Incident Action Plan

Operational Period

Confidential and Privileged Information

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Event Timeline

Time	Event Milestone





WEATHER FORECAST	1. Incident Name	2. Date Prepared	3. Time Prepared		
4. Forecast for the Operation	al Period of:	5. Location/Area Covered:			
C C		d- O	nal Davia d		
b. Current Watches/Warnings	s and Forecast of Weather Threshol	as Covering the Operatio	nai Period		
7. Weather Forecast					
8. Forecast Discussion					
9. Prepared by (Incident Mete	eorologist)	10. Approved by (Planni	ng Section Chief)		

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4. Map/Sketch (include sketch, showing the total area of operations, the incident site/area, impacted and threatened areas, or other graphics depicting situational status and resource assignment):				

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5. Situation Summary and Health and Safety Briefing (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.
The following safety concerns have been identified:

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1. Incident Name:		2. Operational Period:					
3. Objective(s):							
4. Operational Period C	ommand Emphas	iis:					
,	•						
General Situational Awa	reness:						
5. Site Safety Plan Requ	uired? Yes No						
6. Incident Action Plan		d below are included in this Incident Action Plan):					
ICS 202	ICS 206	Other Attachments:					
ICS 203	ICS 207	·					
ICS 204	ICS 208	·					
ICS 205	Map/Chart	·					
ICS 205A	Weather Forecast	·					





1. Incident Name:		2. Operational F	Period:	3.				
4. Operations Personr	nel: <u>Name</u>		Contact Number(s)	Branch:				
Operations Section C	hief:			Division:				
Branch Dire	ctor:			Group:				
Division/Group Superv	risor:			Staging Area:				
Division/Group Superv	risor:							
5. Resources Assigne	d:	st		Reporting Location, Special				
Resource Identifier	Leader	# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Equipment and Supplies, Remarks, Notes, Information				
6. Work Assignments:		<u>'</u>						
7. Special Instructions	 S:							
•	r. opeciai matructiona.							
8. Communications (radio and/or phone contact numbers needed for this assignment):								
(Reference ICS 205 for details)								
(Neronance 100 200 for details)								

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1. Incident Name:			2. Date/Time P	repared:				3. Ope	erational Per	iod:	
4. Bas	ic Radi	io 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/N	X NAC	Mode (A, D, or M)	Remarks
5. Special Instructions:											





4.	Incident Name:	2. Operational Period	:
3. Bas	ic Local Communications Information	on:	
	Incident Assigned Position	Name	Method(s) of Contact (phone, pager, cell, etc.)

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4. Incident N	ame:		2. Operational Po	eriod:					
3. Medical Aid St	ations: (Se	ee #6/Procedures)						
Name Location Number(s)/Frequency								Paramedics on Site?	
							Yes	No	
							Yes	No	
							Yes	No	
							Yes	No	
							Yes	No	
							Yes	No	
4. Transportation	(indicate a	ir or ground):							
Ambulance Se	ervice		Location			ontact s)/Frequency	Level of	Service	
							ALS	BLS	
							ALS	BLS	
							ALS	BLS	
							ALS	BLS	
5. Hospitals:		ı		T		T	т т		
		ss, Latitude & ude if Helipad	Contact Number(s)/	Travel Time		Trauma	Burn		
Hospital Name			Frequency	Air	Ground	Center	Center	Helipad	
						Yes	Yes	Yes	
						Level:	No	No	
						Yes	Yes	Yes	
						Level:	No	No	
						Yes	Yes	Yes	
						Level:	No	No	
						Yes Level:	Yes	Yes	
							No	No	
						Yes Level:	Yes No	Yes No	
6. Special Medica	al Emerger	ncy Procedures:					NO	INO	
o. opeoid: incuio		,							

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Event Assignments

Title / Beat	Officer	Duties & Responsibilities

Duty Roster	IAP Page	of	Prepared by:





Lot Closures

Barricades

Media Presence

Arrest Protocol





University of Texas System Police

Special Event

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Risk Assessment

Event	Name:	

E	vent Location:			Date of Event:			
		Risk	Element				Rating
1.	Expected Attendance: 1 - 500 = 1	501 - 1000 = 3	1001 - 2500 =	5 2501 - 5000 = 7 Over	5000 = 10		
2.	Is the event open to the general pub	olic? (2)			Yes	No	
3.	3. Has the event been publicized to the general public? (1) Yes No						
4.	Will any vendors or exhibitors be pr	esent? (1)			Yes	No	
5.	Will there be an admission or regist	ration fee? (1)			Yes	No	
6.	Will alcoholic beverages be sold/ser	ved? (5)			Yes	No	
7.	Will the media be present and/or co	onducting live broad	dcasts from the	venue? (1)	Yes	No	
8.	Has the event encountered criminal Describe:			·	Yes	No	
9.	9. Has the event encountered criminal or other issues at the Institution? (3-10) Describe: No						
10. Does the event involve an issue of a polarizing nature? (3-7) Describe: Yes No							
11.	11. Will the event have dignitaries or other high profile persons in attendance? (3-10) Describe: Yes No						
12.	12. Is there any credible intelligence regarding anticipated protest movements at the event? (5-10) Describe: Yes No						
13.	13. Is there any credible intelligence regarding a threat to the event or surrounding area? (10) Describe: No						
14. Are there any hazards (natural or man-made) that would pose a risk to the event? (3-10) Describe: Yes No							
				Total Ass	sessment	Points:	
Ov	erall Risk Assessment for Event:	Lo	OW (<u><</u> 7)	Medium (8-14)		High (≥ 1	.5)
		Proposed Count	ermeasures fo	r Risk Elements			
	Risk Element			Countermeasure(s)			
Assessed By: Printed Name: Date:							
Re	Reviewed By: Printed Name: Date:						

Prepared by:





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