



GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES  
**Cal OES**

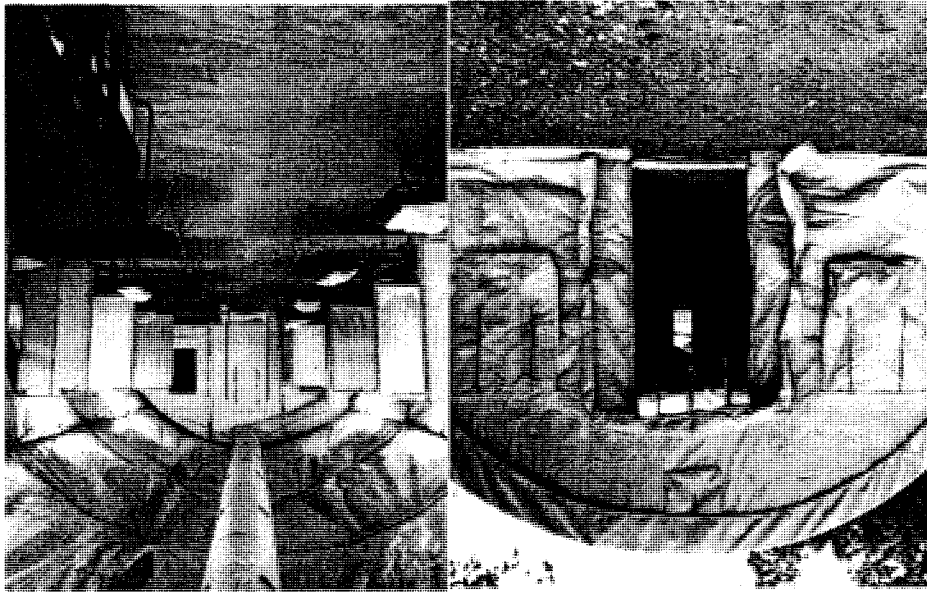


Please do not distribute outside participating agencies

FOR INTERNAL USE ONLY



Markell Pierce  
EMSA Departmental Operations



IAP #3  
Operational Period  
0700 PST 11-24-18 to 1900 PST 11-24-18

10161 Croydon Rd  
Sacramento, CA 95827

EMSA Department Operation Center

# INCIDENT ACTION PLAN



# INCIDENT BRIEFING (ICS 201)

<b>1. Incident Name:</b> 2018 November Wildfires	<b>2. Incident Number:</b> FEMA-4407-DR	<b>3. Date/Time Initiated:</b> Date: 11/24/18    Time: 1900
<b>4. Map/Sketch</b> (include sketch, showing the total area of operations, the incident site/area, impacted and threatened areas, overflight results, trajectories, impacted shorelines, or other graphics depicting situational status and resource assignment): <div style="text-align: center;"> </div>		
<b>5. Situation Summary and Health and Safety Briefing</b> (for briefings or transfer of command): Recognize potential incident Health and Safety Hazards and develop necessary measures (remove hazard, provide personal protective equipment, warn people of the hazard) to protect responders from those hazards. <ul style="list-style-type: none"> <li>• Current Weather:                      63°F                      Humidity 52%                      Wind Speed WNW 6 MPH                      Barometer 30.02 in                      Dewpoint CF (7°C)                      Visibility 25.00 mi                      Last update 24 Nov 3:54 pm PST</li> <li>• Showers expected after 10:00 PM on 11/26/18</li> </ul>		
<b>6. Prepared by:</b> Name: Kim Lew    Position/Title: Planning Section Chief    Signature: <i>Kim Lew</i>		
Date/Time: 11/24/18 1915 hrs		

- Safety is the responsibility of every individual assigned to the Mission
- It is the primary importance and should be a primary consideration throughout all aspects of the operation on or off duty
- Safety in a less controlled environment requires added discipline and consistency
- All injuries shall be reported to the Safety Officer either directly or through the Chain of Command
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- Be aware of placement and stacking items

#### Specific Concerns or Potential Hazards

- Driving in and around the area will be SLOW at all times
- Follow all speed limits
- Always use a spotter when backing ambulances, trucks, and delivery vehicles
- Evaluate surface conditions and drive with the awareness that there are many people working and walking around the area
- Always look and communicate with loaders/off loaders, etc. before moving vehicles

#### Driving and Transportation

- Supervisors need to highlight 'area specific' hazard areas in briefings
- Supervisors need to adjust/control operations to limit potential injuries
- Monitor your personnel
  - Ensure availability to hydrate
  - Rotate personnel as appropriate
- HYDRATE – Before, During, and After – Don't wait until you're thirsty!
- Know your objectives and Plan of Action – or Ask
- Maintain the Chain of Command
- Look out for each other – Awareness
- Use proper lifting and carrying techniques
- Work at a steady pace – No need to rush
- Wear medical or work gloves, goggles, and other safety gear where appropriate
- Ensure practical good housekeeping and cleanliness/use hand sanitizer

#### General Work and Working with Equipment

- Cold – stay warm
- Isolated flooding

#### Weather/Environment

## **MST – SAFETY MESSAGE**

Incident: 2018 November Wildfires

Date: November 24, 2018

**INCIDENT BRIEFING (ICS 201)**

<p><b>1. Incident Name:</b> 2018 November Wildfires</p>	<p><b>2. Incident Number:</b> FEMA-4407-DR</p>	<p><b>3. Date/Time Initiated:</b> Date: 11/24/18 Time: 1900</p>
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- 7. Current and Planned Objectives:**
- Continue to identify additional CAL-MAT members to support the incident and remain on backfill status.
  - Continue to coordinate travel arrangements and hotel reservations for members.
  - Continue to coordinate transportation for CAL-MAT members.
  - Update Situation Report daily.
  - Update Incident Action Plan.
  - Continue Joint Unified Command Workgroup Task meetings.
  - Continue to plan for possible events and assets needed for the next 24-36 hours.

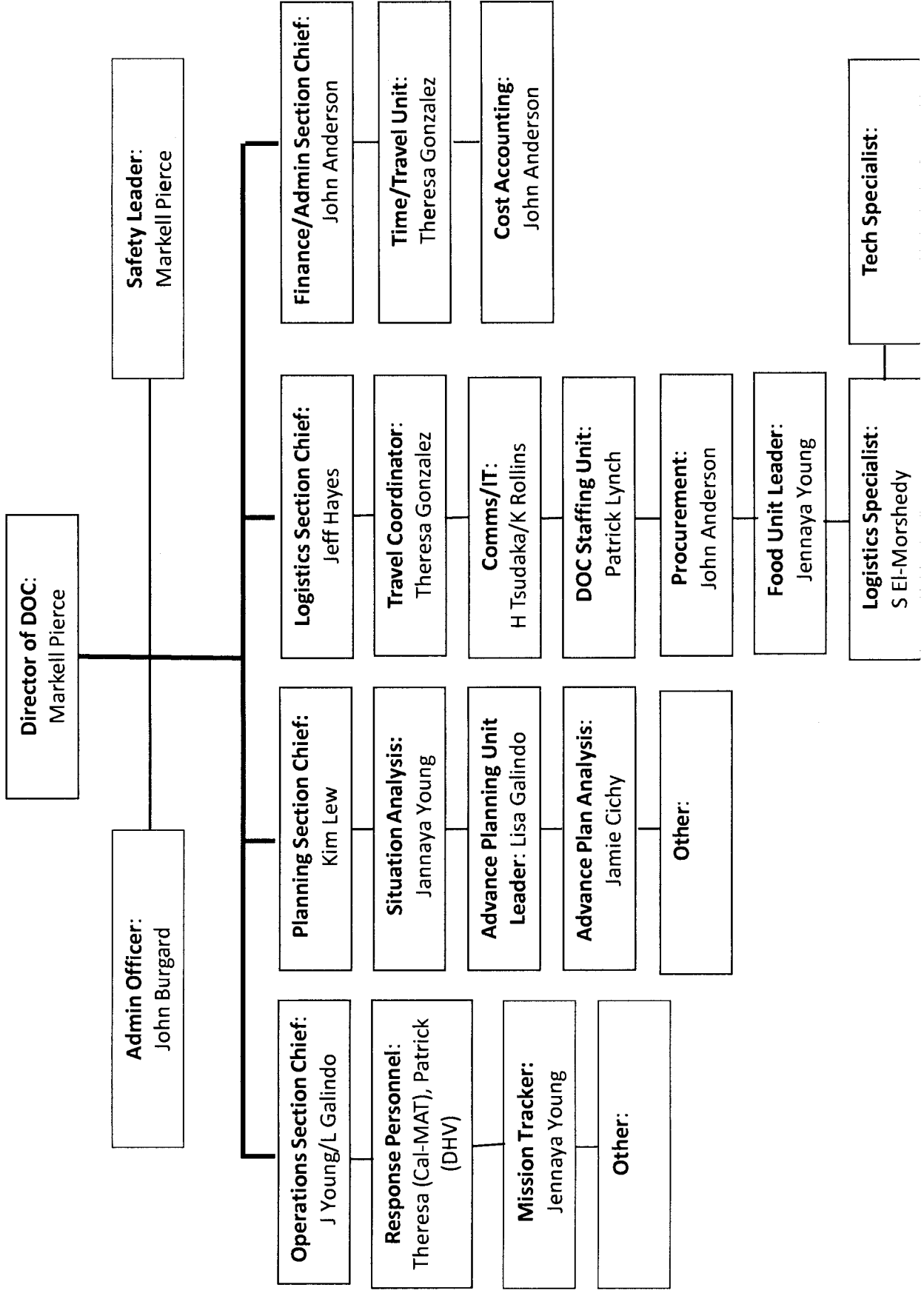
**8. Current and Planned Actions, Strategies, and Tactics:**

Time:	Actions:
On-going	Update list of CAL-MAT medical personnel on standby.
On-going	Send out administrative and medical supplies from EMSA DOC to Base of Operations.
On-going	Make travel/transportation arrangements for ill CAL-MAT staff.
On-going	Transport CAL-MAT for mobilization and demobilization.


<p>6. Prepared by: Name: Kim Lew</p>	<p>Position/Title: Planning Section Chief</p>	<p>Signature: <i>Kim Lew</i></p>
<p>ICS 201, Page 3</p>	<p>Date/Time: 11/24/18 1915hrs</p>	

# DOC Org Chart

Date: 11/24/2018



INCIDENT BRIEFING (ICS 201)

1. Incident Name: 2018 November Wildfires

2. Incident Number: FEMA-4407-DR

3. Date/Time Initiated: Date: 11/24/18 Time: 1900

10. Resource Summary:

Resource	Resource Identifier	Date/Time Ordered	ETA	Arrived	Notes (location/assignment/status)
Administrative Supplies (T-cards)		11/24/18		<input type="checkbox"/>	In route from EMSA DOC to Boo
Medical Supplies (Thermometers, probe covers, glucose meters, ID bracelets)		11/24/18		<input type="checkbox"/>	In route from EMSA DOC to Boo
Automotive Supplies (Hitch locks)		11/24/18		<input type="checkbox"/>	In route from EMSA DOC to Boo
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
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				<input type="checkbox"/>	

6. Prepared by: Name: Kim Lew

Position/Title: Planning Section Chief Signature: *Kim Lew*

# INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b> 2018 November Wildfires	<b>2. Operational Period:</b> Date From: 11/24/18 Time From: 0700 Date To: 11/24/18 Time To: 1900															
<b>2. Objective(s):</b> <ul style="list-style-type: none"> <li>• Ensure all actions are prioritized for responders and public safety.</li> <li>• Coordinate the strategies and development of individual incident objectives of CAL-MAT Isolation shelter sites within the scope of this unified command team.</li> <li>• Establish area priorities and assign appropriate resources to incidents based on those priorities.</li> <li>• Ensure continuity of operations of CAL-MAT ISO sites by establishing single point ordering for disposable and durable supplies.</li> <li>• Ensure accurate tracking of assigned resources.</li> <li>• Identify operational period that Health Medical Task Force will operate under.</li> <li>• Ensure all treatment sites provide for the health and safety of public and responders.</li> <li>• Establish communications / liaison with local, operational, and regional area.</li> <li>• Develop operational plan based on identified needs.</li> </ul>																
<b>4. Operational Period Command Emphasis:</b> <ul style="list-style-type: none"> <li>• Identify unmet needs and solutions for access and functional needs for populations.</li> <li>• Support missing person and victim identification.</li> <li>• Coordinate information sharing between agencies.</li> <li>• Establish a recovery framework for Local Assistance Centers and recovery task forces.</li> </ul>																
<b>General Situational Awareness</b> <ul style="list-style-type: none"> <li>• Be aware of potential security risk at all medical tent locations.</li> <li>• Be aware of potential flooding risks at all medical tent locations.</li> <li>• Support missing person and victim identification.</li> </ul>																
<b>5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></b> <b>Approved Site Safety Plan(s) Located at:</b>																
<b>6. Incident Action Plan (the items checked below are included in this Incident Action Plan):</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><input checked="" type="checkbox"/> ICS 202</td> <td style="width: 15%;"><input checked="" type="checkbox"/> ICS 206</td> <td style="width: 15%;"><input type="checkbox"/> Other Attachments:</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 203</td> <td><input checked="" type="checkbox"/> ICS 207</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 204</td> <td><input checked="" type="checkbox"/> ICS 208</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205</td> <td><input checked="" type="checkbox"/> Map/Chart</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205A</td> <td><input checked="" type="checkbox"/> Weather Forecast/Tides/Currents</td> <td></td> </tr> </table>		<input checked="" type="checkbox"/> ICS 202	<input checked="" type="checkbox"/> ICS 206	<input type="checkbox"/> Other Attachments:	<input checked="" type="checkbox"/> ICS 203	<input checked="" 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	
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<b>7. Prepared by:</b> Name: Kim Lew Position/Title: Planning Section Chief Signature: _____																
<b>8. Approved by Incident Commander:</b> Name: Markell Pierce Signature: _____ Date/Time: 11/24/2018																

**ORGANIZATION ASSIGNMENT LIST (ICS 203)**

<p><b>1. Incident Name:</b> 2018 November Wildfires</p>	<p><b>2. Operational Period:</b> Date From: 11/24/18      Time From: 0700 Date To: 11/24/18      Time To: 1900</p>	
<p align="center"><b>3. Incident Commander(s) and Command Staff:</b></p>		
<p>IC/UCs     Markell Pierce Chief     Jennaya Young     Lisa Galindo</p>	<p>John Burgard Deputy</p>	<p>Markell Pierce Safety Officer</p>
<p>Jennifer Lim Public Info. Officer</p>	<p>Branch Director DHV</p>	<p>Kevin Sheehan Liaison Officer</p>
<p align="center"><b>4. Agency/Organization Representatives:</b></p>		
<p>Agency/Organization     Name</p>	<p>Division/Group</p>	<p>CAL-MAT     Theresa Gonzales</p>
<p>Division/Group</p>	<p>Division/Group</p>	<p>Division/Group</p>
<p>Branch</p>	<p>Branch Director</p>	<p>Deputy</p>
<p align="center"><b>5. Planning Section:</b></p>		
<p>Chief     Kim Lew</p>	<p>Division/Group</p>	<p>Deputy</p>
<p>Resources Unit</p>	<p>Division/Group</p>	<p>Situation Unit</p>
<p>Jannaya Young</p>	<p>Division/Group</p>	<p>Documentation Unit</p>
<p>Demobilization Unit</p>	<p>Branch Director</p>	<p>Technical Specialists</p>
<p>Advance Planning Lead</p>	<p>Deputy</p>	<p>Advance Plan Analysis</p>
<p>Lisa Galindo</p>	<p>Division/Group</p>	<p>Jeff Hayes</p>
<p>Chief</p>	<p>Division/Group</p>	<p>Deputy</p>
<p align="center"><b>6. Logistics Section:</b></p>		
<p>Air Ops Branch Dir.</p>	<p>Air Operations Branch</p>	<p>Director</p>
<p>Supply Unit</p>	<p>Facilities Unit</p>	<p>Ground Support Unit</p>
<p>Chief</p>	<p>Chief</p>	<p>John Anderson</p>
<p>Deputy</p>	<p>Time Unit</p>	<p>Theresa Gonzales</p>
<p>Director</p>	<p>Director</p>	<p>Director</p>
<p>Communications Unit</p>	<p>Procurement Unit</p>	<p>John Anderson</p>
<p>Medical Unit</p>	<p>Comp/Claims Unit</p>	<p>Cost Unit</p>
<p>Food Unit</p>	<p>John Anderson</p>	<p>John Anderson</p>
<p align="center"><b>9. Prepared by:</b> Name: Kim Lew     Position/Title: Planning Section Chief     Signature: <i>Kim Lew</i></p>		
<p>ICS 203</p>	<p>IAP Page 7</p>	<p>Date/Time: 11/24/18 17:54</p>



# ASSIGNMENT LIST (ICS 204)


<b>1. Incident Name:</b>	2018 November Wildfires		
<b>2. Operational Period:</b>	Date From: 11/24/18	Date To: 11/24/18	
<b>3. Branch:</b>	Time From: 0700 Time To: 1900		
<b>4. Operations Personnel:</b>	Name: _____ Contact Number(s): _____ Operations Section Chief: Kim Lew DOC 916-255-1805 Branch Director: Markell Pierce DOC 916-384-1448 Division/Group Supervisor: Markell Pierce DOC 916-384-1448		
<b>5. Resources Assigned:</b>	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information	# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)
Resource Identifier	Leader	8	916-384-1452 EMSA DOC
Logistics Section	Jeff Hayes	4	916-255-1805 EMSA DOC
Planning Section	Kim Lew	2	916-384-1448 EMSA DOC
Finance Section	John Anderson	4	916-255-1449 EMSA DOC
Operations Section	J Young / L Galindo	1	916-384-1448 / 714-847-6000 EMSA DOC
Admin Officer	John Burgard		
<b>6. Work Assignments:</b>			
<ul style="list-style-type: none"> <li>• Logistics to ensure water tightness of medical tents and determine any needs by the end of day.</li> <li>• Operations to confirm location and delivery of flu and TDAP vaccinations by the end of day.</li> <li>• Administrative Officer will confirm availability and location of KP mobile medicine van by end of day.</li> <li>• Time/Travel Unit (Finance) update flight plans for demobilization.</li> </ul>			
<b>7. Special Instructions:</b>			
<b>8. Communications (radio and/or phone contact numbers needed for this assignment):</b>			
Name/Function			
Primary Contact: indicate cell, pager, or radio (frequency/system/channel)			
/			
/			
/			
/			
<b>9. Prepared by:</b> Name: Kim Lew			
Position/Title: Planning Section Chief Signature: <i>Kim Lew</i>			
Date/Time: 11/24/18 1915hrs			
IAP Page 8			
ICS 204			

# INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

<b>1. Incident Name:</b> 2018 November Wildfires	<b>2. Date/Time Prepared:</b> Date: 11/24/18 Time: 0700	<b>3. Operational Period:</b> Date To: 11/24/18 Time To: 1900
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4. Basic Radio Channel Use:										
Zone Grp.	Ch #	Function	Channel Name/Trunked Radio System Talk Group	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	TX Tone/NAC	Mode (A, D, or M)	Remarks
	1	Command	MED-3T13		463.05	141.3	468.05	141.3	A	Main, Calling Repeated

**5. Special Instructions:**

<b>6. Prepared by (Communications Unit Leader):</b> Name: <u>Kim Lew</u>	Signature: <u></u>
ICS 205	Date/Time: <u>1915 hrs</u>
IAP Page 9	

11/23/2018

0700-0700

## COMMUNICATIONS LIST (ICS 205A)

Position Title	Contact Name	Contact Number	Email
Director of DOC	Markell Pierce	916-384-1448	command.emsadboc@emsa.ca.gov
Admin Officer	John Burgard		
Safety Leader	Markell Pierce		
Operations Section Chief	Jennaya Young / Lisa Galindo	916-255-1805	operations.emsadboc@emsa.ca.gov
Response Personnel	Theresa Gonzales/Patrick Lynch		
Mission Tracker	Jennaya Young		
Planning Section Chief	Kim Lew	916-255-1805	planning.emsadboc@emsa.ca.gov
Situation Analysis	Jennaya Young		
Advance Planning Lead	Lisa Galindo		
Advance Plan Analysis	Jamie Cichy		
Other	(None)		
Logistics Section Chief	Jeff Hayes		
Travel Coordinator	Theresa Gonzales	916-384-1452	logistics.emsadboc@emsaca.gov
Comms/IT	Howard Tsudaka / Kevin Rollins		
DOC Staffing	Jennaya Young		
Procurement	John Anderson		
Food Unit Leader	Jennaya Young		
Logistics Specialist	Sergie El-Morshedy		
Tech Specialist	(None)		
Finance/Admin Section Chief	James Anderson		
Travel/Time Unit	Theresa Gonzalez		
Cost Accounting	James Anderson		
916-384-1449	916-384-1449	financeadmin.emsadboc@emsa.ca.gov	

EXEC

OPS

PLANS

LOGISTICS

FISCAL

# MEDICAL PLAN (ICS 206)

**1. Incident Name:** 2018 November Wildfires  
**2. Operational Period:** Date From: 11/24/18 Time From: 0700 Date To: 11/24/18 Time To: 1900

**3. Medical Aid Stations:**

Name	Location	Contact Number(s)/Frequency	Paramedics on Site?
CAL-MAT Boo	150 Airport Boulevard, Chico, CA 95973	Don Wyatt 209-303-2726	<input checked="" 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
First Responder	150 Airport Boulevard, Chico, CA 95973	Don Wyatt 209-303-2726	<input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> BLS
DOD Ground FLA	150 Airport Boulevard, Chico, CA 95973	Don Wyatt 209-303-2726	<input checked="" 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			
ENLOE Hospital	1531 Esplanade, Chico, CA 95926	N/A	N/A		<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	<input type="checkbox"/> Yes <input type="checkbox"/> No
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					<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**6. Special Medical Emergency 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: Kim Lew  
 Signature: *Kim Lew*

**8. Approved by (Safety Officer):** Name: Markell Pierce  
 Signature: *Markell Pierce*

Date/Time: 11/24/2018 1915 hrs

IAP Page 11 ICS 206