**APPENDIX F**

**Incident Emergency Plan (IEP)**

**Introduction**

An emergency situation such as citizen entrapment, structure burn-over, helicopter crash, burn-over or entrapment of firefighters, camp evacuation, or vehicle accident, etc., may occur on the incident resulting in a near miss, serious injuries or fatalities, destruction of property, and mental anguish.

The intent of this plan is to establish control of an emergency situation as quickly as possible by identifying responsibilities and procedures.

**Responsibilities For Managing Emergencies**

The Incident Commander (IC) is responsible for the orientation of individual team members to the Incident Emergency Plan (IEP). When an incident or potential incident is recognized by the IC, OSC2, SOF2/MEDL, and an emergency has been declared, the following procedures and assignments shall be implemented:

Procedures:

1. An emergency declaration shall be confirmed by the IC or the SOF2 and implementation procedures shall be initiated. (Minor incidents shall be administered under the ICS-206 Medical Procedures Plan, and shall not be administered under the procedures in this IEP).
2. Radio communications shall be on the established incident command frequency or Air-Ground frequency. The emergency shall be declared by the Operations Section Chief, Incident Commander or Safety Officer. Radio frequencies shall be exclusive to the management of the emergency situation until resolved.
3. The Communications Unit Leader (COML) shall coordinate radio procedures for the emergency and will contact the appropriate team members (IC, SOF2, MEDL, PIO, FSC).
4. The Operations Section Chief or Division Group Supervisor (DIVS) for that operational period shall be initially assigned to oversight of the emergency situation on scene to implement the IEP until relieved if appropriate.
5. Planning Operations and Operations need to coordinate who manages the emergency on scene and who continues to monitor the rest of the incident activities. (Trainee may have to fill in as Planning Ops).
6. Incident activity is likely to be intense at the time of the emergency, so the operations personnel shall be relieved as soon as practical.
7. Names of injured or deceased individuals, crew names or designators, or other identifying information are not to be transmitted on the radio. The Agency Administrator having jurisdiction of the incident is the only authorized source for release of such identifying information.
8. Deceased individuals are not to be moved, except to accomplish rescue work or to protect the health and safety of others. Personal effects of the deceased are not to be moved or removed.
9. People involved with the management of the emergency will complete a thorough documentation of their respective actions. This is extremely important and is not to be overlooked. The ICS-214 form should be utilized for initial notations, but subsequent narratives shall be required.
10. When structures are threatened, the Operations Section shall complete a Structure Protection Plan.
11. When the Camp, Base, or ICP are threatened by the incident, the Logistics Section as detailed in Appendix G shall complete a Camp Evacuation Plan.

**Fatalities**

In the event of death, hosting agencies procedures will be followed. If agency procedures are not in place local jurisdictional law enforcement will be contacted.

**Aircraft**

In the event of an aircraft incident which results in a near-miss or a minor or major crash agency protocols shall be followed.

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| **AIRCRAFT, BURN-OVER, FATALITY, SERIOUS ACCIDENT -- EMERGENCY EVENT** | |
| **Assignments:** When an emergency situation has been declared by the IC or SOF2 on the incident, the following assignments are to be performed and initiated when completed by the incumbent in the position | |
| **Positions** | **Responsibilities** |
| **IC** | * Notifies Agency Administrator and coordinates information flow with the designated Agency Representative. Notification may include a request for the County Coroner or Sheriff in the event of a fatality. * Requests the Agency Administrator notify the Region or State Air Safety Officer who will notify the FAA, NTSB, and OSHA as applicable. * Supervises the overall management of the emergency situation. * Ensures the IEP is being used and adhered too. * Requests a Critical Incident Stress Debriefing Team via the Agency Administrator. |
| **SOF2** | * In the absence of the IC, will supervise the overall management of the emergency situation. * Initiates the investigation of the emergency and requests an accident investigation team to assume responsibility for the formal investigation. * Ensures the completeness of the wildland fire entrapment/fatality initial report (NFES 0869), as needed, records a copy with the DOCL and sends the report to NIFC. |
| **PIO2** | * Deals with the media regarding the emergency. * After approval by the IC and in conjunction with the Agency Administrator, prepares public releases of information in accordance with agency mandates. |
| **OSC2** | * Supervises operation personnel involved in the management of the emergency. |
| **DIVS or Line SOFR** | * Conducts an initial assessment of the situation and reports findings and recommendations to the IC. * This initial information is to include:  1. Nature of emergency (accident, burn-over, etc). 2. Nature of individuals involved and condition. 3. Number of individuals involved. 4. Latitude/longitude of site, LZ coordinates, or other location coordinates. 5. Medical needs including transportation. 6. Estimated time to transport individuals to road, LZ, or helispot. 7. Flight conditions: visibility, wind conditions, LZ dimensions. 8. Reference information for Medivac procedures from the ICS 206 form. 9. Coordinates rescue and medical transport arrangements on the site. 10. Secures the site from contamination, protects evidence, and secures names of witnesses for the investigation team.  * Ensure line operations supervision is intact by assigning not affected by incident. * Collect and ensure initial documentation at scene is recorded and passed on at ICP. |
| **AOBD** | * + Coordinates incident aircraft during emergency.   + Identifies additional medical helicopter(s) for rescue and medical transport to a hospital. |
| **LSC2** | * Supervises logistical support for the emergency. |
| **GSUL** | * Provides ground transportation as needed. * Arranges for damaged vehicle removal, as needed. |
| **COML** | * Receives notification of emergency and contacts the IC, SOF2 and MEDL with the information. Requests critical information and records it. * Clears radio traffic and establishes emergency frequency and monitors its use. * Ensures documentation of all activities. |
| **MEDL** | * Establishes contact with the local Emergency Communications Center (ECC) to arrange for a communication link between the incident and the hospital. * Implements the ICS-206 form, Incident Medical Plan. * Provides medical personnel (EMT’s) to stabilize patients and to accompany them in transit to the hospital. * Activates a triage unit, as needed, to provide ABC identification and treatment with priority tagging. * Reference “START” procedures for multiple casualty medical procedures. |
| **SECM** | * Provides law enforcement officers to assist the SOF2 with the preliminary investigation. * Provide security for the emergency site, as needed. |
| **FACL** | * Provide necessary facilities to support the emergency. |
| **FDUL** | * Provide emergency meals to personnel handling the emergency. |
| **SPUL** | * Provide potable water to emergency personnel and any necessary supplies in support of the emergency operation. |
| **PSC** | * Supervises planning support for the emergency. |
| **RESL** | * Provide critical resource information. |
| **DOCL** | * Compile and prepare emergency event document reports. |
| **COMP** | * Secures information for medical and claims reporting purposes. * Completes investigation reports, as needed. |
| **FSC** | * Ensures all appropriate paperwork and medical procedures are followed up and processed. * Coordinates with local unit to have agency representative accompany patient(s) to hospital |