

Incident Action Plan
for
Quaker Run Fire

Operational Period

Date From: 11/07/23
Time From: 0000

Date To: 11/07/23
Time To: 2400



INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: Quaker Run Fire	2. Operational Period: Date From: 11/07/23 Time From: 0000	Date To: 11/07/23 Time To: 2400													
3. Objective(s): <ul style="list-style-type: none"> - Provide for firefighter and public safety - Protect structures - Maintain relationships with landowners - Minimize impact on Shenandoah National Park - Keep fire north of structures on Quaker Run Road - Keep fire south of structures on Finks Hollow Lane - Keep fire east of Rapidan Road and south of Upper Dark Hollow Trail - Minimize impact to Rapidan River riparian area. 															
4. Operational Period Command Emphasis:															
General Situational Awareness: Tuesday – Mostly cloudy, with a high near 74. Minimum humidity 37%. Southwest winds 8 mph gusting to 17. Tuesday night – Mostly clear, with a low of 43. Maximum humidity of 89%. Light and variable winds.															
5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input type="checkbox"/> Approved Site Safety Plan(s) Located at: ICP															
6. Incident Action Plan (the items checked below are included in this Incident Action Plan): <table style="width: 100%; border: none;"> <tr> <td><input checked="" type="checkbox"/> ICS 202</td> <td><input checked="" type="checkbox"/> ICS 206</td> <td rowspan="6" style="vertical-align: top;"> Other Attachments: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ </td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 203</td> <td><input type="checkbox"/> ICS 207</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 204</td> <td><input checked="" type="checkbox"/> ICS 208</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205</td> <td><input checked="" type="checkbox"/> Map/Chart</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205A</td> <td><input checked="" type="checkbox"/> Weather Forecast/Tides/Currents</td> </tr> <tr> <td></td> <td></td> </tr> </table>			<input checked="" type="checkbox"/> ICS 202	<input checked="" type="checkbox"/> ICS 206	Other Attachments: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	<input checked="" type="checkbox"/> ICS 204	<input checked="" type="checkbox"/> ICS 208	<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Map/Chart	<input checked="" type="checkbox"/> ICS 205A	<input checked="" type="checkbox"/> Weather Forecast/Tides/Currents		
<input checked="" type="checkbox"/> ICS 202	<input checked="" type="checkbox"/> ICS 206	Other Attachments: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____													
<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207														
<input checked="" type="checkbox"/> ICS 204	<input checked="" type="checkbox"/> ICS 208														
<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Map/Chart														
<input checked="" type="checkbox"/> ICS 205A	<input checked="" type="checkbox"/> Weather Forecast/Tides/Currents														
7. Prepared by: Name: Zoë Sumrall Position/Title: PSC Signature: _____															
8. Approved by Incident Commander: Name: Jack Kauffman Signature: _____															
ICS 202	IAP Page 1	Date/Time: 11/06/23 @ 1900													

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: Quaker Run Fire		2. Operational Period: Date From: 11/07/23 Time From: 0000		Date To: 11/07/23 Time To: 2400	
3. Incident Commander(s) and Command Staff:			7. Operations Section:		
IC/UCs	Jack Kauffman, VDOF	Chief	Bill Perry, VDOF		
	Jordan Collier, NPS	Deputy			
	Gavin Helme, Madison County Emerg. Mgt.				
	Brian Gordon, Madison County Emerg. Mgt.				
	Billy Hamm, Madison County Emerg. Mgt.	Staging Area			
Safety Officer	David Powell, VDOF	Branch			
Public Info. Officer	Cory Swift-Turner	Branch Director			
Liaison Officer		Deputy			
4. Agency/Organization Representatives:			Division/Group	A/G/H	Daniel Swisher, VDOF
Agency/Organization	Name	Division/Group	D		Matt Boss
Madison County Sheriff's Office	Sheriff Erik Weaver	Division/Group	F		John Rose, VDOF
VDOF Central Regional Forester	Robbie Talbert	Division/Group	Night Shift		Jeremy Bryant
Shenandoah National Park	Superintendent Patrick Kenney	Division/Group			
			Branch		
			Branch Director		
			Deputy		
5. Planning Section:			Division/Group		
Chief	Zoë Sumrall, VDOF	Division/Group			
Deputy		Division/Group			
Resources Unit		Division/Group			
Situation Unit		Division/Group			
Documentation Unit		Branch			
Demobilization Unit		Branch Director			
Technical Specialists	Margaret Key, NPS – Air Resource Advisor	Deputy			
			Division/Group		
6. Logistics Section:			Division/Group		
Chief	Kinner Ingram, VDOF	Division/Group			
Deputy		Air Operations Branch			
Support Branch			Air Ops Branch Dir.		
Director					
Supply Unit					
Facilities Unit		8. Finance/Administration Section:			
Ground Support Unit	Zach Reynolds, VDOF	Chief	Anna Bryant		
Service Branch			Deputy		
Director		Time Unit			
Communications Unit		Procurement Unit			
Medical Unit		Comp/Claims Unit			
Food Unit		Cost Unit	Ken Leake		
9. Prepared by: Name: Zoë Sumrall		Position/Title: PSC		Signature:	
ICS 203	IAP Page 2	Date/Time: 11/06/23 @ 1900			

ASSIGNMENT LIST (ICS 204)

1. Incident Name: Quaker Run Fire		2. Operational Period: Date From: 11/07/23 Date To: 11/07/23 From: 0000 Time To: 2400			3. Branch:	
4. Operations Personnel: <u>Name</u>		<u>Contact Number(s)</u>			Division: A/G/H	
Operations Section Chief: Bill Perry		540-817-3344			Group:	
Branch Director: _____					Staging Area:	
Division/Group Supervisor: John Rose		757-346-8149				
5. Resources Assigned:		# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information	Last Shift	
Resource Identifier	Leader					
Eastern Region Crew	Brian Lacey		804-896-4083		11/9	
	Matias Pineiro		434-260-2184		11/9	
	Nelson Jarvis		804-654-1220		11/9	
	Riley Leigh		804-894-4885		11/9	
	James Cochran		804-366-1400		11/9	
	Andrew Matteson		434-484-0932		11/9	
	Jordan Lutz		703-930-3415		11/9	
	Kenny Aliceburg		804-441-1365		11/9	
ALB30 UTV						
KWM30 UTV						
DIN30 UTV						
Madison County F&R						
6. Work Assignments:						
<ul style="list-style-type: none"> - Patrol and blow out line daily. - Continue to monitor from DP-20 to DP-30. 						
7. Special Instructions:						
- UTV is useful.						
8. Communications (radio and/or phone contact numbers needed for this assignment):						
<u>Name/Function</u>		<u>Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</u>				
Command 1 / Command		_____				
TAC 2 / Tactical		_____				
/		_____				
/		_____				
9. Prepared by: Name: Zoë Sumrall Position/Title: PSC Signature: _____						
ICS 204	IAP Page 3	Date/Time: 11/06/23 @ 1900				

Quaker Run Fire

Incident Radio Communication Plan			Incident Name:		Date Time Prepared:	Operational Period Date/Time:
			Quaker Run		11/06/2023	11/07/23 0000-2400
Ch #	Function:	Frequency:	Tone:	Mode:	Assignment:	Notes:
1	CMD 1	RX: 159.3600	100.0	A	Command Net	Command Repeater Covering Entire Fire Back to ICP
		TX: 151.4750	100.0			
2	TAC 2	RX: 151.1900	100.0	A	DIV A/H	DOF DIR 1
		TX: 151.1900	100.0			
3	TAC 3	RX: 151.4750	100.0	A	Unassigned	DOF DIR 2
		TX: 151.4750	100.0			
4	TAC 4	RX: 159.3600	100.0	A	Unassigned	DOF DIR 3
		TX: 159.3600	100.0			
5	TAC 5	RX: 159.4650	100.0	A	DIV F/G	DOF DIR 4
		TX: 159.4650	100.0			
6	TAC 6	RX: 151.1375	156.7	A	DIV D	VTAC 11
		TX: 151.1375	156.7			
7	TAC 7	RX: 159.2850		A	Unassigned	SE COMPACT
		TX: 159,2850				
8		RX:		A		
		TX:				
9		RX:		A		
		TX:				
10		RX:		A		
		TX:				
11		RX:		A		
		TX:				
12		RX:		A		
		TX:				
13		RX:		A		
		TX:				
14	PRI A/G	RX: 159.0450		A	Primary Air to Ground	For Aerial Recon
		TX: 159.0450				
15	SEC A/G	RX: 159.0225		A	Secondary Air to Ground	For Water Drop Operations
		TX: 159.0225				
16	AIRGUARD	RX: 168.6250		A	Airguard	Emergency Hailing of Aircraft
		TX: 168.6250	110.9			
Prepared by: Keith Brown-DOF (COML)					NWCG - ICS 205	

MEDICAL PLAN (ICS 206)

1. Incident Name: Quaker Run Fire		2. Operational Period: Date From: 11/07/23 Time From: 0000		Date To: 11/07/23 Time To: 2400			
3. Medical Aid Stations:							
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?				
Madison EMS	970 Quaker Run Rd/ ICP	911/ Command 1	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
			Yes No				
			Yes No				
			Yes No				
Landing Zone	ICP		Yes No				
Landing Zone	Graves Mountain Lodge		Yes No				
4. Transportation (indicate air or ground):							
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service				
Madison EMS-Ground	970 Quaker Run/ ICP	911/Command 1	<input type="checkbox"/> ALS <input type="checkbox"/> BLS				
Pegasus - Air	Charlottesville	911	<input type="checkbox"/> ALS <input type="checkbox"/> BLS				
AirCare 4 - Air	Culpeper	911	<input type="checkbox"/> ALS <input type="checkbox"/> BLS				
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS				
5. Hospitals:							
Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/ Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
UVA Health Culpeper	501 Sunset Ln Culpeper, VA 22701	540-829-4100	10	30	<input type="checkbox"/> Yes Level:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
UVA	1215 Lee St, Charlottesville, VA 22908	434-924-2231	20	60	<input checked="" type="checkbox"/> Yes Level: 1	<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
					<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
6. Special Medical Emergency Procedures:							
EMS ground transportation on location at ICP.							
Contact Operations in the event of a medical or trauma emergency							
Follow Medical Incident Reporting procedures							
Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.							
7. Prepared by (Medical Unit Leader): Name: Kinner Ingram				Signature:			
8. Approved by (Safety Officer): Name: David Powell				Signature:			
ICS 206		IAP Page 9		Date/Time: 11/06/2023 @ 1900			

SAFETY MESSAGE/PLAN (ICS 208)

1. Incident Name:

Quaker Run Fire

2. Incident Number:

VA-VAS-230102

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

Safety message: Base all action on current and expected fire behavior.

Maintain situational awareness at all times. Awareness is a vital component of My Safety. Pay attention to what is happening around your area of operations. Always display an awareness of what is happening around you by asking questions or sharing information.

rules while transporting equipment- even on private property.

STAY VIGILENT**Air Ops**

- Maintain communications with air resources
- Awareness- Type 3 and Type 1 helicopters working fire
- Evaluate environment for aerial hazards
- Stay clear of drop operations

Hydration

Dry weather - drink plenty of fluids - even if you are not thirsty!

Snag Safety

- High probability of continuing falling snags
- Evaluate each snag individually for falling safety
- Rolling rocks

Equipment Safety:

- Ensure equipment is currently serviced.
- Ensure all safety equipment is operational.
- Follow all FMC rules while transporting equipment- even on private property.
- Maintain positive communication with Dozer Boss/Spotter.

Communication:

Ensure instructions are clearly understood. Communication is a basic responsibility for all fire personnel. Ask appropriate questions to clarify uncertain issues. Speak up when you observe hazards that may place you or others at risk.

Ensure appropriate information is concisely relayed through the appropriate chain of command

Traffic Safety

- Follow all vehicle laws
- SLOW DOWN!**
- 5 mph speed limit in and around ICP

UTV

- Follow agency policy at all times
- Utilize extreme caution at all times
- Utilize all safety devices while in motion

4. Site Safety Plan Required? Yes No

Approved Site Safety Plan(s) Located At: ICP

5. Prepared by: Name: David Powell **Position/Title:** Safety Officer **Signature:**

ICS 208

IAP Page 10

Date/Time: 11/06/23 @ 1900

INCIDENT ACTION PLAN SAFETY ANALYSIS (ICS 215A)

1. Incident Name: Quaker Run Fire		2. Incident Number: VA-VAS-230102	
3. Date/Time Prepared: Date: 11/6/23 Time: 1900		4. Operational Period: Date From: 11/07/23 Date To: 11/07/23 Time From: 0000 Time To: 2400	
5. Incident Area	6. Hazards/Risks	7. Mitigations	
All Divisions	Heavy equipment operating	Maintain proper distance Radio/visual communications	
All Divisions	Steep rocky terrain Loose footing Rolling rocks	Deliberate footing Maintain space between crew members Go around area if possible	
All Divisions	Communications	Maintain portable repeater on Doubletop	
Roads	Local traffic	Travel speed limit Use caution when entering roadway Use lights	
All Divisions	Heat	Ensure you are drinking plenty of fluids	
Driving	Congested roads to and from motels	Follow speed limits Defensive driving practices	
All Divisions	Snags	Hazard tree assessment Communicate hazards Mitigate hazards	
8. Prepared by (Safety Officer): David Powell		Signature: _____	
Prepared by (Operations Section Chief): Bill Perry		Signature: _____	
ICS 215A	Date/Time: 11/06/23 @ 1900		

Weather

.DISCUSSION...

Very warm conditions along with gusty westerly winds are expected Tue afternoon with high temperatures in the mid 70s. A weak cold front will pass through the fire location Tue evening causing another wind shift Tue night and winds becoming light and variable. The front will stall along the NC/VA border Wed. Cooler conditions are expected Wed. The front returns north as a warm front Thu with warmer conditions and gusty WSW to W winds developing in the wake of the warm front before a strong cold front crosses the area Thu night bringing another wind shift to the NW and finally some rain.

.TUESDAY...

Sky/weather.....Mostly cloudy (65-75 percent) then becoming mostly sunny (40-50 percent) then becoming partly sunny (50-60 percent).

CWR.....0 percent.

Max temperature.....Around 74.

Min humidity.....37 percent.

Wind (20 ft).....West winds 9 to 15 mph.

Mixing height.....4500 ft AGL.

Transport winds.....Southwest 8 to 16 mph increasing to west 20 to 25 mph in the afternoon, then decreasing to around 15 mph late in the afternoon.

Smoke dispersal.....Poor (400 knot-ft) early in the morning increasing to excellent (99300 knot-ft) in the afternoon.

Eye level winds.....West winds 5 to 9 mph.

TIME (EST)	6 AM	8 AM	10 AM	NOON	2 PM	4 PM
Sky (%).....	85	84	82	59	70	45
Weather cov.....						
Weather type....	NONE	NONE	NONE	NONE	NONE	NONE
Tstm cov.....						
CWR.....	0	0	0	0	0	0
Temp.....	53	56	65	73	74	70
RH.....	66	69	56	44	43	47
20 ft wind.....	SW 12	SW 12	W 15	W 14	W 14	W 12
20 ft wind gust..	14	15	20	20	17	16
Eye level wind..	SW 7	SW 7	W 9	W 8	W 8	W 7
Eye lvl wnd gst..	8	9	12	12	10	10
Mix hgt (ft)....	100	100	900	3500	4500	3200
Transport wind..	SW 8	SW 8	SW 12	W 22	W 25	W 20
Vrate kt-ft/1K..	0	1	9	67	99	54
Ventrte Cat....	POOR	POOR	POOR	GOOD	GOOD	FAIR

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^o – 3^o 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^o – 3^o 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>
Evacuation Request		<i>Air Ambulance / Short Haul/Hoist Ground Ambulance / Other</i>
Patient Location		<i>Descriptive Location & 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. EVACUATION 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 ETAs of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.