

OPERATIONAL PLAN (Exhibit A)

MUTUAL AID AGREEMENT

**ANCHOR POINT FIRE & EMERGENCY MEDICAL SERVICE AREA /
NINILCHIK EMERGENCY SERVICES**

This Operational Plan of the Kenai Peninsula Borough (KPB) between Anchor Point Fire & Emergency Medical Service Area (APFEMSA) and Ninilchik Emergency Services (NES) is for mutual aid response, the exchange of emergency services equipment and personnel.

The purpose of this Plan is to outline the procedures for carrying out a mutual aid response between APFEMSA and NES. This Plan is a guide for day-to-day operations, and may be revised, amended or altered annually by mutual consent of APFEMSA and NES, with approval by the KPB Mayor, for the purpose of carrying out the original intent of the mutual aid agreement. In addition, this Plan may be cancelled by the Borough (on behalf of APFEMSA) or by NES by giving 30-day written notice to the other party involved in the Agreement.

I. AMOUNT AND TYPE OF ASSISTANCE

- a. For fire responses, APFEMSA will provide a tanker/engine company with a minimum crew of four for response to an incident scene, or as requested by the NES On-Scene Incident Commander (OIC). The NES OIC retains the option to direct the responding department to any other location as needed within the NES jurisdiction.
- b. An APFEMSA medic unit may be requested within the NES jurisdiction. The response will be at least a BLS unit with a minimum of two personnel. Upon dispatch, the NES OIC may alter the manning level of apparatus to best suit the needs of call.
- c. For fire responses, NES will provide a tanker/engine company with a minimum crew of four for response to an incident scene, or as requested by the APFEMSA OIC. The APFEMSA OIC retains the option to direct the responding department to any other location as needed within the APFEMSA jurisdiction.
- d. A NES medic unit may be requested within the APFEMSA jurisdiction. The response will be at least a BLS unit with a minimum of two personnel. Upon dispatch, the APFEMSA OIC may alter the manning level of apparatus to best suit the needs of call.
- e. Upon dispatch, the responding department will respond to the location provided by requesting department's OIC unless directed to respond to a different location.

- f. Cancellation may occur per the requesting department's OIC as with small, uncomplicated incidents that may be false alarms, out on arrival, out immediately after arrival, no injuries, etc.

II. TRAINING

Joint training exercises shall be carried out annually under the direction of the Chief or the Chief's Operations or Training Officers in each department. Classroom instruction should be available upon request by each department, and should include ICS and unified command exercises.

III. COMMUNICATIONS

- a. RADIO – Dispatch will tone out the Mutual Aid request as instructed by the requesting department's OIC. Mutual Aid will occur as directed by either department for any incident it may be needed. The responding department, after notifying dispatch that they are en route, will switch to the requesting department's dispatch channel and advise the OIC they are en route.
- b. The responding department will communicate with the OIC unless advised otherwise.
- c. Radio traffic will be kept to a minimum.
- d. Clear text will be used at all times.

IV. INCIDENT REPORTING

Each department shall be responsible for reporting the incident in accordance with their department policy and procedures and, in the case of APFEMSA, in accordance with Borough policy and procedures.

V. REVISIONS

The Annual Operations Plan shall be cooperatively developed, reviewed annually and become part of the Mutual Aid Agreement upon consent of the departments and execution by the Borough Mayor.

ANCHOR POINT FIRE & EMERGENCY
MEDICAL SERVICE AREA

By: Alford Terry
Alford Terry, Chief

Date: 2/16/17

NINILCHIK EMERGENCY SERVICES

By: David Bear
David Bear, Chief

Date: 2/20/17

**ANCHOR POINT FIRE & EMERGENCY
MEDICAL SERVICE AREA BOARD**

By: Robert W Chung
Chair

Date: 3-17-17

**NINILCHIK EMERGENCY SERVICES
BOARD**

By: Steve Vanek
President

Date: 2/17/17

KENAI PENINSULA BOROUGH

By: _____
Mayor

Date: _____

ATTEST:

By: _____
Borough Clerk

APPROVED as to Form and Legal
Sufficiency

By: _____
Assistant Borough Attorney