

AFTER ACTION REVIEW		
INCIDENT NAME:		IC:
DATE:	TIME:	COMPLEXITY:
ATTENDEES:		
The purpose of this After Action Review is to evaluate decisions, actions, and how well they worked. Were they within Standard Operating Procedure and policy?		
What was planned?		
<ul style="list-style-type: none"> Objectives Strategy/Tactics 		
What actually happened?		
<ul style="list-style-type: none"> What was effective/non-effective? What barriers were encountered and how were they mitigated? What actions were not standard? Were there safety problems? 		
What did happen?		
<ul style="list-style-type: none"> What were the reasons for ineffective or unsafe performance? 		
What can be next time?		
<ul style="list-style-type: none"> Determine how to apply lessons learned in the future? 		
Is there need to file a SAFENET?		
AAR LEADER SIGNATURE:		DATE:
REVIEWED BY:		DATE:

CODY DISPATCH INCIDENT ORGANIZER



Incident Name			
T/R/S			
Fire Code	BLM:		FS:
Lat/Long			
Unit			

IC#1 Took Command	Date:	Time:
IC#2 Took Command	Date:	Time:

Containment Date & Time		
Control Date & Time		
Final Size By Ownership	BLM:	USFS:
	State:	Private:
	Other:	TOTAL:

Directions and Intent:

MOST INCIDENTS ONLY REQUIRE FILLING OUT SOME OF THE PAGES - i.e., TYPE 4 AND 5 INCIDENTS. (In these situations, fill out afterwards when doing your AAR.)

- Intended to provide the IC with a format and focal point to begin processing an incident that is emerging. (Start to plan the fight – delegate – instead of fighting the fight and possibly losing your situational awareness as IC.)
- Use until an Incident is out or operating on an IAP.
- Serves as an Incident Workbook used in conjunction with the Incident Response Pocket Guide, Redbook, or Fireline Handbook.
- Gray-blocked items are required to be filled in for 30-mile accident prevention (Forest Service).

IC#1 Signature: _____

IC#2 Signature: _____

SPOT WEATHER OBSERVATION AND FORCAST REQUEST									
Requesting Agency will Furnish Information for Blocks 1-12									
1. Incident or Project		2. Control Agency		3. Request Made					
				Time:		Date:			
4. Location (Designate Township, Range and Section (& ¼ section)):				5. Drainage Name:		6. Exposure/Aspect:			
7. Size of Incident or Project		8. Elevation			9. Fuel Type		10. Project On:		
Acres		Top	Bottom				<input type="checkbox"/> Ground <input type="checkbox"/> Crowning		
11. Weather Conditions at Incident or Project or from RAWs:									
Place	Elev	Observation Time	Wind Direction/Velocity		Temperature		No entry necessary: To be completed by the Fire Weather Forecaster.		Remarks
			20-Foot	Eye Level	Dry Bulb	Wet Bulb	RH	DP	
12. Send Forecast To (Person):		Send Forecast To (Location):		Send Forecast Via:			Send Copy To:		
The Fire Weather Forecaster will Furnish the Information for Block 13:									
13. Discussion & Outlook: Date & Time:									
Burn Period	Sky Cover	Temperature	Humidity	Wind		Indices			
				Eye Level	20-Foot				
<input type="checkbox"/> Today (sunrise to dusk) <input type="checkbox"/> This Afternoon (noon to dusk) <input type="checkbox"/> This Evening (1600 to dusk) <input type="checkbox"/> Tonight (sunset to sunrise)	<input type="checkbox"/> Mostly Sunny <input type="checkbox"/> Clear <input type="checkbox"/> Fair <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Mostly Cloudy <input type="checkbox"/> Cloudy <input type="checkbox"/> Variable	*F ____	____%	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction ____ Vel. ____ mph Gusts ____ mph	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction ____ Vel. ____ mph Gusts ____ mph	Haines: LAL: BI: CWR:			
<input type="checkbox"/> Today/ Tomorrow (sunrise to dusk) <input type="checkbox"/> This Afternoon (noon to dusk) <input type="checkbox"/> This Evening (1600 to dusk) <input type="checkbox"/> Tonight (sunset to sunrise)	<input type="checkbox"/> Mostly Sunny <input type="checkbox"/> Clear <input type="checkbox"/> Fair <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Mostly Cloudy <input type="checkbox"/> Cloudy <input type="checkbox"/> Variable	*F ____	____%	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction ____ Vel. ____ mph Gusts ____ mph	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction ____ Vel. ____ mph Gusts ____ mph	Haines: LAL: BI: CWR:			
Outlook for (Date): ____	<input type="checkbox"/> Mostly Sunny <input type="checkbox"/> Clear <input type="checkbox"/> Fair <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Mostly Cloudy <input type="checkbox"/> Cloudy <input type="checkbox"/> Variable	*F ____	____%	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction ____ Vel. ____ mph Gusts ____ mph	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction ____ Vel. ____ mph Gusts ____ mph	Haines: LAL: BI: CWR:			
Name of Fire Weather Forecaster:				Fire Weather Office Issuing Forecast:					
14. Forecast Received By (Name):		Date:		Time		Forecast Received at (Location) Via:			

RISK ANALYSIS				
ERC	LOW	MODERATE	HIGH	EXTREME
HAINES INDEX	1 – 2	3	4	5 – 6
RELATIVE HUMIDITY	OVER 45	35-45	20 TO 35	UNDER 20
WIND SPEED	CALM	UNDER 10	10 TO 20	OVER 20
WIND INDICATORS		DEVELOPING CUMULUS	THUNDER HEADS	COLD FRONTS WINDS ALOFT
SLOPE %	FLAT	UNDER 15	15 TO 30	OVER 30
FLAME LENGTH	UNDER 2'	2' TO 4'	4' TO 8'	OVER 8'
RESISTANCE TO CONTROL?	NONE	SOME	MODERATE	HIGH
SPOTTING	NONE	LITTLE	SOME	FREQUENT
TIME OF DAY	2000 TO 1000	1600 TO 2000	1000 TO 1200	1200 TO 1600
PUBLIC SAFETY OR EVACUATIONS?	NO	LIMITED	YES	IN PROCESS
STRUCTURE LOSS POTENTIAL?	NONE	POSSIBLY	HIGH	ALREADY INVOLVED
ENOUGH RESOURCES?	YES	TO BE DETERMINED	NOT SURE	NO
PROBABILITY OF SUCCESS	HIGH	MODERATE	LOW	POOR

MITIGATIONS/WARNINGS/REMEDIES FOR ITEMS LISTED ABOVE:

RISK MANAGEMENT PROCESS	
Step 1 Situation Awareness	
Gather Information	
<input type="checkbox"/> Objective(s)	<input type="checkbox"/> Previous Fire Behavior
<input type="checkbox"/> Communication	<input type="checkbox"/> Weather Forecast
<input type="checkbox"/> Who's in Charge	<input type="checkbox"/> Local Factors
Scout the Fire	
Step 2 Hazard Assessment	
Estimate Potential Fire Behavior Hazards	
<input type="checkbox"/> Look Up / Down / Around Indicators	
Identify Tactical Hazards	
<input type="checkbox"/> Watch Outs	
What other safety hazards exist?	
Consider severity vs. probability?	
Step 3 Hazard Control	
Firefighting Orders → LCES Checklist - MANDATORY	
<input type="checkbox"/> Anchor Point	
<input type="checkbox"/> Downhill Checklist (if applicable)	
What other controls are necessary?	
Step 4 Decision Point	
Are Controls in place for identified hazards?	
NO – Reassess situation	YES – Next question
Are selected tactics based on expected fire behavior?	
NO – Reassess situation	YES – Next question
Have instructions been given and understood?	
NO – Reassess situation	YES – Next question
Step 5 Evaluate	
Personnel: Low experience level with local factor?	
Distracted from primary tasks?	
Fatigue or stress reaction?	
Hazardous attitude?	
The Situation: What is changing?	
Are strategy and tactics working?	

BRIEFING CHECKLIST

SITUATION:

- * Fire name, location, map orientation, other incidents in area
- * Terrain influences
- * Fuel type and condition
- * Fire weather (previous, current, and expected) – Winds, RH, temperature, etc.
- * Fire behavior (previous, current, and expected) – Time of day, slope, wind, etc.

MISSION / EXECUTION:

- * Command – Incident commander / immediate supervisor
- * Commander's intent – Overall strategy / objectives
- * Specific tactical assignments
- * Contingency plans

COMMUNICATIONS:

- * Communication plan – tactical, command, air-to-ground frequencies, phone numbers
- * Medivac plan

SERVICES / SUPPORT:

- * Other resources – Working adjacent and those available to order, Aviation Operations
- * Logistics – Transportation, supplies, and equipment

RISK MANAGEMENT

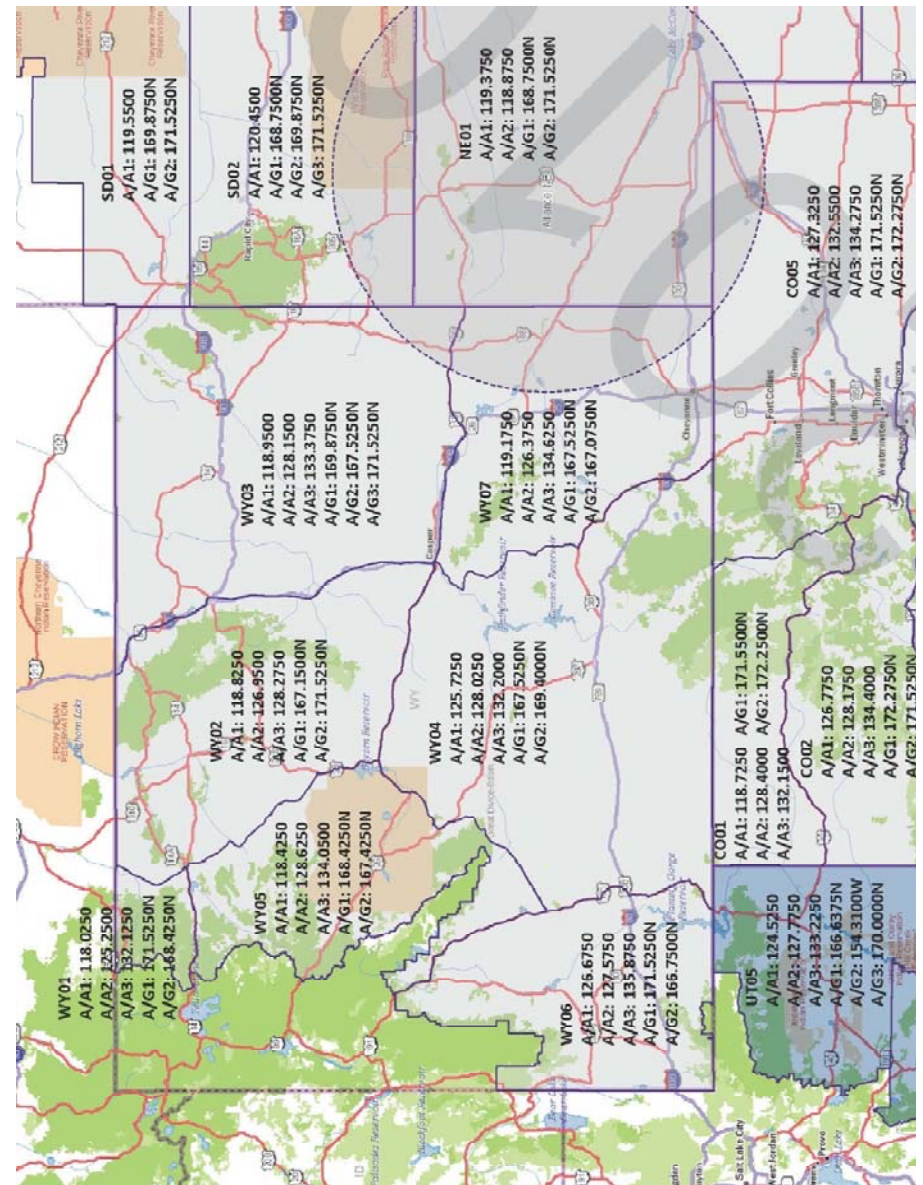
- * Identify known hazards and risks
- * Identify control measures to eliminate hazards / reduce risk, anchor point, LCES
- * Identify trigger points for disengagement / re-evaluation of operational plan

QUESTIONS OR CONCERNS?

<i>Radio Frequencies</i>		
Net	Frequency	Code Guard
Command	<i>Rx</i>	
	<i>Tx</i>	<i>Tx</i>
Support/Dispatch	<i>Rx</i>	
	<i>Tx</i>	<i>Tx</i>
Air-to-Ground	<i>Rx</i>	
	<i>Tx</i>	<i>Tx</i>
Air-to-Air	<i>Rx</i>	
	<i>Tx</i>	<i>Tx</i>
Tac 1	<i>Rx</i>	
	<i>Tx</i>	<i>Tx</i>
Tac 2	<i>Rx</i>	
	<i>Tx</i>	<i>Tx</i>

CONTACT LIST / PHONE NUMBERS

Position / Name	Agency	Phone # / Radio Freq.
FIRE / CRASH RESCUE		
Fire Rescue		
MEDICAL		
Ambulance Air Ambulance Hospital Hospital Burn Center Poison Center		



Incident Commander Responsibilities

Action	Documentation Required
Make safety of firefighters and the public the highest priority. When a potentially life-threatening situation exists, supersede natural and cultural resource considerations if necessary to provide for safety.	No
Prepare a complexity analysis on each wildland fire at the time of initial attack as part of the size up.	Yes
Ensure all firefighting actions are in full compliance with the Ten Standard Fire Orders and mitigation of the applicable Watch Out Situations has been accomplished.	No
Ensure arriving ground fireline resources on Type 3 – 5 wildland fires have positive and documented contact with appropriate incident management personnel and receive a briefing.	Yes
Provide fireline qualified individuals training on entrapment recognition and deployment protocols when such training has not been provided by the home/host Units.	Yes
Manage fatigue of personnel and ensure compliance with work/rest and length of assignment guidelines.	Yes
Personally conduct inspections for safety and health hazards, including compliance with the Ten Standard Fire Orders and mitigation of applicable Watch Out Situations.	Yes
Assign personnel to fireline positions for which they are qualified, as certified by their employing agency. Assign trainees per FSH 5109.17.	No
Include compliance with the Ten Standard Fire Orders and mitigation of applicable Watch Out Situations in after-action reports.	Yes
Monitor effectiveness of planned strategy and tactics. Immediately delay, modify, or abandon firefighting action on any part of a wildland fire where strategies and tactics cannot be safely implemented.	No
Ensure that performance ratings are completed on Type 3 – 5 wildland fires for all ground resources assigned from outside the local area.	Yes
On Type 1 – 3 wildland fires, accept no collateral duties except for unfilled command and general staff positions.	No

Incident Complexity Analysis (Type 3, 4, 5)		
Fire Behavior	Yes	No
Fuels extremely dry and susceptible to long-range spotting or you are currently experiencing extreme fire behavior.		
Weather forecast indicating no significant relief or worsening conditions.		
Current or predicted fire behavior dictates indirect control strategy with large amounts of fuel within planned perimeter.		
Firefighter Safety		
Performance of firefighting resources affected by cumulative fatigue.		
Overhead overextended mentally and/or physically.		
Communication ineffective with tactical resources or dispatch.		
Organization		
Operations are at the limit of span of control.		
Incident action plans, briefings, etc. missing or poorly prepared.		
Variety of specialized operations, support personnel or equipment.		
Unable to properly staff air operations.		
Limited local resources available for initial attack.		
Heavy commitment of local resources to logistical support.		
Existing forces worked 24 hours without success.		
Resources unfamiliar with local conditions and tactics.		
Values to be protected		
Urban interface; structures, developments, recreational facilities, or potential for evacuation.		
Fire burning or threatening more than one jurisdiction and potential for unified command with different or conflicting management objectives.		
Unique natural resources, special-designation areas, critical municipal watershed, T&E species habitat, cultural value sites.		
Sensitive political concerns, media involvement, or controversial fire policy.		

If you have checked "Yes" on 3 to 5 of the analysis boxes, consider requesting the next level of incident management support.

Type 5 Characteristics: (a) C&G Staff positions are not activated. (b) Resources vary from one to five firefighters. (c) Incident is normally contained rapidly during IA. (d) A written action plan is not required.

Type 4 Characteristics: (a) C&G Staff positions are not activated. (b) Resources vary from single Firefighter to several single resources or a single Task Force or Strike Team. (c) The incident is limited to one operational period in the control phase. Mop-up may extend into multiple periods. (d) A written plan is not required.

Type 3 Characteristics: (a) Some of the C&G Staff may be activated, as well as DIVS/GROP Supervisor and Unit leaders. (b) Resources vary from several single resources to several TFL's/STL's. (c) Incident may be separated into several divisions, but usually does not meet the DIVS/GROP Supervisor position for span or control. (d) May involve several burning periods prior to control, which requires a written action plan.

Work Rest Ratio Documentation Worksheet

This worksheet is designed to help the IC document and calculate amount of rest required to meet the Work/Rest guidelines.

- For every 2 hours of work or travel provide 1 hour of sleep or rest.
- IC must justify and document work shifts exceeding 16 hours and those that do not meet the 2:1 work/rest guidelines -- see below.

Date	Operational Period Start Time	Operational Period Stop Time	Total Hours Worked	Rest Time (document hours when employee or module rested)

Approval for shift lengths exceeding 16 hrs given by:

Date/ Time Approval Given:

IC Signature:

Date:

MAP SKETCH

Prepared by:

Position:

Date/Time