b>Ground Support Unit</b>		<b>Chief</b>	
<b>Service Branch</b>		<b>Deputy</b>	
		<b>Time unit</b>	
<b>Communications Unit</b>		<b>Procurement unit</b>	
<b>Communications Unit</b>		<b>Comp/Claims unit</b>	
<b>Medical Unit</b>		<b>Cost Unit</b>	
Prepared by:	Position/ Title:	Signature:	
Thomas Trujillo	PSC3	/s/	
<b>ICS 203</b>	<b>IAP Page</b> 2	<b>Date/Time:</b>	<b>03/28/2022 @1530</b>













**ASSIGNMENT LIST (ICS 204)**

<b>1. Incident Name:</b> NCAR Fire	<b>2. Operational Period:</b>			<b>Division:</b>
	<b>Date From:</b>	3/30/22	<b>Date To:</b>	4/2/22
	<b>Time From:</b>	6:00	<b>Time To:</b>	6:00

<b>4. Operation</b>	<b>Name</b>	<b>Contact Numbers</b>
Operations Section Chief:	Erin Doyle	719-684-6892
Brach Director		
Division/Group Supervisor:	Matt Hise	720-480-7971

<b>5. Resources Assigned</b>			
Resource Identifier	Leader	# of Pe	Contact information e.g., (phone, pager, radio frequency,
4031 (T6)	Gubler	3	
2832 (T6)	Wurzer	3	
Denver Mod		7	
OSMP C-1	Williams	20	

**6. Work Assignments:**

T: Continue to secure fires edge utilizing hose lays, handline, and aircraft.

P: Minimize threat to community, infrastructure and resources within and adjacent to fire footprint.

E: Threat to community is eliminated via incident stabilization and de-escalation.

**7. Special Instructions:**

Weigh risk vs. gain to personnel when evaluating engagement opportunities in steep /rocky terrain.

Work with adjacent divisions to reallocate resources as needed to achieve objectives.

**8. Communications (radio and/or phone contact numbers needed for this assignment)**

Name/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)
FTAC 7	

<b>Prepared by:</b>	<b>Position/ Title:</b>	<b>Signature:</b>
Thomas Trujillo	PSC3	/s/ 03/27/2022 1937



INCIDENT RADIO COMMUNICATIONS PLAN ICS FORM 205				1. INCIDENT NAME			2. DATE/TIME PREPARED		3. OPERATIONAL PERIOD DATE/TIME	
				NCAR FIRE			2022.3.26 22:45		2022.3.27 to 2022.3.28 06:00 to 06:00	
Ch #	Channel Name	Assignment	RX Frequency Narrowband (N) Wideband (W)		RX Tone/NAC	TX Frequency Narrowband (N) Wideband (W)		TX Tone/NAC	Mode Digital (D) Analog (A) Mixed (M)	Remarks
1	SO FIRE C	Dispatch/Emergency	154.2200	N	141.3	154.3250	N	179.9	A	Patched to 800MHz BC Fire
2	SO FIRE 2	Command	154.3700	N	131.8	153.7700	N	131.8	A	County wide VHF repeater patched to 800MHz BC FIRE 2
3	SO LAW 3	Law Branch	155.6550	N	179.9	154.9500	N	179.9	A	Patched to 800MHz BC LAW 3
4	RNF GUNB	USFS	169.9750	N	cs	164.1000	N	103.5	A	
5	RNF THOR	USFS	169.9750	N	cs	164.1000	N	136.5	A	
6	SOPR 1	On Scene Command	155.2875	N	225.7	150.7825	N	225.7	A	BCSO Portable Repeater
7	RED NW	STAGING	155.2500	N	110.9	155.2500	N	110.9	A	Patched to 800MHz Red NW
8	SO FTAC 5	TAC	153.9500	N	167.9	153.9500	N	167.9	A	
9	SO FTAC 6	TAC	155.4075	N	186.2	155.4075	N	186.2	A	
10	SO FTAC 7	TAC	155.8500	N	203.5	155.8500	N	203.5	A	
11	SO FTAC 8	TAC	154.1075	N	192.8	154.1075	N	192.8	A	
12	SO FTAC 9	TAC	159.0300	N	103.5	159.0300	N	103.5	A	
13	SO FTAC 10	TAC	150.7975	N	162.2	150.7975	N	162.2	A	
14	VMED28	MED TAC	155.3400	N	cs	155.3400	N	156.7	A	use for Medical Air to Ground as needed
15	A/G	air to ground	167.9500	N	cs	167.9500	N	cs	A	New Frequency
16	OPEN									

**MEDICAL PLAN (ICS 206)**

<b>1. Incident Name:</b>		<b>2. Operational period</b>						
NCAR		<b>Date From:</b> 03/27/2022			<b>Date To:</b> 03/28/2022			
		<b>Time From:</b> 0600			<b>Time To:</b> 0600			
<b>3. Ambulance Services</b>								
AMR Ambulance	3800 Pearl Street Boulder, Colorado 80301			(303) 413-8690	X	Yes	No	
Mountain View Fire	1803 S. Foothills Hwy #120			(303) 494-3735	X	Yes	No	
Louisville Fire Rescue	895 Via Appia Way Louisville CO			(303) 441-4444	X	Yes	No	
Lafayette Fire Rescue	401 N 111th St, Lafayette, CO 80026			(303) 441-4444	X			
North Metro Fire Rescue	101 Spader Way Broomfield CO			(303) 438-6400	X	Yes	No	
Special Transit	4880 Pearl St, Boulder, CO 80301			(303) 447-2848		Yes	X No	
<b>4. Air Ambulance Services</b>								
<b>Name</b>		<b>Location</b>		<b>Contact Number(s)/Frequency</b>		<b>Level of Service</b>		
Northern Colorado Medivac		1801 16th St. Greeley, CO 80631		1-800-247-4357		X	ALS BLS	
Flight For Life Colorado		11600 W. 2nd Pl Lakewood CO		720-321-3900		X	ALS BLS	
Air life		750 Potomac Street, Suite 201 Aurora CO		303-360-3400		X	ALS BLS	
<b>5. Hospitals</b>								
Hospital Name	Address Latitude & Longitude	Contact Number(s)/Frequency	Travel Time		Trauma center	Burn Center	Helipad	
			Air	Ground				
Boulder Community Health	4747 Arapahoe Boulder Latitude: 40-01'39" N Longitude: 105-17'03" W	303-415-7000			Y	Yes	X	Yes
					2	Level	X	No
Avista Adventist Hospital	100 Health Park Dr, Louisville, Latitude: 39-57'09" N Longitude: 105-09'10" W	303-673-1000			Y	Yes	X	Yes
					4	Level	X	No
Goo03/d Samaritan Medical Center	200 Exempla Cir, Lafayette Latitude 39-58-18.0000 N Longitude 105- 05-06.0000W	303-689-6060			Y	Yes	X	Yes
					2	Level		No
Longmont United Hospital	1950 Mountain View Ave, Longmont, Latitude: 40-10'43" N Longitude: 105- 07'33" W	303-651-5111			Y	Yes	X	Yes
					3	Level		No
University of Colorado	12605 E 16th Ave, Aurora Latitude: 39-44'21" N Longitude: 104-59'05" W	720-848-9111			X	Yes	X	Yes
					2	Level		No
St. Anthony Hospital	11600 W 2nd Pl, Lakewood, Latitude: 39-44'35" N Longitude: 105-02'30" W	(720) 321-0000			X	Yes	X	Yes
					1	Level		No
Denver Health Medical Center	777 Bannock St, Denver Latitude: 39-43'41" N Longitude: 104-59'28" W	(303) 436-6000			X	Yes	X	Yes
					1	Level		No
Swedish Medical Center	501 E Hampden Ave, Englewood Latitude: 39-39'16" N Longitude: 104-58'17" W	(303) 788-5000			X	Yes	X	Yes
					1	Level		No
<b>6. Special Medical Emergency Procedures:</b>								
Requests for EMS / Ambulance resources should be coordinated through communications County Fire.								
Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations								
<b>7. Prepared by:</b>		Position/ Title:		Signature:				
Thomas Trujillo		Deputy PSC						
<b>8. Review by Safety Officer</b>		Position/ Title:		Signature:				
ICS 206				Date/Time:		03/27/2022		

**SAFETY MESSAGE/PLAN (ICS 208)**

<b>1. Incident Name:</b>	<b>2. Operational period</b>		
NCAR Fire	<b>Date From:</b>	3/28/2022	<b>Date To:</b> 3/29/2022
	<b>Time From:</b>	06:00	<b>Time To:</b> 06:00

**3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan:**

1. **Aviation:** Ask first: Is this mission necessary? Is using aviation resources the best and safest way to accomplish the mission? Review IRPG Pages 62,74, and 76.
  
2. **Situational Awareness:** Know where you are. Flag access and evacuation routes and safety zones, and make them known. Label flagging. There are local residents in the area and many pedestrians. Be heads up.
  
3. **Medical:** Review the 8 line, available in the IAP and on Page 118 of the IRPG.
  
4. **Human Factors:** Evaluate the abilities and expirience of your resources. Not everyone is well-rested, has the same fireline expirience, or fitness levels. Review IRPG pages x/xi.
  
5. **Risk Managment:** The risk management process is ongoing. Be sure to review IRPG page 1.
  
6. **Night Operations:** When working at night, be sure to use overhead lights, headlamps, and be aware of snags and other overhead hazards, as well as uneven terrain.

<b>4. Site Safety Plan Required?</b>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
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**Approved Site Safety Plan(s) Located At:**

<b>Prepared by:</b>	<b>Position/ Title:</b>	<b>Signature:</b>
Rich Palestro	SOFR	/s/

<b>ICS 208</b>	<b>IAP Page</b>	<b>Date/Time:</b> 3/27/2022 @ 16:00
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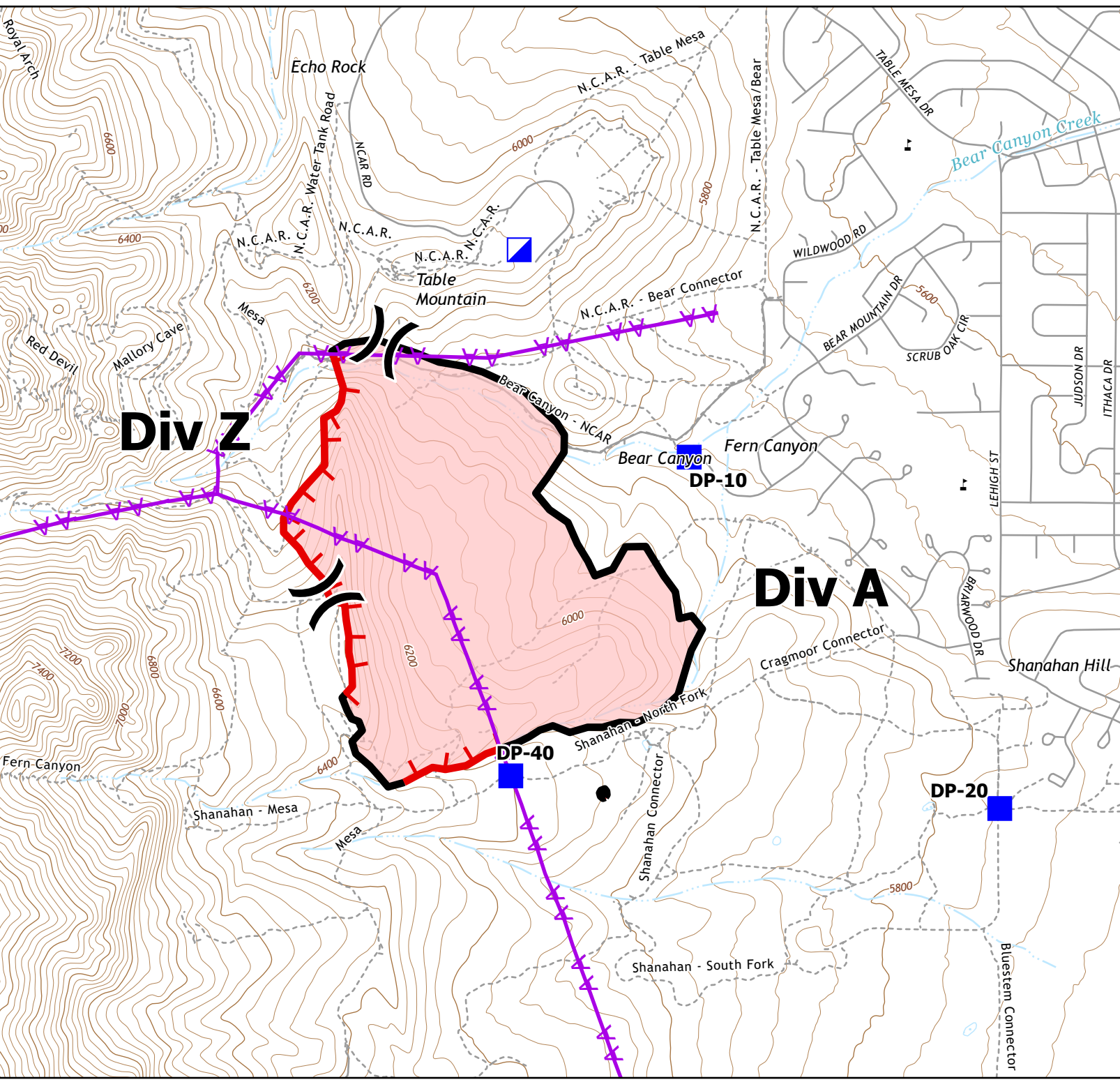
**IAP**  
**NCAR**  
**COBLX-000073**  
**3/29/2022**

190 acres at 3/28/22 0905  
 68% Contained

0 0.25  
 Mi

- ( ) Division Break
- ▣ Incident Command Post
- Drop Point
- ⚡ Aerial Hazard
- ▬ Contained
- ▬ Uncountained
- Local Road
- - - Trail
- ▭ Wildfire Daily Fire Perimeter



Trice  
 3/28/2022 16:13  
 Acres from MMA  
 North American 1983 Datum



# 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>
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>

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. TRANSPORT 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 ETA's of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.