

# INCIDENT ACTION PLAN DISTRICT INCIDENT

CA-KRN-031430

Sunday & Monday



**\*2-Day IAP\***

**OPERATIONAL PERIOD**

**07/09/23      0700**

**to**

**07/11/23      0700**



# INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b> <p style="text-align: center;"><b>DISTRICT</b></p>	<b>2. Operational Period:</b>	Date From: 7/9/2023 Time From: 0700	Date To: 7/11/2023 Time To: 0700
--	-------------------------------	--	-------------------------------------

**3. Objective(s):**

**Management Objectives**

- Provide for emergency personnel and public safety at all times.
- Protect property, improvements, and infrastructure.
- Ensure coordinated, timely and accurate release of public information.
- Foster and maintain relationships with all cooperators and stakeholders.
- Protect economic, natural, cultural and heritage resources.
- Maintain fiscal accountability and keep costs commensurate with values at risk.

**Control Objectives**

Keep the fire:

- West of Short Canyon
- North of Tejon Ranch HQ
- East of Interstate 5
- South of Grapevine repeater

**5. Site Safety Plan Required?**      Yes  No

**Approved Site Safety Plan(s) Located at:**

**6. Incident Action Plan**

<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 215A	<input type="checkbox"/> Phone List	<input type="checkbox"/> Fire Suppression Repair Plan
<input checked="" type="checkbox"/> ICS 204	<input checked="" type="checkbox"/> ICS 220	<input type="checkbox"/> Training Message	<input type="checkbox"/> Perimeter Map
<input checked="" type="checkbox"/> ICS 205	<input type="checkbox"/> Incident Map	<input type="checkbox"/> Travel Map	<input type="checkbox"/>
<input checked="" type="checkbox"/> ICS 206	<input checked="" type="checkbox"/> Weather Forecast	<input type="checkbox"/> Demob Plan	<input type="checkbox"/>
<input checked="" type="checkbox"/> ICS 208	<input type="checkbox"/> Fire Behavior	<input type="checkbox"/> Finance Message	<input checked="" type="checkbox"/> ICS 214

<b>7. Prepared By:</b> Jason Schillinger	Position/Title: PSC	Signature: _____
<b>8. Approved by Incident Commander:</b>	Joe Appleton	Signature: _____



<b>1. Incident Name:</b> <b>DISTRICT</b>	<b>2. Operational Period:</b> Date From: <u>7/9/23</u> Date To: <u>7/11/23</u> Time From: <u>0700</u> Time To: <u>0700</u>	
---	---	--

.DISCUSSION...Temperatures will remain slightly cooler than normal through Monday. A warming trend will start on Tuesday and daytime temperatures will increase each day through next weekend. Moderate northwesterly winds will gust up to 15 to 20 mph during the afternoons and become light during the night. Dry conditions will prevail through at least the end of next week.

.SUNDAY...

Sky/weather.....Sunny.  
Max temperature.....75-79.  
Min humidity.....25-29 percent.  
Eye level winds....Northwest 4-9 mph with gusts of 12-16 mph after 1000 PDT.  
Surrounding ridge...Northwest 7-14 mph.  
Mixing height.....Rising to around 5500 ft AGL.  
Transport winds....Northwest around 10 mph.  
Wind (20 ft).....Northwest 5-10 mph with gusts up to 15-20 mph after 1000 PDT.  
.SUNDAY NIGHT...

Sky/weather.....Clear.  
Min temperature.....53-56.  
Max humidity.....58-62 percent.  
Eye level winds....Northwest 5-10 mph becoming north 3-6 mph after 1900 PDT.  
Surrounding ridge...Northwest 6-12 mph.  
Mixing height.....Lowering below 500 ft AGL.  
Transport winds....Northwest around 9 mph.  
Wind (20 ft).....Northwest 5 to 10 mph.

.MONDAY...

Sky/weather.....Sunny.  
Max temperature.....76-80.  
Min humidity.....26-30 percent.  
Eye level winds....Northwest 4-9 mph with gusts of 12-16 mph after 1000 PDT.  
Surrounding ridge...Northwest 7-14 mph.  
Mixing height.....Rising to around 6000 ft AGL.  
Transport winds....North around 9 mph.  
Wind (20 ft).....Northwest 5-10 mph with gusts up to 15-20 mph after 1000 PDT.







<b>1. Incident Name:</b> <b>DISTRICT</b> <b>Incident Channels</b>			<b>2. Date/Time Prepared</b> Date: 07/08/2023 Time: 2330		<b>3. Operational Period:</b> Date From: 07/09/23      Date To: 07/11/23 Time From: 0700          Time To: 0700			
<b>4. Communications</b>								
Ch#	Function	Name	Assigned To	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
1	COMMAND	KRN 2	ALL DIVS	155.8800	T-7, 167.9	158.9400	T-3, 131.8	DISTRICT FIRE COMMAND
2	DISPATCH	KRN 1	DISPATCH	153.7850	T-7, 167.9	158.8950	T-7, 167.9	KRN DISPATCH
3	I/A COMMAND	KRN 3	I/A ONLY	155.6250	T-7, 167.9	158.8500	T-7, 167.9	KRN COMMAND 3
4	I/A COMMAND	KRN 4	I/A ONLY	154.8600	T-7, 167.9	158.8200	T-7, 167.9	KRN COMMAND 4
5	TACTICAL	VFIRE 24	B	154.2725	T-6, 156.7	154.2725	T-6, 156.7	
6	TACTICAL	VFIRE 25	M	154.2875	T-6, 156.7	154.2875	T-6, 156.7	
7	TACTICAL	VTAC 11	Y	151.1375	T-6, 156.7	151.1375	T-6, 156.7	
8	TACTICAL	VFIRE 23	I/A ONLY	154.2950	T-6, 156.7	154.2950	T-6, 156.7	I/A TACTICAL
9		OPEN		0.0000		0.0000		
10		OPEN		0.0000		0.0000		
11		OPEN		0.0000		0.0000		
12		OPEN		0.0000		0.0000		
13	AIR TO GROUND	KRN A/G	I/A ONLY	154.8900	T-7, 167.9	154.8900	T-7, 167.9	KRN AIR to GROUND
14	AIR TO GROUND	CDF A/G8	ALL DIVS	159.3450	T-16, 192.8	159.3450	T-16, 192.8	DISTRICT FIRE AIR to GROUND
15	MEDICAL	CALCORD	ALL DIVS	156.0750	T-6, 156.7	156.0750	T-6, 156.7	MEDIVAC COORDINATION
16	AIRGAURD	AIRGUARD	ALL DIVS	168.6250		168.6250	T-1, 110.9	EMERGENCY
17		OPEN		0.0000		0.0000		
18		OPEN		0.0000		0.0000		
19	MEDICAL	CALCORD	ALL DIVS	156.0750		156.0750	T-6, 156.7	MEDIVAC COORDINATION
20	AIRGAURD	AIRGUARD	ALL DIVS	168.6250		168.6250	T-1, 110.9	EMERGENCY
<b>5. Special Instructions</b>								
<b>6. Prepared by (Communications Unit Leader): Name: CHRIS OLIVER COML(t)</b>						Signature: _____		
<b>ICS 205 - CONTROLLED UNCLASSIFIED INFORMATION//BASIC</b>						Date/Time: 07/08/23 2330		



## MEDICAL PLAN (ICS 206)

<b>1. Incident Name:</b>  <div style="text-align: center; font-weight: bold;">DISTRICT</div>	<b>2. Operational Period:</b> Date From: <u>7/9/23</u> Date To: <u>7/11/23</u> Time From: <u>0600</u> Time To: <u>0600</u>
--	---

3. Medical Aid Stations:			
Name	Location	Contact Number/Freq	Paramedics

4. Transportation (indicate air or ground):			
Ambulance Service	Location	Contact Number	Level of Service
Hall Ambulance	Bakersfield	911	ALS
Mercy Air 14	Ridgecrest	911	ALS
Mercy Air 15	Bakersfield	911	ALS

5. Hospitals:							
Hospital Name	Address,	Contact Number(s)/ Frequency	Travel Time		Trauma Center	Burn Center	Helipad
	Lat & Long		Air	Ground			
Kern Medical	1700 Mount Vernon, Bakersfield		15	40	Level 2	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Bakersfield Memorial	420 34th St, Bakersfield		15	40		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

6. Special Medical Emergency Procedures	
<p><b>Line Emergency</b> Crew Supervisor will contact Division Supervisor with patient complaint/condition and location.</p> <p>- Division Group Supervisor Contacts:</p> <ol style="list-style-type: none"> <li>1. Closest EMS resource</li> <li>2. Communications Unit</li> </ol> <p>- Communications Unit Contacts:</p> <ol style="list-style-type: none"> <li>1. Ground or Air ambulance as requested.</li> <li>2. Operations</li> <li>3. Safety</li> <li>4. Medical Unit</li> </ol> <p>- Division Supervisor or designee will serve as point of contact and run medical emergency on assigned channel.</p> <ol style="list-style-type: none"> <li>1. A pre-assigned tactical frequency (i.e. CALCORD) should be used for IWI and only for duration of the emergency.</li> </ol> <p>- Communications Unit will clear the Command channel for emergency traffic as needed for duration of the need.</p> <p><b>Camp Emergency</b> Contact Medical Unit with patient complaint/condition and location. Medical staff will respond to stabilize the patient.</p> <p>- Medical Unit contacts</p> <ol style="list-style-type: none"> <li>1. Communications</li> <li>2. Safety</li> <li>3. Logistics</li> <li>4. Operations</li> <li>5. Crew Supervisor</li> <li>6. Comp/Claims</li> </ol>	<p><b>Injury Reporting Procedures</b></p> <p><b>Nature of Injury:</b> _____</p> <p><b>Location of Patient:</b> _____</p> <p><b>Point of Contact:</b> _____</p> <p><b>Transportation Requested by:</b> Air ___ Ground ___</p> <p><b>Point of Pick-Up:</b> _____</p> <p style="padding-left: 40px;"><b>Lat:</b> _____ <b>Long:</b> _____</p> <p><b>Patient Unit ID:</b> _____</p> <p><b>Is an EMT with Patient:</b> Yes ___ No ___</p> <p><b>Age:</b> _____ <b>Sex:</b> Male ___ Female ___</p> <p><b>All Emergencies - Secure the area and identified witnesses for later investigation. Keep accurate log of events.</b></p>

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>	<b>Signature:</b> _____
--	-------------------------

<b>8. Approved by (Safety Officer):</b>	<b>Signature:</b> _____
---	-------------------------

<b>ICS 206</b>	NIMS IAP	Date/Time: _____
----------------	----------	------------------

1. Incident Name: DISTRICT	2. Operational Period:	Date From: 7/9/23	Date To: 7/11/23
		Time From: 0600	Time To: 0700

***Working on steep, uneven terrain. Be mindful of rolling materials.***

***Ensure radios are properly programmed for today's IAP and that crews are trained in communications procedures for the incident.***

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

***Be prepared for very hot and humid weather!***

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

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

***Be alert to Rattlesnakes in the area!***

***Avoid complacency!!!! Experiencing extreme fire behavior due to low live and dead fuel moistures, and elevated fire danger rating values.***

4. Site Safety Plan Required?  No

Approved Site Safety Plan(s) Located At:

5. Prepared By:

Position/Title: SOFR

Signature: \_\_\_\_\_

ICS 208

Date/Time: 7/8/2023 / 2030





