Bulletin No. 12-10

October 18, 2012

TO: All Members

FROM: Daren M. Palacios, Chief Deputy, Administrative Operations
       David M. Yamahata, Chief Deputy, Emergency Operations

SUBJECT: RED FLAG ALERT
I. INTRODUCTION

History has demonstrated that Southern California wildfires are heavily influenced by extreme weather conditions. Wildfires are more likely to occur and spread when strong winds and low humidity levels are present. These conditions create a potentially dangerous combination known as Red Flag conditions as detailed in the annual Brush Fire Operations Department Bulletin. During Red Flag conditions (Wind 25 + mph, and humidity 15% or less), the Los Angeles Fire Department (LAFD) maintains a high level of readiness in order to increase access and reduce response times to the High Fire Hazard Severity Zones including:

- Declaration of Red Flag weather conditions
- Pre-deployment of resources
- Staffing of identified Brush Patrols
- Notification of news media for public dissemination
- Activation of the Red Flag No Parking Program
- Activation of Community Fire Patrols

The Red Flag Alert Program was developed to assist with community outreach and public safety. An important part of this program involves notifying the local communities of Red Flag conditions by flying a Red Flag at all LAFD facilities.

II. ABOUT THE RED FLAG

The Red Flag is made of a lightweight nylon material and measures 2' X 3' with two brass grommets to attach the flag to the halyard clips.
The top clip of the Red Flag shall be attached 6' below the bottom of the American Flag. This will keep the Red Flag from interfering with the American Flag. To attach the Red Flag to the halyard, use the attachment clips provided when the Red Flags are distributed. Station Commanders will assess the condition of their Red Flag to assure it is in good condition. A replacement Flag and snaps can be ordered in SRS.
III. WHEN TO FLY THE RED FLAG

The National Weather Service provides fire weather information to the North Division office by 1500 hours for the following day. Upon notification of predicted Red Flag conditions, the North Division office will direct the Metro Dispatch Center to send out a Special Notice informing all work locations of the predicted Red Flag conditions. This notification will cause all stations to begin displaying the Red Flag 24 hours a day until directed to discontinue. All LAFD facilities should be notified by 1900 hours the night before any anticipated Red Flag day.

Upon notification of the upcoming Red Flag conditions, all LAFD facilities shall immediately display the Red Flag. The Red Flag shall be displayed continuously until cancellation of the Red Flag Alert. The purpose of flying the Red Flag continuously from notification to cancellation of the Red Flag weather conditions is to provide additional public notification to help facilitate effective implementation of the Red Flag No Parking Program (RFNPP) restrictions.

<table>
<thead>
<tr>
<th>BURNING INDEX</th>
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<tbody>
<tr>
<td>BI</td>
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<td>BI</td>
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<td>BI</td>
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<tr>
<td>BI</td>
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<tr>
<td>Red Flag Alert</td>
</tr>
</tbody>
</table>

IV. ADDITIONAL CONSIDERATIONS

Companies should use this as an opportunity to promote public awareness by getting involved with local community organizations and to identify other locations within the community to fly the Red Flag on High Hazard days. Examples of these would include local schools, markets, and parks. In addition, stations should develop a network with local organizations such as homeowners associations, church groups, schools and Neighborhood Councils to assist with notifying local communities of upcoming Red Flag days.
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The overall goal of this program is to provide for both public and firefighter safety by increasing public awareness of hazardous weather conditions, activation of the RFNPP restrictions to help improve access and egress, and to assist in reducing response times in the Very High Fire Hazard Severity Zone during high hazard days.

DAVID YAMAHATA, Chief Deputy Emergency Operations

DAREN M. PALACIOS, Chief Deputy Administrative Operations
Attachment B: CONCEPT OF OPERATIONS

Battalion Community CERT Fire Patrol

As per the policies established in Dept Bulletin 12-09 Community Fire Patrols consist of volunteers from within the Administrative Battalion, from the CERT Call Out Team and from the Auxiliary Communications System. Volunteers are equipped with Green Vest and Helmets for identification. Volunteers are not to get involved in actual firefighting operations nor operate within the IDLH. Volunteers will have a planned patrol area and a map provided by the Battalion Headquarters. They should have the ability to read maps and report the fire or incident location to METRO via vehicle radio, hand held radio or cellular phone.

CERT Community Patrol or Hydration Unit Members are prohibited from operating vehicles within the IDLH. At a wild land incident the IDLH is defined as any fire road, trail or area with active fire.

Battalion Commanders are to maintain routine contact with the Community CERT Fire Patrol Coordinator/Representative (DPS Member) and update the Division Offices with any changes.

Battalion Commanders may activate the Community CERT Fire Patrols during any conditions such as high winds, BI over Very High, flood, etc. upon approval of the North Division Commander. Community CERT Fire Patrols shall be activated during Red Flag conditions. The normal operating times for CERT Volunteers are 1000 to 2000.

CERT Operations Procedures

☐ Report to Location designated via CIA Call Out, i.e. Fire Station.
☐ Check in with Battalion Commander, EIT, or designated Station Commander
☐ Indicate DVOC or Non DVOC to LAFD Officer
☐ Receive assignment Instructions from Battalion / Station Commander
☐ Confirm Situational Awareness
☐ Establish Priority Areas of Concern: Community Patrol, Parking Restrictions, Hydration
☐ Secure Patrol Vehicle (Plug Buggy, Sedan) designated by the Battalion / Station Commander
☐ Check Vehicle using DVOC Check Sheet: Equipment, cones, ice chest, hi vis vest, maps.
☐ Start and maintain ICS 214
☐ Ensure communication plan is complete; radios and cellular phone
☐ Initiate assignment and maintain situational awareness
☐ Complete assignment and return vehicle, finalize ICS-214, conduct vehicle inventory.
☐ Notify DPS that assignment is concluded.

If there are any concerns/questions please contact the DPS or CERT Commanders at 818-756-9674.
Parking Enforcement

On days designated as Red Flag Alert CERT Call Out Members may be tasked with providing Community Patrol within a designated area. The Battalion Commander will provide a planned route that will be driven in the provided vehicle. The intent of the drive is to ensure that areas sensitive to parking restrictions are in compliance, and that fire apparatus can pass if response is needed.

CERT Members will wear the following when conducting Community Patrol:

- CERT I.D. Card is clearly visible
- Wear Green Vest and Helmet / CERT Cap when outside the patrol vehicle

CERT Members will patrol with the intent of reporting areas of concern to the Dept of Transportation (DOT) for citations, tow or removal. The CERT Members are not authorized to:

1. Enforce the Vehicle Code
2. Confront citizens regarding Parking Regulations
3. Remove vehicles illegally parked

When CERT Members encounter illegally parked vehicles the following actions shall be taken:

1. Note the vehicle location, i.e. address, landmark
2. Note the vehicle color make, model, and year
3. Report the items 1 and 2 and the location of the illegally parked vehicle to the DOT Communications Dispatch at 213-485-4184

In the event that the CERT Member encounters a vehicle which is obviously blocking a fire hydrant in the Community Patrol area, CERT Members will notify the DOT MFC SUPERVISOR

For questions regarding the Red Flag Alert Parking Restrictions please refer to website: http://lafd.org/redflag/

When CERT Members witness or observe a fire or other incident within their patrol area they are to report the location of the incident to MFC if it has not been reported:

1. Call 911 via Cell Phone
2. Contact MFC via vehicle radio, or handheld
3. Maintain clear streets, egress / access
4. Do not attempt to extinguish the fire
5. Remain at reporting location
6. Assist IC with incident information after the incident
7. Record observations on ICS-214

- TAKE PICTURE
VEHICLE CHECK LIST

SHOP NUMBER______________________________________

PICKED UP FROM FIRE STATION________________________

PICKED UP BY_______________________________________

DATE & TIME_______________________________________

MILEAGE___________________________________________

LIGHTS:

HEAD LIGHTS________________________________________

TAIL LIGHTS________________________________________

TUNE SIGNALS_______________________________________

BREAK LIGHTS_______________________________________

HAZARD LIGHTS_____________________________________

FLUIDS:

COOLING SYSTEM____________________________________

TRANSMISSION_______________________________________

WINDSHIELD WASHER________________________________

FUEL_______________________________________________

TIRES______________________________________________

DAMAGE____________________________________________

__________________________________________________

__________________________________________________

__________________________________________________

__________________________________________________

ACCIDENT PACKET____________________________________

MAP________________________________________________

FIRE EXTINGUISHER_________________________________
VEHICLE CHECK LIST

OTHER ITEMS IN VEHICLE


VEHICLE Turned INTO

FUEL ADDED

MILAGE

VEHICLE Turned IN BY

DATE & TIME
<table>
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<tr>
<th>6. Resources Assigned:</th>
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<tr>
<td>Name</td>
<td>ICS Position</td>
<td>Home Agency (and Unit)</td>
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<th>7. Activity Log:</th>
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<td>Date/Time</td>
<td>Notable Activities</td>
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8. Prepared by: Name: ___________________ Position/Title: ___________________ Signature: ___________________

Date/Time: ___________________
### ACTIVITY LOG (ICS 214)

1. Incident Name:

2. Operational Period:
   - Date From:
   - Date To:
   - Time From:
   - Time To:

7. Activity Log (continuation):

<table>
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<th>Date/Time</th>
<th>Notable Activities</th>
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8. Prepared by: Name: __________________________  Position/Title: __________________________  Signature: __________________________

ICS 214, Page 2  Date/Time: __________________________
CERT "HYDRATION" UNIT PROCEDURES

- Cell Phones- Preferred method of communication. Keep other members numbers with you and available. You should also have MFC Floor Captain # in case of emergency.
- PPE’s- Always have your equipment with you as well as nourishment.
- If you are unable to report for duty, please call the Disaster Preparedness Section at 818 756-9674, or contact Linda Underwood.
- Accident Packet (F620). These packets are usually kept in the glove boxes of fire department resources that you will be utilizing.
- Sanitation, practice basic sanitation: Gloves, one hand in/out, clean hands.
- Gloves, Nitrile
- Plastic bags to collect empty water and Gatorade bottles. Those should be brought back with you.
- Traffic Cones to control traffic around the vehicle if needed on City surface streets.

Standby

Demobilization

- Return to your reporting location or designated demobilization location.
- Restock: All expendables, i.e. gloves, etc.
- Empty ice chest and secure
- Clean the Plug Buggy in 'and out
- Refuel
- Rehouse
- Check out with Station Commander, ensure Plug Buggy is accounted for.
CERT “HYDRATION” UNIT PROCEDURES

INTRODUCTION
For the purposes of determining whether a CERT Call-Out for the staffing of Hydration unit(s) will occur, the Brush Index (BI) is utilized to gain that information. Components of that index which determine the overall rating are listed below.

<table>
<thead>
<tr>
<th>BI</th>
<th>RATING</th>
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<tbody>
<tr>
<td>0 to 37</td>
<td>LOW</td>
</tr>
<tr>
<td>38 to 47</td>
<td>MODERATE</td>
</tr>
<tr>
<td>48 to 110</td>
<td>HIGH</td>
</tr>
<tr>
<td>111 to 161</td>
<td>VERY HIGH</td>
</tr>
<tr>
<td>162 to 211</td>
<td>EXTREME</td>
</tr>
<tr>
<td>212+</td>
<td>CRITICAL</td>
</tr>
</tbody>
</table>

When the BI rating is “Very High”, a CERT Call-Out will be activated.

CALL OUT
When it is determined that the BI will reach “VERY HIGH” and 95 degrees, the CERT Unit will initiate a Call Out requesting a minimum of “4” CERT Volunteers who have completed the Emergency Vehicle Operations Course (EVOC).

CERT Member will report to one of the following locations as determined in the Call Out Message:
1. Disaster Preparedness Section located at 5021 N. Sepulveda Sherman Oaks,
2. North Division at FS 88
3. South Division at FS 3, or the

Check in with the CERT Unit Commander, Disaster Preparedness Officer (DPO) or a member of the Disaster Preparedness Section.

PROCEDURES
When CERT Members arrive at the stated location and complete Check In, please ensure the following procedures are followed:
- Plug buggies- Check fuel, running lights, and all gauges to ensure proper working order.
- Conduct a complete inventory of the equipment assigned to the Plug Buggy
- Conduct a complete walk around of the vehicle. Note the condition of the vehicle.
- Water- fill ice chests with ample water for the incident
- Gatorade- fill ice chest with ample Gatorade for the incident
- Ice- speak with Fire Station to locate ice machines to fill coolers
- Ice Chest - you should have a minimum of 2 ice chest with drinks
- Maps- either Thomas Guide, personal GPS, or department provided map books
CERT Team Accident Procedures

What do you do if you are in an accident while driving Los Angeles City Fire Department Vehicle?

F-620

Type of accident
Department apparatus or Personal car used on department business involved with civilian can, domestic animal, or property of a third party and Fire Department property with injuries to personnel.

Department apparatus involved with Fire department property and no injuries to personnel.
Department apparatus or personal 1 car used on Department business involved with non-domestic animal.

Notification of M.F.C
- Exact location of accident
- Shop number, type and assignment of apparatus
- Number of injured and assignments of injured Department personnel
- Amount of damage
- Type of assistance needed
- Request commanding Office to be notified
- Request Fire Department investigation office
- Request Police Traffic investigation for all third party accidents

Moving apparatus involved
Use good judgment on moving vehicles prior to the arrival to the investigators
Normally apparatus will not be moved

Assist Investigators
Make no statements either in writing or verbal to anyone except authorized investigator
Cooperate fully with Fire, Police, and City Attorney investigators
Necessary photographs of the accident will be taken by the Police officers, Fire Department.
If the other parties involved in the accident refuse to remain at the scene after being requested to await the arrival of responding investigators, obtain as much information as possible, but do not threaten nor attempt to forcefully restrain.

Packet should contain:
- F6-88 - Report
- F-80 - Store Report
- F-6-89 - Witness Card
- F150 - Accident Report & Packet Instructions
# CITY OF LOS ANGELES

## AUTOMOBILE ACCIDENT REPORT

**Instructions:** This written report must be filed with the City Attorney within 24 hours of a traffic accident, no matter how slight the damage or injury. Any City employee who is involved in an accident while driving a city-owned, rented or mileage vehicle must complete this form.

In case of injury or death immediately contact the City Attorney Claims Division at (213) 978-7050. If after hours, contact the City Hall Operator at 311, (213) 978-3231, or (866) 452-2489.

All City owned vehicles need to be brought to GSD Fleet Services within 5 working days. Call (213) 485-5380 for directions.

**Distribution:** City Attorney & Operating Department get both pages 1 & 2. Send GSD Fleet Services & Personnel Department page 1 only.

### PART I - CITY VEHICLE

<table>
<thead>
<tr>
<th>DATE OF ACCIDENT</th>
<th>TIME</th>
<th>A.M.</th>
<th>P.M.</th>
<th>LOCATION (Street, Freeway)</th>
<th>(City)</th>
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</table>

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<tr>
<th>CITY VEHICLE GOING TO (ADDRESS)</th>
<th>COMING FROM (ADDRESS)</th>
<th>PURPOSE OF TRIP</th>
</tr>
</thead>
</table>

### DRIVER'S NAME

<table>
<thead>
<tr>
<th>RESIDENCE ADDRESS</th>
<th>CITY</th>
<th>ZIP CODE</th>
<th>RES. PHONE NO.</th>
<th>DATE OF BIRTH</th>
</tr>
</thead>
</table>

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<thead>
<tr>
<th>DEPARTMENT/BUREAU</th>
<th>SUPERVISOR'S NAME</th>
<th>BUSINESS ADDRESS (Building and Room No., Section)</th>
<th>MAIL STOP</th>
<th>BUS. PHONE NO.</th>
<th>(Ext.)</th>
</tr>
</thead>
</table>

<table>
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<tr>
<th>MAKE</th>
<th>MODEL</th>
<th>YEAR</th>
<th>EQUIP. NO.</th>
<th>LICENSE NO.</th>
<th>REGISTERED OWNER</th>
<th>DRIVER LICENSE#</th>
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</thead>
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<table>
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<tr>
<th>MILEAGE VEHICLE</th>
<th>IF YES, NAME OF INSURANCE COMPANY</th>
<th>POLICY #</th>
<th>INS. CO. NOTIFIED?</th>
<th>YES</th>
<th>NO</th>
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<tr>
<th>PASSENGER(S)</th>
<th>(Name)</th>
<th>(Address)</th>
<th>City Employee?</th>
<th>YES</th>
<th>NO</th>
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<thead>
<tr>
<th>WAS ANY PERSON IN CITY VEHICLE INJURED?</th>
<th>WAS CITY VEHICLE DAMAGED?</th>
<th>POINTS OF IMPACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
<td>YES</td>
</tr>
</tbody>
</table>

### PART II - OTHER VEHICLE

<table>
<thead>
<tr>
<th>DRIVER'S NAME</th>
<th>ADDRESS</th>
<th>DRIVER LICENSE#</th>
<th>RES. PHONE NO.</th>
<th>AGE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>EMPLOYER</th>
<th>EMPLOYER'S ADDRESS</th>
<th>BUS. PHONE NO.</th>
<th>(Ext.)</th>
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<tr>
<th>MAKE</th>
<th>MODEL</th>
<th>YEAR</th>
<th>LICENSE NO.</th>
<th>REGISTERED OWNER (Name &amp; Address)</th>
<th>POLICY #</th>
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<tr>
<th>PASSERGER(S)</th>
<th>(Name)</th>
<th>(Address)</th>
<th>BUS. PHONE NO. (ext.)</th>
<th>RES. PHONE NO.</th>
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<table>
<thead>
<tr>
<th>WAS OTHER VEHICLE DAMAGED?</th>
<th>PART OF VEHICLE DAMAGED</th>
<th>WAS ANY PERSON IN OTHER VEHICLE INJURED?</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
<td>YES</td>
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</table>

### PART III - PROPERTY DAMAGE (Other than vehicle)

**LIST PROPERTY THAT WAS DAMAGED OR CLAIMED TO BE DAMAGED**

<table>
<thead>
<tr>
<th>OWNER'S NAME</th>
<th>ADDRESS</th>
<th>PHONE NO.</th>
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</table>

**DESCRIBE PROPERTY**

### COMPLETE AND SIGN ORIGINAL ON BOTH PAGES

<table>
<thead>
<tr>
<th>TYPED NAME AND TITLE OF PERSON FILING REPORT</th>
<th>EMPLOYEE SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
</table>

Form Gen. 88 (Rev. 1/06)
### PART IV. WITNESSES

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Bus. Phone No. (ext.)</th>
<th>Phone No. (Residence)</th>
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### PART V. INJURIES

<table>
<thead>
<tr>
<th>Name of Person(s) Claiming Injury</th>
<th>Address</th>
<th>Phone</th>
<th>Sex</th>
<th>Age</th>
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### PART VI. DESCRIPTION OF ACCIDENT

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<thead>
<tr>
<th>LAPD Investigation?</th>
<th>Name of Other Investigating Police Department (If no investigation, indicate &quot;NONE&quot;)</th>
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<tr>
<td>Yes</td>
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<td>No</td>
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#### Traffic Control

**Direction City Vehicle Was Traveling**

- Street
- Speed

**Direction Other Vehicle Was Traveling**

- Street
- Speed
- Speed Limit

#### Weather Condition

- Day
- Night

**Visibility**

- Good
- Poor

Describe the facts of the accident in detail.

#### Diagram of Accident

![Diagram of Accident]

**Legend**

- City Vehicle: CV
- Other Vehicle: OV

**Employee Signature**

**Date**

**Supervisor's Comment**

**Supervisor's Signature**

**Date**

---

Form Gen. 88 (Rev. 1/06)