

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: SET 2021 Branch 3 ARES and CERT	2. Operational Period:	Date From: 10/9/2021 Time From: 1000	Date To: 10/9/2021 Time To: 1300
3. Objective(s): CERT: Practice activation protocols and go-bag kits Review light search and rescue practices and techniques Test the efficiency of the new TERA GMRS radios we have purchased for CERT Be able to effectively communicate with the CERT Team Leader at the DOC ARES: Practice activation protocols and go-bag kits Practice use of ICS forms Practice participation with CERT Teams in the Field and provide radio protocol advice to GMRS radio communication operators within the CERT Teams When GMRS radio communication is not effective, provide damage and victim assessments to the DOC Exercise communication between DOCs Conduct WINLINK communication between Branch 3 and 4 and with DOC40			
4. Operational Period Command Emphasis: This exercise is part of the Great Shake Out drill in San Mateo County Coastside for Branches 3 and 4. The scenario is the day after a large earthquake – moment magnitude of 7.3. Epicenter was on the San Andreas Fault, near the Crystal Springs Reservoir. There is severe damage to roadways, power systems and communication systems. An emergency Net was established on CMD31 immediately following the quake and the DOC has been staffed with ARES since the incident began. SC4ARES members were told to report to the DOC at 1000 hours to assist CERT Teams with light search and rescue efforts. CERT is activated through SMCAAlert and asked to report to the DOC at 1000 hours. At the DOC, ARES and CERT will check in, complete a T card, receive DSW swearing in and be assigned to a CERT Team, using ICS form 204. There will be one ARES member on each CERT Team. One ARES member, Nate KN6LGM, will be assigned to Branch 4. ARES Leadership, KI6FAO, will be the DOC Net Control Operator. Each CERT Team will receive two GMRS radios for use in the Field. Each Team will receive a clipboard with the following forms: Briefing Assignment (CERT form 4), 5 Activity Reports (ICS 214), 5 Communication Logs (CERT form 5), ICS 205 – Comm Plan, a map of their assigned area, 1 Damage Assessment Form (CERT Form 1) for reference on situational awareness, extra paper and pen. Two or three teams will be assigned to a specific location in Cuesta. One team will be assigned to a specific location in Loma Mar. One team will be assigned to a specific location in Pescadero. Once at their assigned location, teams will report their arrival to the CERT Team Leader and conduct 2 or 3 house damage assessments. Victims may or may not be located. All damage and victim reports will be recorded and communicated to the CERT Team Leader. All communication to the CERT Team Leader and other CERT Teams will be on the Hildebrand GMRS Repeater. During the assessment, the two radio operators within each team will switch their radio to their assigned simplex channel and communicate with each other. Radios to be turned back to the repeater channel for further communication with the CERT Team Leader. During the exercise, the La Honda DOC may send a challenge task to the CERT Teams. If GMRS radio communications are not possible from a specific location, the ARES member assigned to that team will communicate information directly to the DOC. CERT will record all damage / victim assessments on ICS Form 213 – Activity Log. Once completed at the first location, CERT Teams will ask the CERT Team Leader for directions on where to go next. The team will switch roles within the team and will proceed to the secondary location and again conduct 2 or 3 house			

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<p>assessments and victim reports, reporting to the CERT Team Leader. The ARES Operator assigned to work with the CERT Team Leader will communicate damage and victim reports to the La Honda DOC.</p> <p>During the exercise, each team will make a request of the CERT Team Leader to go direct to another CERT Team. The CERT Team Leader will approve the request if traffic allows. The two teams will share some information. Once the team has completed their team to team communication, they will advise the CERT Team Leader that they have completed that communication.</p> <p>Once the teams have completed their assessments at the second location, they will ask the CERT Team Leader for permission to return to the DOC for debriefing.</p> <p>Note: Branch 4 -- South Skyline and parts of Alpine and Middleton Tract – will be conducting a different exercise. Each organized neighborhood will complete a welfare check and report findings on the Longridge GMRS Repeater. Information received will be relayed to the La Honda DOC by ARES Operator, Nate KN6LGM. ARES member in Branch 4, Bryan KD6UCA, will also be sending relays from Las Cumbres and winlink messages to the La Honda DOC and DOC40.</p>																		
<p>General Situational Awareness</p> <p>Be aware of potential hazards as a result of the earthquake, such as downed power lines, trees about to fall, tripping debris in the pavement. Be aware of after shocks: duck, cover and hold.</p>																		
<p>5. Site Safety Plan Required? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>Approved Site Safety Plan(s) Located at: La Honda DOC</p>																		
<p>6. Incident Action Plan (the items checked below are included in this Incident Action Plan):</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;"><input type="checkbox"/> ICS 203</td> <td style="width: 25%;"><input type="checkbox"/> ICS 207</td> <td style="width: 50%;"><u>Other Attachments:</u></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 204</td> <td><input type="checkbox"/> ICS 208</td> <td><input checked="" type="checkbox"/> ICS Activity Log 214</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205</td> <td><input checked="" type="checkbox"/> Map/Chart</td> <td><input checked="" type="checkbox"/> CERT Form 4 - Assignment Briefing</td> </tr> <tr> <td><input type="checkbox"/> ICS 205A</td> <td><input type="checkbox"/> Weather Forecast/Tides/Currents</td> <td><input checked="" type="checkbox"/> CERT Form 1 – Damage Assessment</td> </tr> <tr> <td><input type="checkbox"/> ICS 206</td> <td><input type="checkbox"/> _____</td> <td><input checked="" type="checkbox"/> CERT Form 6 – Communications Log</td> </tr> </table>				<input type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	<u>Other Attachments:</u>	<input checked="" type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 208	<input checked="" type="checkbox"/> ICS Activity Log 214	<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Map/Chart	<input checked="" type="checkbox"/> CERT Form 4 - Assignment Briefing	<input type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather Forecast/Tides/Currents	<input checked="" type="checkbox"/> CERT Form 1 – Damage Assessment	<input type="checkbox"/> ICS 206	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> CERT Form 6 – Communications Log
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<p>7. Prepared by: Name: Pat O’Coffey</p>		<p>Position/Title: CERT Program Mgr. Signature: _____</p>																
<p>8. Approved by Incident Commander:</p>		<p>Name: _____ Signature: _____</p>																
<p>ICS 202</p>	<p>IAP Page</p>	<p>Date/Time: 9/29/2021 12:00 AM</p>																

ICS 202 Incident Objectives

Purpose. The Incident Objectives (ICS 202) describes the basic incident strategy, incident objectives, command emphasis/priorities, and safety considerations for use during the next operational period.

Preparation. The ICS 202 is completed by the Planning Section following each Command and General Staff meeting conducted to prepare the Incident Action Plan (IAP). In case of a Unified Command, one Incident Commander (IC) may approve the ICS 202. If additional IC signatures are used, attach a blank page.

Distribution. The ICS 202 may be reproduced with the IAP and may be part of the IAP and given to all supervisory personnel at the Section, Branch, Division/Group, and Unit levels. All completed original forms must be given to the Documentation Unit.

Notes:

- The ICS 202 is part of the IAP and can be used as the opening or cover page.
- If additional pages are needed, use a blank ICS 202 and repaginate as needed.

Block Number	Block Title	Instructions
1	Incident Name	Enter the name assigned to the incident. If needed, an incident number can be added.
2	Operational Period <ul style="list-style-type: none"> • Date and Time From • Date and Time To 	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.
3	Objective(s)	Enter clear, concise statements of the objectives for managing the response. Ideally, these objectives will be listed in priority order. These objectives are for the incident response for this operational period as well as for the duration of the incident. Include alternative and/or specific tactical objectives as applicable. Objectives should follow the SMART model or a similar approach: S pecific – Is the wording precise and unambiguous? M easurable – How will achievements be measured? A ction-oriented – Is an action verb used to describe expected accomplishments? R ealistic – Is the outcome achievable with given available resources? T ime-sensitive – What is the timeframe?
4	Operational Period Command Emphasis	Enter command emphasis for the operational period, which may include tactical priorities or a general weather forecast for the operational period. It may be a sequence of events or order of events to address. This is not a narrative on the objectives, but a discussion about where to place emphasis if there are needs to prioritize based on the Incident Commander's or Unified Command's direction. Examples: Be aware of falling debris, secondary explosions, etc.
	General Situational Awareness	General situational awareness may include a weather forecast, incident conditions, and/or a general safety message. If a safety message is included here, it should be reviewed by the Safety Officer to ensure it is in alignment with the Safety Message/Plan (ICS 208).
5	Site Safety Plan Required? Yes <input type="checkbox"/> No <input type="checkbox"/>	Safety Officer should check whether or not a site safety plan is required for this incident.
	Approved Site Safety Plan(s) Located At	Enter the location of the approved Site Safety Plan(s).

Block Number	Block Title	Instructions
6	<p>Incident Action Plan (the items checked below are included in this Incident Action Plan):</p> <p><input type="checkbox"/> ICS 203</p> <p><input type="checkbox"/> ICS 204</p> <p><input type="checkbox"/> ICS 205</p> <p><input type="checkbox"/> ICS 205A</p> <p><input type="checkbox"/> ICS 206</p> <p><input type="checkbox"/> ICS 207</p> <p><input type="checkbox"/> ICS 208</p> <p><input type="checkbox"/> Map/Chart</p> <p><input type="checkbox"/> Weather Forecast/Tides/Currents</p> <p><u>Other Attachments:</u></p>	<p>Check appropriate forms and list other relevant documents that are included in the IAP.</p> <p><input type="checkbox"/> ICS 203 – Organization Assignment List</p> <p><input type="checkbox"/> ICS 204 – Assignment List</p> <p><input type="checkbox"/> ICS 205 – Incident Radio Communications Plan</p> <p><input type="checkbox"/> ICS 205A – Communications List</p> <p><input type="checkbox"/> ICS 206 – Medical Plan</p> <p><input type="checkbox"/> ICS 207 – Incident Organization Chart</p> <p><input type="checkbox"/> ICS 208 – Safety Message/Plan</p>
7	<p>Prepared by</p> <ul style="list-style-type: none"> • Name • Position/Title • Signature 	<p>Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).</p>
8	<p>Approved by Incident Commander</p> <ul style="list-style-type: none"> • Name • Signature • Date/Time 	<p>In the case of a Unified Command, one IC may approve the ICS 202. If additional IC signatures are used, attach a blank page.</p>