#### Attachment 2

## **Internal Communications Plan Example**

## (Name) HMA or Complex Wild Horse (and/or Burro) Gather and Removal

(Name) District/Field Office, State (Name), WH&B Specialist/COR, Telephone Number Proposed Gather Date(s)

- **I. INTRODUCTION** (Briefly describe where the gather will be conducted, who will be conducting the gather, the primary capture method(s) to be used, when the gather is expected to start and how long it is expected to take).
- **II. PROJECT LOCATION** (Provide a detailed description of the HMA location, road access and any limitations (i.e., need for 4-wheel drive or high clearance vehicles), temporary holding facility location(s), trap site location(s), available accommodations for BLM and contractor personnel or the public. Also briefly describe other logistical considerations for public observation days).

#### III. INTERNAL COMMUNICATIONS

### **General Gather Logistics:**

- COR: Name, Telephone Number(s)PI(s): Names, Telephone Number(s)

### Management Communications: Describe.

(How will management staff within the State/District or Field Office be kept informed and who is responsible for assuring this happens? Who will be responsible for distributing daily gather reports to key personnel? Who will be responsible for coordinating or preparing early alerts to the State and Headquarters Offices, if necessary?)

#### Public Affairs Communications: Describe.

(Name/telephone number of public affairs staff with responsibility for answering media questions, responding to media contacts, issuing media advisory(s) and coordinating/escorting media during media day, distributing gather and incident reports or other pertinent situation updates?)

#### Law Enforcement: Describe.

(Will law enforcement support be needed? Which Law Enforcement Rangers (names and telephone numbers) will be on call or on-site? If Law Enforcement Rangers will be on call, describe the process which will be used to dispatch them to the gather site, if needed?)

**Medical or Other Emergency**: Describe the process which will be followed in the event of a medical or other emergency.

**Radio Communications:** Describe the radio frequencies which will be used (see example below).

Name	Tx	Rx	Tone
(Name) Scene of Action (SOA)	171.675	171.675	n/a
(Name) Repeater	164.7250	172.575	203.5 Hz

All Federal frequencies must be programmed in narrowband analog mode.

## **Cellular Telephone Communications:** Describe.

(Does the area have good cellular phone coverage? If not, what alternative methods of communication will be used?)

#### Veterinarians: Describe.

(Will the services of a veterinarian be needed on call, or on-site? Who will provide this service and how can they be reached?)

#### Fertility Control: Describe.

(Will fertility control be applied? If so, who are the proposed applicators and how can they be contacted to coordinate fertility control treatment? Will anyone else need to be contacted to coordinate any changes in proposed fertility control treatment?)

#### IV. EXTERNAL COMMUNICATIONS

Public interested in observing the gather will need to coordinate with (Name) @ (telephone number). Public will be escorted by the BLM staff at all times.

1. Public Contacts: Describe.

#### 2. Allotment Permittees: Describe.

(Are there livestock allotments within the gather area? If so, which allotments and have the permittees been notified of the proposed gather?)

## A. INTERNAL PERSONNEL CONTACT LIST (\* To receive daily gather reports.)

#### List of BLM Field Office/Gather Personnel

Name	Title	Work Phone	Home Phone	Cell/Sat. Phone
	WH&B Spec, COR			
	WH&B Spec, Alt COR/PI			
	District Manager*			
	Archaeologist			
	Rangeland Specialist*			
	Dispatch Center			Emergency
	Law Enforcement Officer			

## **BLM** - Other

Name	Title	Work Phone	Home Phone	Cell/Sat. Phone
	WH&B State Lead*			
	Dep. State Dir – Nat Res*			
	Public Affairs Officer*			
	Contracting Officer			
	NPO, Gather COR*			
	Facility Mgr*			
	APHIS Veterinarian			

## **B. OTHERS CONTACT LIST**

## **Other Contacts**

Name	Title	Work Phone	Home Phone	Cell/Sat. Phone
	County Sheriff			
	Sheriff, 24 hr Emerg Dispatch			
	Hospital			
	Gather Contractor			
	Brand Inspector			
	Local Veterinarians (on call)			
	Permittee			
	Motel Names/Numbers			

# **Frequently Asked Questions**

(Consider summarizing the answers to those frequently asked questions as an attachment to the Communications Plan).