

# INCIDENT ACTION PLAN

**Jean Lafitte National Historical Park and Preserve**



## Lafitte Fire

**Incident #: LAJEP-387  
(PPQQF3)  
NPS WBS: PF.FSQQF3C24.00.1**

**Date: 11/06-09/2023**



## INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b> Lafitte Fire	<b>2. Operational Period:</b> Date From: 11/06-09/23 Time From: 0600	Date To: 11/06-09/23 Time To: 2200								
<b>2. Objective(s):</b>  1. Minimize risk to firefighters and public through application of the risk management process. 2. Protect communities, residences, businesses and infrastructure through strategic planning and effective tactical response. 3. Minimize impacts to natural and cultural resources. Coordinate suppression planning and actions with resource advisors to identify and protect natural and cultural resources. 4. Develop strategies and tactics to minimize the impacts or damage to park natural and cultural resources, wildlife, and other improvements/developments.										
<b>4. Operational Period Command Emphasis:</b> SAFETY FIRST!!! Firefighter and Public Safety										
General Situational Awareness										
<b>5. Site Safety Plan Required?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>										
<b>Approved Site Safety Plan(s) Located at:</b>										
<b>6. Incident Action Plan</b> (the items checked below are included in this Incident Action Plan):  <table style="width: 100%;"><tr><td><input checked="" type="checkbox"/> ICS 203</td><td><input checked="" type="checkbox"/> ICS 204</td></tr><tr><td><input checked="" type="checkbox"/> ICS 205</td><td><input checked="" type="checkbox"/> ICS 206</td></tr><tr><td><input type="checkbox"/> ICS 207</td><td><input checked="" type="checkbox"/> ICS 208</td></tr><tr><td><input checked="" type="checkbox"/> Map/Chart</td><td><input checked="" type="checkbox"/> Weather</td></tr></table>			<input checked="" type="checkbox"/> ICS 203	<input checked="" type="checkbox"/> ICS 204	<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> ICS 206	<input type="checkbox"/> ICS 207	<input checked="" type="checkbox"/> ICS 208	<input checked="" type="checkbox"/> Map/Chart	<input checked="" type="checkbox"/> Weather
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<input type="checkbox"/> ICS 207	<input checked="" type="checkbox"/> ICS 208									
<input checked="" type="checkbox"/> Map/Chart	<input checked="" type="checkbox"/> Weather									
<b>7. Prepared by:</b> Name: <u>Alicia Schlarb</u> Position/Title: <u>Forestry Tech</u> Signature: _____										
<b>8. Approved by Incident Commander:</b> Name: _____ Signature: _____										
ICS 203	IAP Page _____	Date/Time: <u>11/05/23</u>								

## ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b> Lafitte Fire		<b>2. Operational Period:</b> Date From: 11/06-09/23 Time From: 0600		Date To: 11/06-09/23 Time To: 2200	
<b>3. Incident Commander(s) and Command Staff:</b>			<b>7. Operations Section:</b>		
IC/UCs	Ruben Pedraza	Chief			
Chief Ranger		Deputy			
UC					
Deputy		Staging Area			
Safety Officer		<b>Branch</b>			
Public Info. Officer		Branch Director			
Liaison Officer		Deputy			
<b>4. Agency/Organization Representatives:</b>			Division A		
Agency/Organization	Name	TFLD			
NPS	Bekki Lasell				
NPS	Chuck Hunt				
		<b>Branch</b>			
		Branch Director			
<b>5. Planning Section:</b>			Division/Group		
Chief		Division/Group			
Assistant/Shadow		Division/Group			
DOCL		Division/Group			
		Division/Group			
		<b>Branch</b>			
		Branch Director			
		Deputy			
		Division/Group			
		Division/Group			
		Division/Group			
<b>6. Logistics Section:</b>			Division/Group		
Chief	Jason McHan (LWD: 11/08)	Division/Group			
Assistant/Shadow		<b>Air Operations Branch</b>			
<b>Support Branch</b>		Air Ops Branch Dir.			
Ordering (V)					
Supply Unit					
Facilities Unit		<b>8. Finance/Administration Section:</b>			
Ground Support Unit		Chief	Larry Lee (LWD:11/08)		
<b>Service Branch</b>		Deputy			
Director		Time Unit			
Communications Unit		Procurement Unit			
Medical Unit		Comp/Claims Unit			
Food Unit		Cost Unit			
<b>9. Prepared by:</b> Name: <u>Alicia Schlarb</u> Position/Title: <u>Forestry Tech.</u> Signature: _____					
<b>ICS 203</b>	IAP Page _____	Date/Time: <u>11/05/23</u>			

.DISCUSSION...

High pressure will remain in control of the weather across the region through the first part of the work week. As winds become more southeasterly by Monday night/Tuesday morning, potential for more widespread fog will increase. While no rainfall is expected through at least mid week, a cold front will bring higher rain chances to the area to end the week.

.MONDAY...

Sky/weather.....Mostly sunny (45-55 percent).  
 Chance of pcpn.....0 percent.  
 Max temperature.....Around 80.  
 Min humidity.....41 percent.  
 Dewpoint.....58 decreasing to 55 in the afternoon.  
 Max apparent temp...80.  
 Wind (20 ft).....Light winds becoming north around 5 mph late in the morning, then shifting to the south 5 to 8 mph late in the morning.  
 Mixing height (m)...122-1250 meters AGL.  
 Transport winds.....Northwest around 5 mph shifting to the northeast around 2 mph late in the morning, then shifting to the south 7 to 9 mph in the afternoon.  
 Transport winds m/s.Northwest around 2 meters/second shifting to the northeast around 1 meters/second late in the morning, then shifting to the south 3 to 4 meters/second in the afternoon.  
 LVORI.....4.  
 Rainfall amount.....0.00 inches.  
 Eye level winds.....North winds around 3 mph increasing to around 4 mph late in the morning, then shifting to the south up to 5 mph late in the morning.

TIME (CST)	7AM	8AM	9AM	10A	11A	12P	1PM	2PM	3PM	4PM	5PM
Sky (%)	33	28	33	35	28	37	46	52	53	36	69
Chc of pcpn (%)	0	0	0	0	0	0	0	0	0	0	0
Temp	59	64	70	74	77	80	80	80	79	77	74
Dewpoint	57	59	60	58	56	55	55	54	55	56	57
RH	93	84	71	57	48	42	42	41	44	48	55
Aparnt tmp (F)	59	64	70	74	77	80	80	80	79	77	74
20 FT wind dir	N	N	N	N	S	S	S	S	S	S	S
20 FT wind spd	2	2	5	6	6	6	7	8	9	8	7
20 FT wind gust	5	3	7	9	9	9	10	13	14	13	10
Eye lvl wnd dir	N	N	N	N	S	S	S	S	S	S	S
Eye lvl wnd spd	1	1	3	4	4	4	4	5	5	5	4
Eye lvl wnd gst	3	2	4	5	5	5	6	8	8	8	6
Mix hgt (km)	0.1	0.1	0.2	0.2	0.2	1.2	1.2	1.2	1.2	1.2	1.2
Transp wind dir	NW	NW	NE	NE	NE	S	S	S	S	S	S
Transp wind spd	5	5	2	2	2	7	7	7	9	9	9

Trans wind dir..NW	NW	NE	NE	NE	S	S	S	S	S	S
Trans spd (m/s)..2	2	1	1	1	3	3	3	4	4	4
LVORI.....6	5	3	3	2	2	2	2	2	2	2

.MONDAY NIGHT...

Sky/weather.....Mostly cloudy (65-75 percent) then becoming partly cloudy (40-50 percent) then becoming mostly cloudy (55-65 percent) then becoming partly cloudy (35-45 percent). Patchy fog after 3 am.

Chance of pcpn.....0 percent.

Min temperature.....Around 61.

Max humidity.....93 percent.

Dewpoint.....60.

Max apparent temp...71.

Wind (20 ft).....South winds 5 to 6 mph early in the evening becoming light.

Mixing height (m)...122-152 meters AGL.

Transport winds.....South 6 to 8 mph.

Transport winds m/s.South 3 to 4 meters/second.

LVORI.....5.

Rainfall amount.....0.00 inches.

Eye level winds.....South winds around 4 mph decreasing to around 3 mph in the late evening and overnight.

TIME (CST)	6PM	7PM	8PM	9PM	10P	11P	MID	1AM	2AM	3AM	4AM	5AM
Sky (%).....	68	48	45	49	58	61	63	61	58	56	47	37
Weather cov.....										PTY		
Weather type....										FOG		
Tstm cov.....												
Chc of pcpn (%)..0	0	0	0	0	0	0	0	0	0	0	0	0
Temp.....	71	68	67	67	66	66	65	64	64	63	63	63
Dewpoint.....	59	59	60	61	61	61	61	61	61	61	60	60
RH.....	66	73	78	81	84	84	87	90	90	93	90	90
Aparnt tmp (F)..71	68	67	67	66	66	66	65	64	64	63	63	63
20 FT wind dir..S	S	S	S	S	S	S	S	S	SSW	SSW	S	SSE
20 FT wind spd..7	6	6	5	5	3	3	3	3	3	3	3	2
20 FT wind gust..10	9	9	7	7	6	6	5	5	5	6	5	5
Eye lvl wnd dir..S	S	S	S	S	S	S	S	S	SSW	SSW	S	SSE
Eye lvl wnd spd..4	4	4	3	3	2	2	2	2	2	2	2	1
Eye lvl wnd gust..6	5	5	4	4	4	4	4	3	3	4	3	3
Mix hgt (km)....0.2	0.2	0.2	0.2	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1
Transp wind dir..S	S	S	S	S	S	S	S	S	S	S	S	S
Transp wind spd..8	8	8	7	7	7	7	7	7	7	6	6	6
Trans wind dir..S	S	S	S	S	S	S	S	S	S	S	S	S
Trans spd (m/s)..4	4	4	3	3	3	3	3	3	3	3	3	3
LVORI.....	3	4	4	4	4	4	5	5	6	6	6	6

.TUESDAY...

Sky/weather.....Sunny (15-25 percent).  
Chance of pcpn.....0 percent.  
Max temperature.....Around 81.  
Min humidity.....53 percent.  
Dewpoint.....62.  
Max apparent temp...82.  
Wind (20 ft).....Light winds becoming south 5 to 8 mph in the  
late morning and afternoon.  
Mixing height (m)...122-1250 meters AGL.  
Transport winds.....South 5 to 10 mph.  
Transport winds m/s.South 2 to 4 meters/second.  
LVORI.....5.  
Rainfall amount.....0.00 inches.  
Eye level winds.....South winds around 3 mph shifting to the up to  
6 mph in the late morning and afternoon.

TIME (CST)	6AM	7AM	8AM	9AM	10A	11A	12P	1PM	2PM	3PM	4PM	5PM
Sky (%)	28	23	18	13	14	15	16	18	19	21	21	21
Chc of pcpn (%)	0	0	0	0	0	0	0	0	0	0	0	0
Temp	63	67	71	75	77	79	80	81	81	79	76	74
Dewpoint	60	61	63	64	64	63	62	62	63	63	63	64
RH	90	81	76	69	64	58	54	53	54	58	64	71
Aparnt tmp (F)	63	67	71	75	77	79	81	82	82	79	76	74
20 FT wind dir	SE	SSE	S	S	S	S	S	S	S	S	S	S
20 FT wind spd	2	3	5	6	7	8	9	10	10	10	9	8
20 FT wind gust	3	6	8	9	10	12	12	12	12	12	12	12
Eye lvl wnd dir	SE	SSE	S	S	S	S	S	S	S	S	S	S
Eye lvl wnd spd	1	2	3	4	4	5	5	6	6	6	5	5
Eye lvl wnd gst	2	4	5	5	6	7	7	7	7	7	7	7
Mix hgt (km)	0.1	0.1	0.1	0.8	0.8	0.8	1.2	1.2	1.2	1.2	1.2	1.2
Transp wind dir	S	S	S	SSW	SSW	SSW	SSW	SSW	SSW	S	S	S
Transp wind spd	5	5	5	8	8	8	9	9	9	10	10	10
Trans wind dir	S	S	S	SSW	SSW	SSW	SSW	SSW	SSW	S	S	S
Trans spd (m/s)	2	2	2	4	4	4	4	4	4	4	4	4
LVORI	7	5	4	3	3	2	2	2	2	2	2	3



# ***SAFETY MESSAGE***

## ***LAFITTE FIRE***

11/06 – 11/09

**0530-2200**

### **SAFETY MESSAGE**

## **FIRE FIGHTER SAFETY IS OUR FIRST PRIORITY**

FIGHT FIRE AGGRESSIVELY, BUT PROVIDE FOR SAFETY FIRST

### *Major Hazards:*

- SMOKE & FOG
- SNAKES
- HEAT
- LONG TRANSIT TIMES

### *Points to Consider*

- *“What you condone, you accept.”*
- “Human Factors, cumulative fatigue, crew morale
- “You cannot affect the culture without first affecting the leaders.”  
*Lark McDonald, Mission Center Solutions, Fireline Leadership*



**SAFETY FIRST!**



***Safety Officer***  
Phil Gerhardson SOFC



<b>1. Incident Name:</b> Lafitte Fire	<b>2. Date/Time Prepared:</b> Date: 11/05/23 Time: 2000	<b>3. Operational Period:</b> Date From: 11/06-09/23      Date To: 11/06-09/23 Time From: 0600                  Time To: 2200
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4. Basic Radio Channel Use:										
Zone Grp.	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	TX Tone/NAC	Mode (A, D, or M)	Remarks
	13		Reg 8		166.5625		166.5625			
	15		A/G pri		169.200		169.200			

**5. Special Instructions:**

**6. Prepared by** (Communications Unit Leader) Name: Alicia Schlarb Signature: \_\_\_\_\_

ICS 205	IAP Page _____	Date/Time: <u>11/05/23</u>
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# Lafitte Contact List

Contact	Title	Phone Number	Email	LWD
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<b>Dispatch:</b>				
LALIC	LA IA Dispatch	318-473-7135	lalic@firenet.gov	
LALIC	LA Coord. Center - Expanded	318-473-7111		

<b>Overhead:</b>				
Fulton Jeansonne	ICT3	409-926-6766	fulton_jeansonne@nps.gov	11/09
Jason McHan	LSC3	865-223-4415	jason_mchan@firenet.gov	11/09
Todd Dekker	DIVS	505-228-8660	steven_decker@fws.gov	11/10
Ruben Pedraza	TFLD	520-869-1677	ruben_pedraza@nps.gov	11/15

<b>JELA/JP Park Contacts:</b>				
John Herrod	Lead Law Enforcement	504-382-0301	john_herrod@nps.gov	-
Don Robertson	JP Fire Chief	504-239-4231	don.robertson@jeffparish.net	-

<b>Personnel:</b>				
Alicia Schlarb	Planning asst	662-891-3998	alicia_schlarb@nps.gov	11/06
Josh Petrell	E9/ENGB	530-545-1918	joshua.petrell@usda.gov	11/09
Jordan Smith	Cedar City	435-704-1535	jordan.fire@cedarcity.org	11/14

## MEDICAL PLAN (ICS 206)

<b>1. Incident Name:</b> Lafitte Fire	<b>2. Operational Period:</b> Date From: 11/06-09/23 Time From: 0600	Date To: 11/06-09/23 Time To: 2200
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3. Medical Aid Stations:			
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?
Jean Lafitte FD (EMRs 24/7)	2385 Jean Lafitte Blvd. Jean Lafitte, LA	911/504-689-2086	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

4. Transportation (indicate air or ground):			
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service
W. Jefferson MC EMS	1225 Ave. C, Marrero, LA	911/504-349-1552	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS

5. Hospitals:							
Hospital Name	Address	Contact Number(s)/Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
Oschner Westbank	2500 Belle Chasse Hwy, Gretna, LA 70056			26 min	<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
University Medical Center	2000 Canal St, New Orleans, LA		10 min	32 min	<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
Lafitte Fire Department	1225 Ave. C, Marrero, LA		7 min	21 min	<input type="checkbox"/> Yes Level: 3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>6. Special Medical Emergency Procedures:</b> St. Anthony Catholic Church for landing zone: 29° 44.13N, 90° 7.53W
<input type="checkbox"/> 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: <u>Phil Gerhardson</u> Signature: _____
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<b>8. Approved by (Safety Officer):</b> Name: _____ Signature: _____
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ICS 206	IAP Page _____	Date/Time: 11/05/23
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# MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

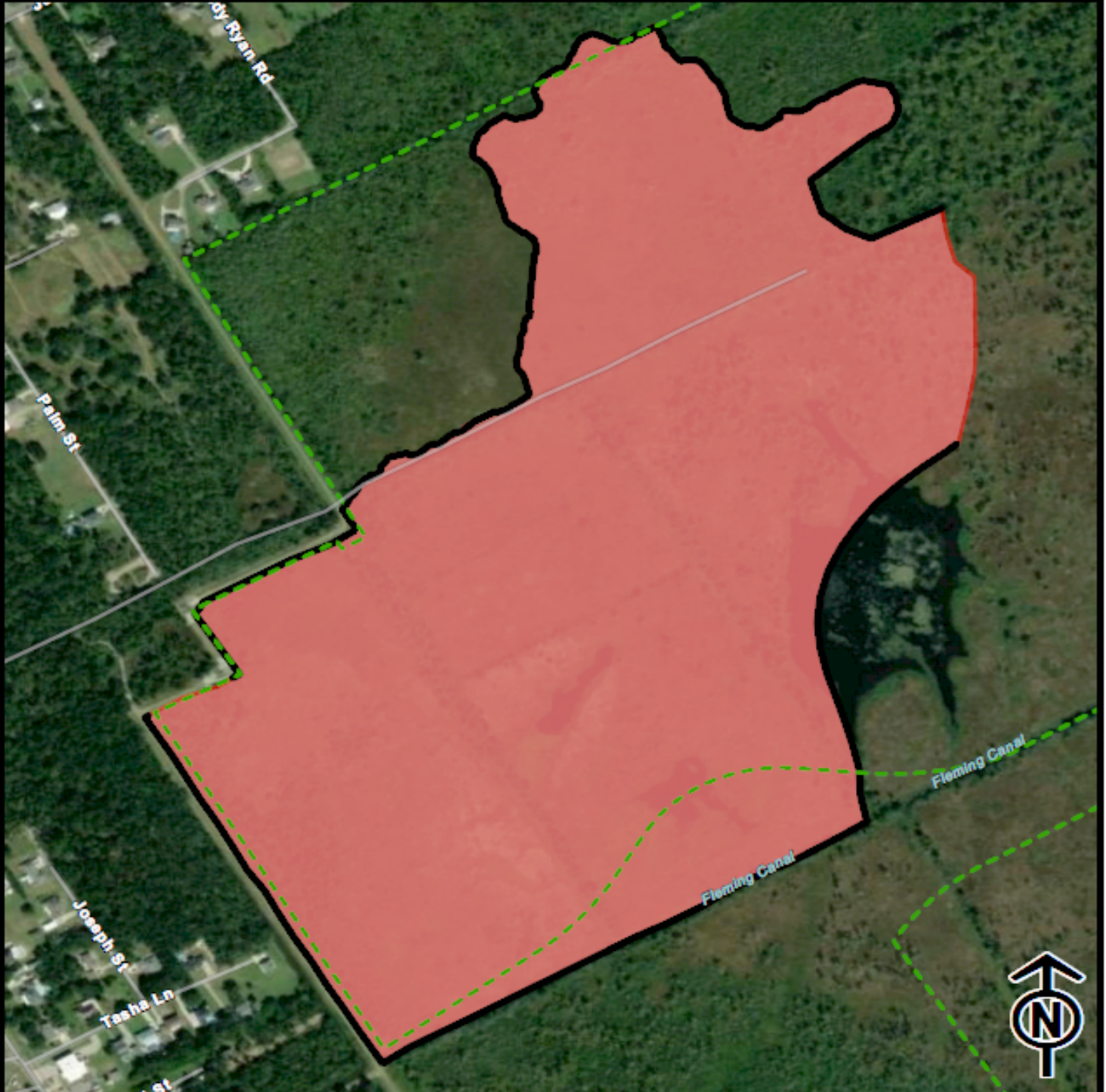
Medical Incident Report																													
<p>FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.</p> <p>FOR A MEDICAL EMERGENCY: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE <b>"MEDICAL EMERGENCY"</b> TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.</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			Brief Summary of Injury or Illness <i>(Ex: Unconscious, Struck by Falling Tree)</i>																										
Transport Request			Air Ambulance / Short Haul/Hoist Ground Ambulance / Other																										
Patient Location			Descriptive Location & Lat. / Long. (WGS84)																										
Incident Name			Geographic Name + "Medical" <i>(Ex: Trout Meadow Medical)</i>																										
On-Scene Incident Commander			Name of on-scene IC of Incident within an Incident <i>(Ex: TFLD Jones)</i>																										
Patient Care			Name of Care Provider <i>(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): <i>(Descriptive Location (drop point, intersection, etc.) or Lat. / Long.)</i> 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> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Function</th> <th style="width: 20%;">Channel Name/Number</th> <th style="width: 15%;">Receive (RX)</th> <th style="width: 15%;">Tone/NAC *</th> <th style="width: 15%;">Transmit (TX)</th> <th style="width: 20%;">Tone/NAC *</th> </tr> </thead> <tbody> <tr> <td>COMMAND</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>AIR-TO-GRND</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TACTICAL</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *	COMMAND						AIR-TO-GRND						TACTICAL					
Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *																								
COMMAND																													
AIR-TO-GRND																													
TACTICAL																													
<p><b>7. CONTINGENCY: Considerations:</b> <i>If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead.</i></p>																													
<p><b>8. ADDITIONAL INFORMATION:</b> <i>Updates/Changes, etc.</i></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>																													



# Lafitte

Jean Lafitte National Historical Park and Preserve

National Park Service  
U.S. Department of the Interior



147 Acres

90% Containment as 11.03.23

11.03.23

- NPS Park Boundary
- Wildfire Daily Perimeter
- Contained

