INCIDENT ACTION PLAN HIGHWAY INCIDENT

CA-TNF-001295 P5QJ8A (0517)



OPERATIONAL PERIOD

8/23/2023

0700

to

8/30/2023

0700



DAY 0700-1900 / NIGHT SHIFT NOT STAFFED

INCIDENT OBJECTIVES (ICS 202)

HIGHWAY Time From: 0700 Time To: 0700 Objective(s): asaders Intent and Incident Strategy Commit resources only when there is a reasonable expectation of success in protecting life, critical property, and infrastructure. Effectively implement a full suppression and values-driven strategy utilizing a mix of tactics (direct, indirect, and point-protection) when and where the probability of success is high, and risk is commensurate with the identified values. Success is defined as safely achieving objectives with the least firefighter exposure, while committed to service and enhancing elablonships with surrounding communities and host agencies. The safety of incident personnel and the public. Residents within the Community of the Town of Washington. Keep the fire on Forest Agency Lands. Air quality and smoke sensitive areas such as communities, highways, and transportation corridors. Relationships with local, state, county, and the public. Incident Objectives Provide for the safety of incident responders and the public through the application and implementation of sound risk management strategies. Incident values are communicated and protected to the extent possible from adverse fire and incident activities. Effectively manage incident cost through the selection and implementation of strategies and tactics that have a high probability of success in meeting objectives. Coordinate with Fire Management to support any new fire starts to help provide timely, safe, and efficient initial attack. Manage the Highway Fire within the direction of the delegation of authority, leader's intent, and Resource Advisors. Create and maintain a work environment in which people are treated with respect and dignity. Track and record all ground and resource disturbing suppression efforts. Site Safety Plan Required? Yes No 2 Demob Plan County Health Message CS 203 Facility Maps Travel Map County Health Message Fire Behavior Firance Message Fire Behavior Firance Message Fire Behavior Firance Message Fire Beh	1. Incident Name:	2. Operational Period:	Date From:	8/23/2023	Date To:	8/30/2023
					Time To:	0700
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. Approved by Incident Commander: Gabe Herrera, Andy Achter, Bill Bakker (t) Signature:	ICS 208 Fire Behavior	Finance Message	ICS 21	4		
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ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operationa	l Period: Date From:	8/23/2023	Date To:	8/30/2023
HIGHV			Time From:	0700	Time To:	0700
3. Incident Command			7. Operation Secti	on:		
IC/UC's	Gabe Herrera, Andy A	Achter,	Operations			
	2.2		Planning Ops			
Safety Officer			Night Ops			
	Lauren Faulkenber	У	Staging Area		PATRICK CONTRACTOR STREET	
Liaison Officer			Branch			
4. Agency/Organization	on Representatives		Division/Group	HIGHWAY		
Agency/Organization	Nar	ne	Division/Group			
CalTrans	Shelly Pangman	_	Division/Group		-	
SPI	Joe King		Division/Group			#
100			Division/Group			
			Branch	ll l		
,			Division/Group		-	
•			Division/Group			
			Division/Group			
			Division/Group			
			Division/Group			
			Branch	111		
			Division/Group		10000001000	•
			Division/Group			
			Division/Group			
			Division/Group			
			Division/Group			
			Branch	IV		
				IV		
5. Planning Section:			Division/Group			
	l e		Division/Group			
Chief			Division/Group			
Deputy			Division/Group			
Resource Unit			Division/Group			
Situation Unit			Branch	V		
Documentation Unit			Division/Group			
Demobilization Unit			Division/Group			
	Matt House		- Division/Group			
FBAN			- Division/Group			
IMET		(A+C)	Division/Group			
Training Tech Spec			Air Operations Bra		Director:	
		×		Group Supervisor		
				Group Supervisor		
6. Logistics Section			F	lelibase Manager		
	Gary Wright					
Ordering Unit			8. Finance/Adminis	stration Section:		
Base Camp Manager			Chief			
Ground Support Unit	2 2		Time Unit		-	
Communications Unit	2.5 ·	*	Procurement Unit		-	
Medical Unit			Comp/Claims Unit			
			Cost Unit			
					10	
Prepared By: Name:		Position/Title:		Signature:	1/1	ICT3(+)
ICS 203		Date/Time:	8/22/2023	2300 hours		NIMS IAP

ASSIGNMENT LIST (ICS 204 WF) CONTROLLED UNCLASSIFIED

1. Incident Name:				onal Period:			3. Branch	Division
HIGH	- YAWI		Date From	: 08/23/23	Date To:	08/24/23		
			Time From		Time To:	0700		HIGHWAY
4. Operations Person	nnel:		Timo Tion	. 0700	11110 10.	0700	Page 1 of	1
Operations Section Chief:					Night Ops		1. 4.90 1.01	
Branch Director:					Branch Safety			
Division/Group Supervisor:					Air Attack			
5. Resources Assigne	d:		** All Re	esources are	12 Hour **			
Resource Identifier		ALS LWD	Le	eader	Personnel	Request #	Hours	Reporting Location
CRW1 - BEAR DIVIDE	IHC	8/23	ANDERSO	N, BRIAN	22	C-15	0700-1900	WHITE CLOUD
ENG3 - STF - ENGINE	313	8/30			5	E-10	0700-1900	WHITE CLOUD
ENG3 LOS PINOS ENG	SINE 88	8/30	FLINDERS	, HUNTER	3	E-88	0700-1900	WHITE CLOUD
ENG6 ARIZONA FIRE	ENGINE 10	8/30	NIELSEN,	VINCENT E	4	E-28	0700-1900	WHITE CLOUD
ENG3 - CACNF E349		8/31	TINKER, L	UKE	5	E-24	0700-1900	WHITE CLOUD
ENG3 - CANOD E8332		8/30	KRACHE,	KYLE	4	E-47	0700-1900	WHITE CLOUD
WTT2 ROGERS		8/29	HUNN, LA	RRY	1	E-6	0700-1900	WHITE CLOUD
					ļ			-
								*
Control of the Contro								
6. Work Assignments:								
Mop up 100 ft. in from co								
Conduct suppression re	pair as ider	ntified by REA	ADs					
7.0								
7. Special Instructions	:							
								1.0
8. Communications		Notes the same					1346	
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Mode	Notes
Fire Net	2	COMMAND			164.9375	146.2		Tone 5
R5 T4	4	TACTICAL	166.5500	0.0	166.5500	0.0	A	
AG-59	6	A/G	169.1125	0.0	169.1125	0.0	A	
CALCORD	9	TACTICAL	156.0750	(T6) 156.7	156.0750	(T6) 156.7	A	
							202	
9. Prepared by: Name:					RESL			
						Signature:		
ICS 204			Date/Time:	8/22/2023	2200	×=	Pe	rsonnel Count: 44
NIMS IAP								

ASSIGNMENT LIST (ICS 204 WE)

1. Incident Name:					INI LIS	•) + •• •)	INF	ORMATION//BASIC
	IVA/AV			2. Operat	ional Period			3. Branch	Division
HIGH	HWAY			Date Fron		Date To: Time To:	08/30/23 0700	1	HIGHWAY
4. Operations Perso	nnel:					11110 10.	0700	Pogo 1 of	4
Operations Section Chief:						Night Ops		Page 1 of	I
Branch Director:						Branch Safety			
Division/Group Supervisor:						Air Attack			
5. Resources Assigne	d:			** All R	esources are	12 Hour **			
Resource Identifier		ALS	LWD	Le	eader	Personnel	Request #	Hours	Reporting Location
ENG3 - STF - ENGINE			8/30	LEON, EN	ZIO T	5	E-10	0700-1900	WHITE CLOUD
ENG3 LOS PINOS ENG	SINE 88		8/30	FLINDERS	S, HUNTER	3	E-88	0700-1900	WHITE CLOUD
ENG6 ARIZONA FIRE I	ENGINE 10		8/30		VINCENT E	4	E-28	0700-1900	WHITE CLOUD
ENG3 - CACNF E349			8/31	TINKER, L		5	E-24	0700-1900	WHITE CLOUD
ENG3 - CANOD E8332			8/30			4	E-47	0700-1900	
WTT2 ROGERS			8/29			1	E-6	0700-1900	WHITE CLOUD
								0700-1900	WHITE CLOUD
6. Work Assignments:									
Mop up 100 ft. in from co	ntral lines								
Conduct suppression rep		ified by	REAL	Os					
. Special Instructions:									
. Communications									
ame	Ch	Functi	on	Rx Freq	Rx Tone	Ty Free	Ty Tan-	Mari	
ire Net		COMM	_	170.6000	1// 10116	Tx Freq	Tx Tone	Mode	Notes
5 T4		TACTIO		166.5500	0.0	164.9375	146.2		Tone 5
G-59	6	A/G		169.1125	0.0	166.5500	0.0	A	
ALCORD		TACTIO		156.0750	0.0 (T6) 156.7	169.1125 156.0750	0.0 (T6) 156.7	A	
Prepared by: Name:							(1.0) 100.7		
i repared by: Name:					ļ	RESL			
S 204						8	Signature:	***************************************	
S 2U4				Date/Time:	8/23/2023	2200		Pers	onnel Count: 22

Incident Name: HIGHWAY Incident Channels Communications Function Function Forest COMMAND TACTICAL TACTICAL TACTICAL A/G A/G A/G A/G A/G A/G A/G A	and To John's Awy	pared 08/22/2023 1930	3. Operational Date From: 08/22	Operational Period: te From: 08/23/23		-	INFORMATION//BASIC
n Name FS TNF Fire Net NIFC T2 R5 T4 AG-59 R5 PROG	e: 0 e: 11 signed To 21V AW 21	ared 8/22/2023 930	J m >	onal Period: 08/23/23			
nt Channels n Name FS TNF Fire Net NIFC T2 R5 T4 AG-14 AG-59 R5 PROG	Johns Johns Johns Johns	8/22/2023	Date From: Time From:				
n Name FS TNF Fire Net NIFC T2 R5 T4 AG-59 AG-59 R5 PROG	DIVS DIVS	930	Time From:		Date To:		08/30/23
FS TNF Fire Net NIFC T2 R5 T4 AG-59 R5 PROG	signed To LL DIVS NV A/W			0090	Time To:		010000000000000000000000000000000000000
Function Name FOREST FS TNF COMMAND Fire Net TACTICAL NIFC T2 TACTICAL R5 T4 A/G AG-14 A/G AG-59 PROJECT R5 PROG	signed To LL DIVS NV AW				- III		0000
FOREST FS TNF COMMAND Fire Net TACTICAL NIFC T2 TACTICAL R5 T4 A/G AG-59 PROJECT R5 PROG	LL DIVS	0.5	1				_
COMMAND Fire Net TACTICAL NIFC T2 TACTICAL R5 T4 A/G AG-14 A/G AG-59 A/G PROJECT R5 PROG	LL DIVS	170 6000	Kx Ione	Tx Freq	Tx Tone	Mode	Notes
TACTICAL NIFC T2 TACTICAL R5 T4 A/G AG-14 PROJECT R5 PROG	JIV AVW	0000001	0.0	164.9375	OST	٧	For I/A use
TACTICAL	JIV AVW	1/0.6000		164.9375	146.2		Tone 5
A/G AG-14 A/G AG-59 AG-59 PROJECT R5 PROG	DIV AW	168.2000	0.0	168.2000	0.0	⋖	For I/A use
A/G AG-14 A/G AG-59 PROJECT R5 PROG	T DIVS	166.5500	0.0	166.5500	0.0	A	
A/G AG-59 PROJECT R5 PROG	T DIVS	167.5000	0.0	167.5000	0.0	A	For I/A 1160
PROJECT		169.1125	0.0	169.1125	0.0	₹ 4	Don Caro
		168.6625		168.6625			
8 DISPATCH NEV CO		153.9650	(T9) 100.0	156.3300	TSO	<	DO TOT USE
9 TACTICAL CALCORD ALL	ALL DIVS	+	(T6) 156 7	156 0750	- C - C - C - C - C - C - C - C - C - C	∢	For I/A use
10 TACTICAL VFIRE 22		+		00000	(10) 136.7	A	
11 TACTICAL VFIRE 23		000	7.001 (01)	154.2650	(T6) 156.7	A	For I/A use
		0087	(16) 156.7	154.2950	(T6) 156.7	4	For I/A use
TACTOAT			(T3) 131.8	159.3600	OST	∢	For I/A use
+	•	151.3850	(T16) 192.8	151.3850	(T16) 192.8	4	For I/A use
14 TACTICAL CDF T5		151.2500 ((T16) 192.8	151.2500	(T16) 192 8		טפס כיייי אייייי אייייי אייייי אייייי אייייי איייייי
15 A/G CDF A/G 3		159.3675	(T16) 192.8	150 3675	(T46) 400 0		Tor I'A use
16 DISPATCH NEU EAST		+	(T2) 424 0	0.00.00.	(110) 192.8		For I/A use
12			0.101.0	159.4950	OST	4	For I/A use
18							
19							
20							
5. Special Instructions							
This is a test							
6. Prepared by (Communications Unit Leader): Name:			S	Signature:			
ICS 205 - CONTROLLED UNCLASSIFIED INFORMATION//BASIC	ION//BASIC		Da		08/22/2002		

MEDICAL PLAN (ICS 206)

1. Incident Name:			2. Operational Per	iod:	Date From:	8/23/23	Date To:	8/30/23	
HI	GHWAY					Time From:	0700	Time To:	0700
3. Medical Aid Stations:									
Name				Location		Contact Nur	nber/Freq	Parar	nedics
Western Sierra Medical Clinic		844 Old Tun 95945	nel R	d, Grass Valley, CA		1-530-274-9	762		No
A Transportation (In II at								L	
4. Transportation (indicate a									
Ambulance Serv		1077011		Location		Contact N		-	Service
Calstar Air Ambulance (Aubur				y, Auburn 95603		1-530-887-82			LS
Sierra Nevada Ground Ambul				Grass Valley 95945	5	1-530-273-14		-	LS
Bi County Ground Ambulance				Yuba City 95993	-	1-530-674-27			LS
Reach Air Ambulance (Oliveh	urst)	1400 Sky Ha	ırbor l	Dr., Oliverhurst 9596	hurst 95961 1-916-208-1610		310	A	LS
5. Hospitals:				•					
•	Addı	ess,	C	ontact Number(s)/	Т	ravel Time	Trauma	Burn	
Hospital Name	Lat & Lon	0 1		Frequency	Ai	r Ground	Center	Center	Helipad
Sierra Nevada Memorial Hospital	155 Glasson Wa CA 95945 Lat/Lo -121.0469			0-274-6000	6 min	s 60-90 mins	Level 4		V ',
Sutter Rosevilla Medical Center	1 Medical Plaza CA 95661 Lat/Lo		1-91	6-781-18 <mark>0</mark> 0	20 mi	ns 60 mins	Level 2	~	
U.C. Davis Burn Center	2315 Stockton E Sacramento, CA 38.5549, -121.4	A Lat/Long: 1-		6-734-3636	27 mi	ns 90 mins	Level 1	V	~
					-				
								H	
6. Special Medical Emergen	v Procedures								
In the event of a medical emergenc information to the Communication	y provide the follo	wing Communication	Inju	ry Reporting Proce	dures			***************************************	e
Center: 1. Delcare the nature of the emgen a. Medical injury/illness? b. Is injury/illness life threatenin 2. If life threatening, then request t	g?	frequency be	Nature of Injury: Location of Patient: Point of Contact: Transportation Requested by: Air Ground Point of Pick-Up:						
cleared for emergency traffic.			Lat: Long:						
Identify the on-scene Point of Coname (i.e. POC is TFLD Smith)	ontact (POC) by res	source and last	Patient Unit ID: Is an EMT with Patient: Yes No						
4. identify nature of incident, numb and location (geographic and GPS		assessment(s)	Age	: Sex: Ma	ale	Fema			
5. Identify on-scene medical person EMT Jones)	nnel by position ar	ndname (i.e.	wit	Emergencies - Sec tnesses for later inv events.				og	
6. Identify preferred method of pati	ent transport.		18384						
7. Request any additional resource	s and/or equipmer	nt needed.							
Document all information receive phone.	ed and transmitted	on the radio or							
9. Identify any changes in the on-sepersonnel as they occur.	cene Point of Cont	act or medical							
Check box if aviation ass	sets are utilized	for rescue. If a	asset	s are used, coordina	ite with	n Air Operatio	ns.		
7. Prepared by (Medical Unit	Leader):				Signa	ature:			
8. Approved by (Safety Office	,	s Lambert		F-		nture:		R	1
ICS 206	NIMS IAP			Date/Time			//	1	
	mino IAF				- (

SAFETY MESSAGE/PLAN (ICS 208)

1. Incident Name:	2. Operational Period:	Date From:	8/23/23	Date To:	8/30/23
HIGHWAY		Time From:	0700	Time To:	0700

<u>Driving: Steep, narrow, dusty roads throughout fire area. Maintain safe following distances and appropriate speed when traversing roads. Drive with headlights on at all times. Obey traffic patterns on highway 20 through road construction areas. Anticipate delays.</u>

Working on steep, uneven terrain. Be mindful of rolling materials and crews that may be working downhill. If you see it or hear it, communicate it.

Hazardous Trees and Snags: Be alert of snags due to tree mortality and drought. Crews are working in a very hazardous area with numerous dead trees, stay diligent and flag hazardous areas. Avoid taking breaks under trees.

Maintain situational awareness. Look up, Look down, Look around

Stay hydrated!!! Time to think = time to drink. Document rest and hydration on 214.

Remain mindful of what is going on around you! LCES!

Thunderstorms are predicted in the forecast. Be prepared to take appropriate actions.

Stay informed of changing weather conditions. Review IRPG Thunderstorm Safety pg. 17

Situational Awareness:

Identify, process, and comprehend the critical elements of information about what is happening to the team with regards to the mission. More simply, know what is going on around you.

SNAG (Hazard Tree) SAFETY:

Size up snag hazards in work area

Never become complacent

Always look up

Get weather reports

Scout out parking, work areas, and safety zones

Advise co-workers of known hazards

Face your hazards and take appropriate action

Examine work area for other hazards

Take extra caution around heavy equipment

You are responsible for your own safety

Review your ICS 206 and know what to do in the event of a medical emergency.

	Lookouts, Communication, Escape routes, Safety zones	
4. Site Safety Plan Required?	□ No	,
Approved Site Safety Plan	s) Located At:	
5. Prepared By: Lucas Lambert	Position/Title: SOFR	1 11
ICS 208	Date/Time: 8/22/2023 / 2030 Signature:	my

INCIDENT ACTION PLAN SAFETY ANALYSIS (ICS 215A)

1. Incident Name:	2. Operational Period:	Date From:	8/23/23	Date To:	8/30/23
HIGHWAY		Time From:	0700	Time To:	0700
Incident Area	Hazard/Risks		Mitigations		ST. SERVERS ST. ST. SERVES ST. ST. ST. ST. ST. ST. ST. ST. ST. ST
ALL	FATIGUE		necessary. Drink water be	gns of fatigue and efore, during and a gns of heat disord	after your shift.
ALL	DRIVING HAZARDS		every turn. SL Drive with hea always look be	dlights on, use wh	neel chocks and
				familiar with weat anditions on the g	
ALL	WEATHER	•			
ALL	DEHYDRATION			fore, during, and ave water availab	
ALL	ANIMAL ATTACK		aggressive ani	from animals and mals. Be mindful elop into infection	of any injuries
ALL	ROLLING MATERIAL		Communicate you. Be aware	ork locations of cr with individuals th of loose rock and tuational awarene	at may below rolling materia
ALL	HAZARD TREES		overhead haza do so. Flag the	ards. Mitigate the less hazard and come chain of comma	nazard if safe to municate the
Ca.		**			
÷					1
. Prepared By: Lucas Lamb	ert Position/Title	e: SOF	0:	1	
CS 215A	Date/Time: 8/22/20	023 / 2030	Signature:	med	

HIGHWAY FIRE FINANCE

CA-TNF-000998 P5QJ8A (0517)

Please send your Finance documents and/or questions to the following:

Email: 2023.highway.finance@firenet.gov

Use the following **keywords** in the **subject line** of your email so they get routed to the proper location:

Personnel Time (Agency Overhead, Agency Crews/Engines, AD's, Cooperators)

<u>Subject Line of email should include any of the following options:</u>

• CTR, Crew Time Report, Time, Overhead

Contract Equip/Crews (VIPR, National Contract Crews, etc)

<u>Subject Line of email should include any of the following options:</u>

• Shift Ticket, Equipment, Contractor

Write legibly and be sure to add your Request# in the right-hand corner of your shift ticket.

Please make sure your CTR's and Shift Tickets are signed by a government official

Finance Phone #: (541) 554-9789 (DO NOT Send any finance documents via text)

PLEASE ENSURE THE BELOW DOCUMENTS ARE EMAILED TO FINANCE:

Agency	Overhead:	Contract Equipment/Contract	Cooperator:
Equipment/Crews:	Resource '	Crews:	 Cooperative
 Manifest 	Order	 Agreement/Manifest 	Agreement
Resource Order	AD Hire Form	Resource Order	Resource Order
• CTR's	(If an AD)	 Shift Ticket 	 Shift Ticket
	• CTR's	 Inspection Forms 	 Inspection Forms

HIGHWAY INCIDENT

CA-TNF-001295

DEMOBILIZATION CHECK-OUT PROCESS

This incident is using a virtual checkout process for demobilization. Please do not leave the incident until the follow steps have been completed!

- 1. **24 hours prior** to demobilization date, please ensure that:
 - Your incident supervisor has submitted a Demob Request in coordination with the Demob unit.
 - If you need a flight arranged for you, please submit a Flight Request Form.



Demob Request Form

- 2. On your demob date, please check out with the following units.
 - Supply Unit Return gear and supplies.
 - Ground Support/Weed Wash Return pool NERV rentals, receive inspections, etc.
 - Communications Unit Return Radios and other communications equipment.
 - Time/Finance Ensure that all CTRs and/or shift tickets have been submitted and you have received your final, signed OF-288 Time Report or OF-286 invoice.



Flight Request Form

- Once you have completed the above steps, please fill out the Demob
 Checkout Form and contact the Demob Unit Leader to confirm your release
 from the incident. PLEASE DO NOT FILL OUT THE DEMOB RELEASE FORM
 UNTIL ALL PRIOR STEPS BEEN COMPLETED!
- Demob Unit Leader: (480) 420-7735, 2023.highway.demob@firenet.gov



Demob Checkout Form



Updated Phone Number

	UNIT	LC	G (IC	S 214)				90
1. Incident Name:	-			rational Period:	Date From:	8/23/23	Date To:	8/30/23
HIGHWAY					Time From:	0600	Time To:	0600
3. Unit Name/Designators				4. Unit Leader (Name and ICS	S Position)	
5. Personnel Assigned/Designators								
NAME			ICS	POSITION		HOME	BASE	
								•
					-			
					 			
								7
6. Activity Log (Continue on Reverse)								
TIME				MAJOR E\	/FNTS			
				WAGAL	LIVIO			
								•

		29						
7. Prepared By:				Date/Time:				NIMS IAP

1. Incident Name:	UNIT LOG CONT. (ICS 214)				
HIGHWAY	2. Operational Period:	Date From:	8/23/23	Date To:	8/30/23
6. Activity Log		Time From:	0600	Time To:	0600
TIME	MA IOD 5	/=:			
	MAJOR EV	/ENTS			
					1
					-
					•
			-		
epared By:	Date/Time:				