

Incident Action Plan



Goshen Pass Fire Operational Period

04/18/2017

0700 to 1900

1. Incident Name Goshen Pass Fire	2. Date Prepared 04/17/2017	3. Time Prepared 2000	INCIDENT OBJECTIVES
4. Operational Period Date: 04/18/2017 Time: 0700 to 1900			
5. General Control Objectives For The Incident (Include Alternatives) Provide for Public and Firefighters Safety Contain the fire west of Rt. 39 Keep the fire contained to the south east of Brattons Run Keep the fire contained north east of Hogback Mountain Keep the fire east of Rt. 629 Keep the public informed on the progress of the incident			
6. Weather Forecast For Operational Period Partly cloudy skies during the morning hours will become overcast in the afternoon. Mostly cloudy, with a high near 71. Relative humidity 31% East Southeast winds around 5 to 10 mph.			
7. General Safety Message Provide for Public and Firefighter Safety Watch for smoke and debries rolling into the road along Rt. 39 Use proper PPE and Safety Precautions when falling snags and working around dozers Drive with head lights on at all times and wear seat belts at all times Watch for rattle snakes and other wildlife Watch for recreational traffic on Rt. 39, hikers and other public traffic			
8. Attachments (<input checked="" type="checkbox"/> if attached) <input checked="" type="checkbox"/> Organization Assignment List – ICS 203 <input checked="" type="checkbox"/> Medical Plan – ICS 206 <input type="checkbox"/> _____ <input checked="" type="checkbox"/> Division Assignment List – ICS 204 <input checked="" type="checkbox"/> Incident Map <input type="checkbox"/> _____ <input checked="" type="checkbox"/> Communications Plan – ICS 205 <input type="checkbox"/> Traffic Plan <input type="checkbox"/> _____			
Prepared By (Planning Section Chief) Jason Braunstein		Approved By (Incident Commander) Donnie Garman	

1. Incident Name Goshen Pass Fire	2. Date Prepared 04/17/2017	3. Time Prepared 1800	ORGANIZATION ASSIGNMENT LIST	
4. Operational Period Date: 04/18/2017 Time: 0700 to 1900				
5. Incident Commander & Staff			9. Operations Section	
Incident Commander	Donnie Garmon	276-233-6251	Chief	Mike Womack 434-547-2670
Deputy	Kent Burtner	434-981-6643	Deputy	
Safety Officer	John Highsman	540-686-2401	a. Branch I – Divisions/Groups	
Information Officer	Karen Stanley	540-463-5253	Branch Director	
Liaison Officer			Deputy	
6. Agency Representatives			Division/Group	DIV. A Unstaffed
VDOT	Phil Sheets	540-460-6582	Division/Group	DIV. B Jon Willoughby 540-871-8569
Rockbridge Co. Fire	Chief Nathen Ramsey	540-784-3597	Division/Group	DIV. C John Wright 540-312-7755
Boy Scouts of America	Mike Jolly	540-255-3053	Division/Group	DIV. D David Houttekier 804-258-3107
			Division/Group	
			b. Branch II– Divisions/Groups	
			Branch Director	
7. Planning Section			Deputy	
Chief	Jason Braunstein	434-962-1318	Division/Group	
Deputy			Division/Group	
Resources Unit			Division/Group	
Situation Unit			Division/Group	
Documentation Unit			Division/Group	
Demobilization Unit			c. Branch III– Divisions/Groups	
Technical Specialists			Branch Director	
Check In Recorder	Trevor Simmons	434-962-3327	Deputy	
FOB	Juergen Lunkwitz	215-688-6866	Division/Group	
			Division/Group	
			Division/Group	
			Division/Group	
			Division/Group	
8. Logistics Section			d. Air Operations Branch	
Chief	Trevor Simmons	434-962-3327	Air Ops Br. Dir.	
Deputy	Jeremy Falkenau	540-685-3969	Air Tactical Gr.Sup.	
a. Support Branch			Air Support Gr.Sup.	
Director			Helicopter Crd.	
Supply Unit			Air Tanker/FW Crd.	
Facilities Unit			10. Finance Section	
Ground Support Unit			Chief	
			Deputy	
b. Service Branch			Time Unit	
Director			Procurement Unit	
Communication Unit	Keith Brown	434-906-0565	Compen./Claims Unit	
Medical Unit			Cost Unit	
Food Unit				
Prepared By (Resource Unit Leader) Jason Braunstein				

INCIDENT RADIO COMMUNICATIONS PLAN I-205	1. INCIDENT NAME Goshen Pass Fire	2. DATE/TIME PREPARED 04/17/2017 2000Hrs	3. OPERATIONAL PERIOD DATE/TIME 04/18/2017 Day Shift
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4. BASIC RADIO CHANNEL UTILIZATION

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	DIR 1	DIV A	151.9000	N	100.0	151.9000	N	100.0	A	
2	DIR 2	DIV B	151.4750	N	100.0	151.4750	N	100.0	A	
3	DIR 3	DIV C	159.3600	N	100.0	159.3600	N	100.0	A	
4	DIR 4	DIV D	159.4650	N	100.0	159.4650	N	100.0	A	
5	DIR 5	CMD	171.4250	N	100.0	171.4250	N	100.0	A	BACK TO ICP
6	DIR 6	UNASSIGNED	170.4750	N	100.0	170.4750	N	100.0	A	
7	DIR 7	UNASSIGNED	172.2750	N	100.0	172.2750	N	100.0	A	
8	DIR 8	UNASSIGNED	151.4975	N	100.0	151.4975	N	100.0	A	
9	DIR 9	UNASSIGNED	158.8725	N	100.0	158.8725	N	100.0	A	
10	DIR 10	UNASSIGNED	159.0225	N	100.0	159.0225	N	100.0	A	
11	DIR 11	ALL DIVS	159.0450	N	100.0	159.0450	N	100.0	A	SECONDARY AIR TO GROUND
12	COMPACT	ALL DIVS	159.2850	N		159.2850	N	100.0	A	PRIMARY AIR TO GROUND
13	Z03 FIRE W7	ALL DIVS	STARS	N		STARS	N		D	SECONDARY CMD BACK TO ICP. DOF PERSONNEL WITH STARS RADIOS.
14	Z03 FIRE W6	DIV B	STARS	N		STARS	N		D	DIV B CMD BACK TO ICP. DOF PERSONNEL WITH STARS RADIOS.
15										
16										

I-205 Prepared By	Keith Brown - COML	USE HUMAN REPEATERS WHEN NEEDED.
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1. Incident Name Goshen Pass Fire	2. Date Prepared 04/17/2017	3. Time Prepared 2200	4. Operational Period Date: 04/18/2017 Time: 0700 to 1900		MEDICAL PLAN			
5. Incident Medical Aid Stations								
Medical Aid Station	Address/Location		Phone		Paramedics			
					Yes	No		
BSA Health Log	ICP/First Aid Building				<input type="checkbox"/>	<input checked="" type="checkbox"/>		
					<input type="checkbox"/>	<input type="checkbox"/>		
					<input type="checkbox"/>	<input type="checkbox"/>		
					<input type="checkbox"/>	<input type="checkbox"/>		
					<input type="checkbox"/>	<input type="checkbox"/>		
6. Transportation								
a. Ambulance Services								
Name	Address/Location		Phone		Paramedics			
					Yes	No		
Rockbridge Bath Fire & Rescue	Maury River Road		540-570-5955		<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Augusta F&R Craigsville Station	68 West Rail Road Ave.		540-977-5160		<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Goshen Rescue	9770 Maury River Road		540-977-9409		<input type="checkbox"/>	<input checked="" type="checkbox"/>		
					<input type="checkbox"/>	<input type="checkbox"/>		
					<input type="checkbox"/>	<input type="checkbox"/>		
b. Incident Ambulances								
Medical Aid Station	Address/Location		Phone		Paramedics			
					Yes	No		
					<input type="checkbox"/>	<input type="checkbox"/>		
					<input type="checkbox"/>	<input type="checkbox"/>		
					<input type="checkbox"/>	<input type="checkbox"/>		
					<input type="checkbox"/>	<input type="checkbox"/>		
					<input type="checkbox"/>	<input type="checkbox"/>		
7. Hospitals								
Name	Address/Location	Travel Time		Phone	Helipad		Burn Center	
		Air	Ground		Yes	No	Yes	No
Stonewall Jackson	1 Health Circle Lexington, VA	10min.	30min.	540-458-3300	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Roanoke Memorial		25 min	1 hr 15		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
UVA		28 min	1 hr 30		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Medical Emergency Procedures								
<p>Contact Laurel Fire ICP and declare a medical emergency on Command, advising your location and situation.</p> <p>The closest DIVS will respond to the location to take command.</p> <p>The closest EMT and safety officer will respond to the location to assist with patient care</p> <p>Use the attached "9 Line" worksheet to coordinate appropriate care and transportation</p> <p>If air or ground ambulance is delayed, designate rendezvous point and transport patient to rendezvous</p>								
Prepared By (Medical Unit Leader) Jason Braunstein					Reviewed By (Safety Officer) John Highsman			

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

Ex: "Communications, Div. Alpha. Stand-by for Priority Medical Incident Report." (If life threatening request designated frequency be cleared for emergency traffic.)

2. INCIDENT STATUS: Provide incident summary and command structure.

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: Complete this section for each patient. This is only a brief, initial assessment. Provide additional patient info after completing this 9 Line Report.

Number of Patients:	Male / Female	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:	

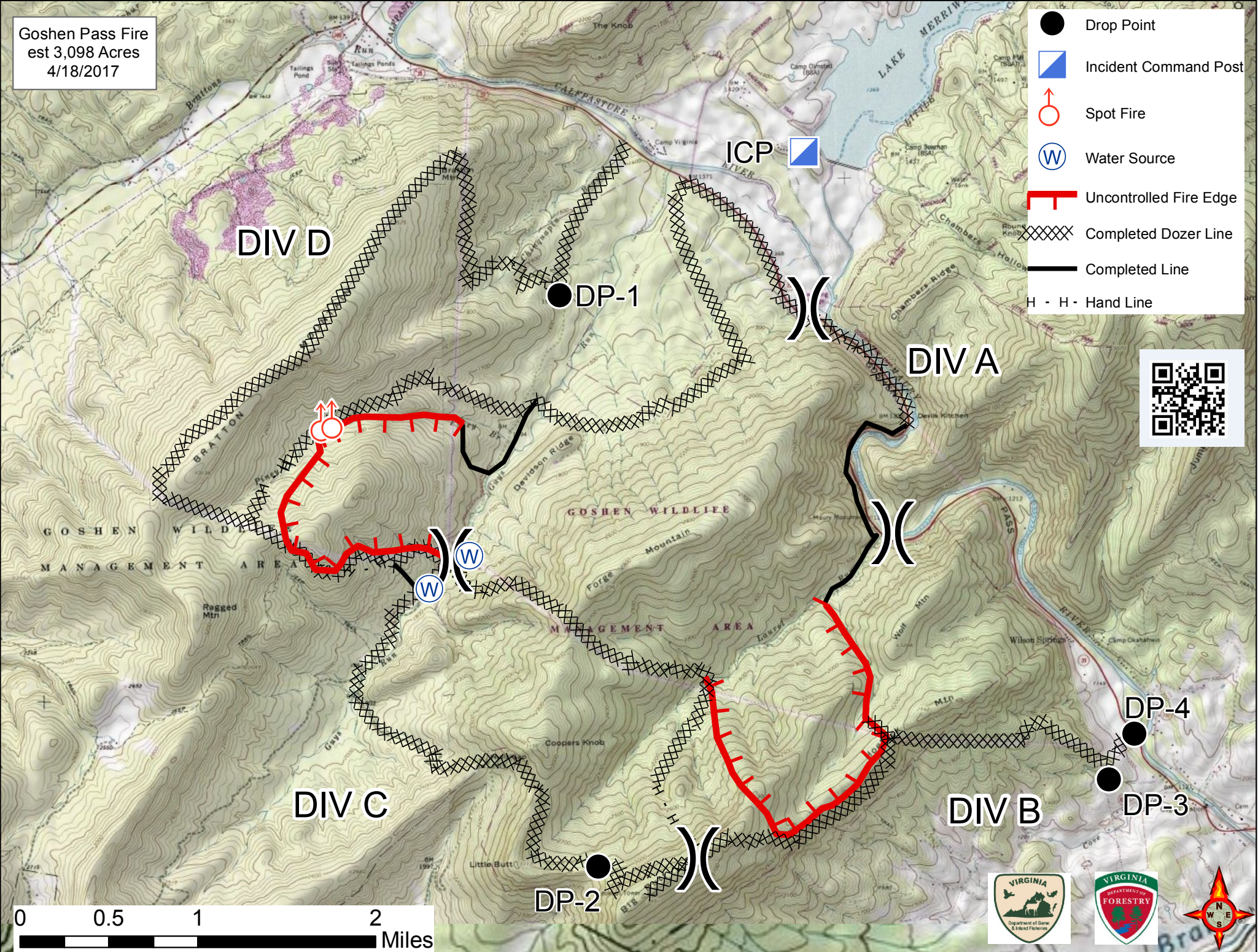
9. CONTINGENCY:

Considerations: *If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead...*

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

Goshen Pass Fire
est 3,098 Acres
4/18/2017

- Drop Point
- ▣ Incident Command Post
- ♂ Spot Fire
- ⊙ Water Source
- └ Uncontrolled Fire Edge
- ⊗ Completed Dozer Line
- Completed Line
- H - H - Hand Line



0 0.5 1 2 Miles



Goshen Pass Fire
est 3,098 Acres
4/18/2017

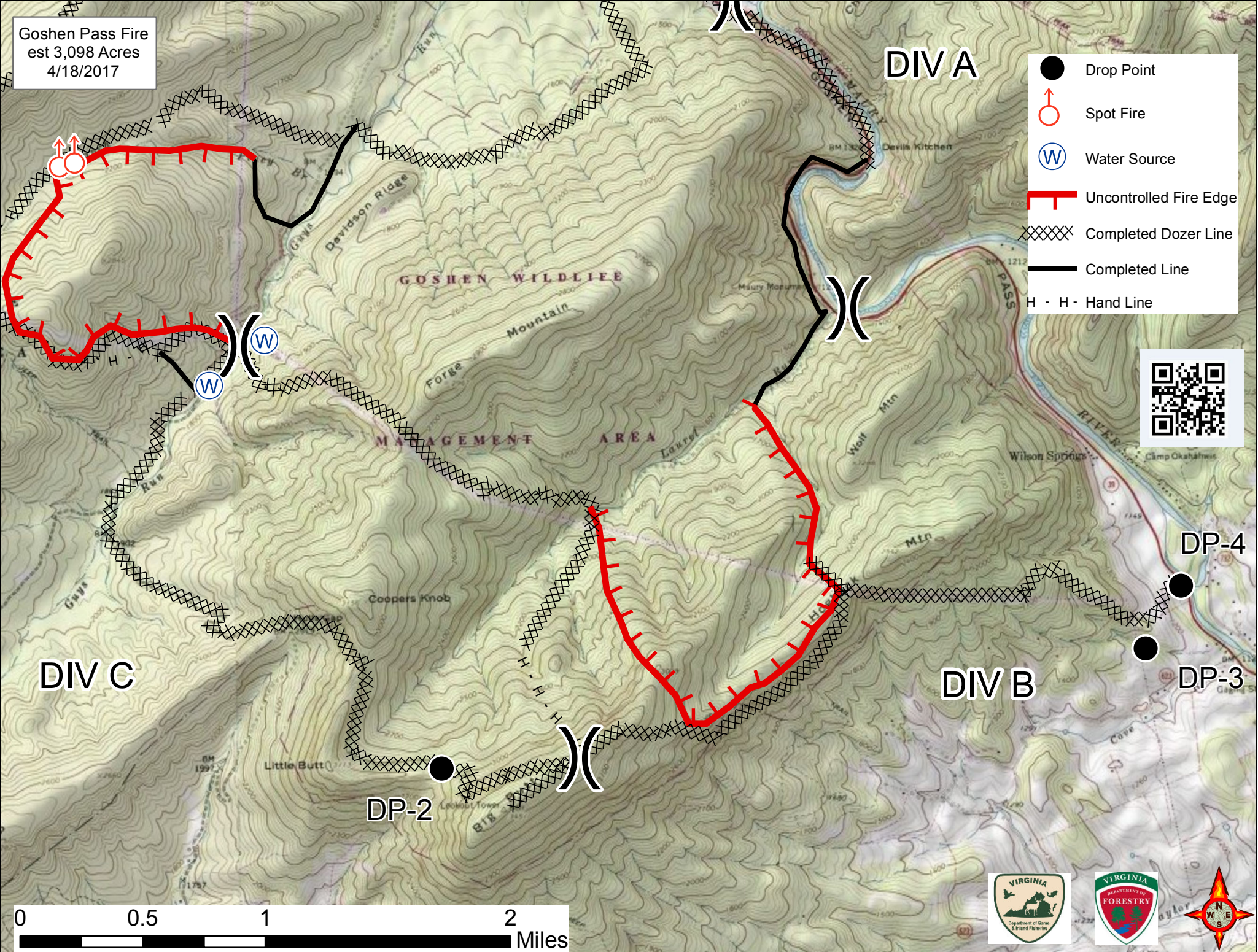
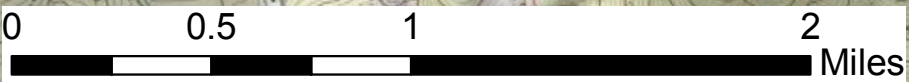
DIV A

- Drop Point
- ♂ Spot Fire
- Ⓜ Water Source
- └ Uncontrolled Fire Edge
- XXXXX Completed Dozer Line
- Completed Line
- H - H - Hand Line



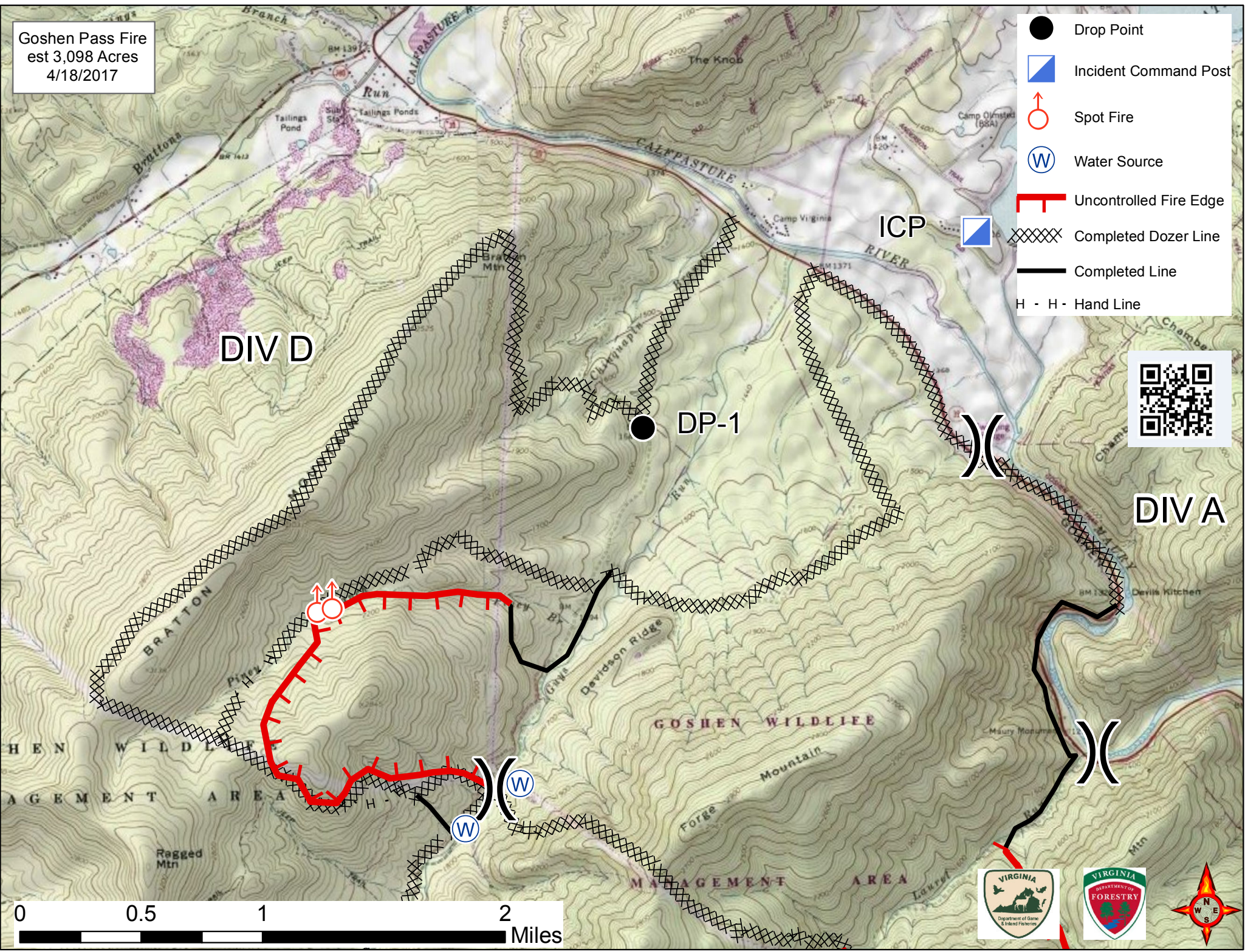
DIV C

DIV B



Goshen Pass Fire
est 3,098 Acres
4/18/2017

- Drop Point
- ▣ Incident Command Post
- ♂ Spot Fire
- ⊕ Water Source
- ┌ Uncontrolled Fire Edge
- ▣ Completed Dozer Line
- Completed Line
- H - H - Hand Line



0 0.5 1 2 Miles

