

**EMERGENCY MEDICAL TASK FORCE (EMTF) RESPONDER****MEMORANDUM OF AGREEMENT – AVAILABLE ASSETS ADDENDUM****SECTION I. PURPOSE:**

The purpose of the EMTF Responder MOA - Available Assets Addendum is to identify the minimum potential resources or assets being committed by the signing Agency for deployment of EMTF as described in Section II - Activation and Terms of the EMTF Responder MOA.

The minimum resources or assets identified in the Available Assets Addendum will be used for Lead RAC / EMTF planning purposes to facilitate the operational capability of the Task Force. Each Agency will have the option to accept or reject each deployment request. Each Agency will also determine the quantity of assets available for deployment at the time of request. Agencies will have the final decision on whether or not to commit their assets for deployment when requested.

Agency will provide an initial data capture (Section III - Minimum Equipment and Personnel Information) by selecting type of EMTF element and minimum number of personnel or assets the Agency may be able to deploy. Agency will also agree to submission, upon request, of additional data elements and / or updates for appropriate resource availability, tracking, and capability through use of regional crisis application tools including WebEOC for situational awareness and NCTTRAC's regional database, Trauma Service Area – **E Tracking Resources, Alerting, and Capabilities System (E\*TRACS.)** Regional data will be used for planning, notification, and operational readiness to enhance preparedness and response in the event of an emergency. Agency will also be provided access to **E\*TRACS** for its own use for inventory tracking, notifications and alerts, and personnel contacts database.

**SECTION II. AGENCY CONTACT INFORMATION:**

<b>Agency:</b>	Wise County EMS
Agency Name:	249008
DSHS License Number:	P.O. Box 1509
Address: (Street, City, State, Zip)	1101 W. Rose Ave., Decatur, TX 76234
County:	Wise
Point of Contact (POC) Name:	Charles Dillard
Position or Title:	Administrator
POC Phone Number:	940-627-2002 Ext. 222
Alternate Phone Number:	940-393-9789
Fax Number:	940-627-7521
POC Email Address:	crdillard@ems.co.wise.tx.us

**SECTION III. MINIMUM EQUIPMENT AND PERSONNEL INFORMATION:**

**Ambulance Strike Team:** an Ambulance Strike Team (AST) is comprised of five (5) DSHS licensed ambulances and an Ambulance Strike Team Leader (ASTL) in a separate ASTL vehicle. Agencies may provide one (1) or more ambulances, one (1) or more ASTLs, and/or an ASTL vehicle to fulfill deployment requests. *(For full description see EMTF Responder MOA Sec. III - AST, Pg. 4)*

No. of Ambulances: MICU 2 ALS          BLS           
 No. of AST Leaders 2 No. of AST Leader Vehicles 2

**Professional Staff:** certified or licensed professional medical or non-medical staff may be deployed to provide various clinical or support services such as surge response, technical or facilities services for MMUs, Command / General Staff, Ambulance Staging Managers (ASM), Medical Incident Support Team (M-IST), etc. *(For full description see EMTF Responder MOA Sec. IV – Professional Staff IV, Pg. 5)*  
 No. of medical staff 2 No. of non-medical staff           
 Type(s) of Specialty EMT and Paramedic

**Mobile Medical Unit:** a Type I MMU is a fully staffed 16 bed-minimum mobile unit on-duty for 24 hour operations per assigned mission. Agencies must provide a 16 bed-minimum unit with clinical and facilities personnel. Lesser complements of bed capacity and staff are also possible. *(For full description see EMTF Responder MOA Sec. V - MMU, Equip, and Supplies, Pg. 7)*  
 No. of MMUs          No. of beds/MMU          Model           
 No. of clinical staff          No. of facilities/support staff         

**AMBUS:** a deployable AMBUS is a DSHS licensed specialty ambulance bus minimally staffed with one (1) qualified apparatus operator and medical care providers per licensure, one of which must be designated as a crew chief. *(For full description see EMTF Responder MOA Sec. VI - AMBUS, Pg.8)*  
 No. of AMBUS(es)         

NCTTRAC will not be responsible for vehicle or equipment repair or maintenance costs associated with EMTF deployment. Any request for reimbursement associated with vehicle or equipment repair or maintenance will be submitted to DSHS and reimbursed according to approved costs outlined in the MOA and Mobilization Order. Agency agrees to update NCTTRAC immediately upon any changes in contact information and in any substantive changes in equipment and personnel assets attested to within this Addendum. NCTTRAC will update Agency immediately upon any changes in Lead RAC / EMTF points of contact.

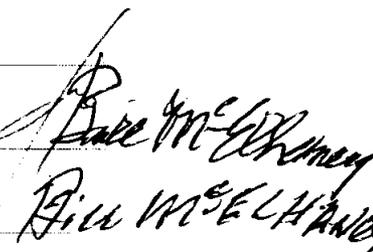
**SECTION IV. ACCEPTANCE OF AGREEMENT:**

IN WITNESS WHEREOF and acknowledging acceptance and agreement of the foregoing, the Parties affix their signatures hereto.

Lead RAC: NCTTRAC

North Central Texas Trauma Regional  
 Advisory Council  
  
 Signature  
 Hendrik J. Anderson  
 Printed Name  
 Executive Director  
 Title  
 27 Sept 12  
 Date

AGENCY

Wise County EMS  
 Agency Name  
  
 Signature  
 Charles Dillard  
 Printed Name  
 Administrator  
 Title  
 8-27-2012  
 Date  
  
  
 County Judge  
 10/15/12