

# Virginia State Animal Response Team

## Community Animal Response Team (CART) General Information and Response Capability Statement

**Purpose:** The purpose of this form is to gather information that will be reviewed by the Virginia State Animal Response Team Board of Directors in order to assess each CART's resources and capabilities. This helps the VASART BOD, State Veterinarian and local emergency managers understand the animal care skills and resources available to them in an emergency. *Please note that it is a CART leader's responsibility to alert the local emergency manager and VASART BOD in regard to any changes associated with this information, especially any changes that would affect the team's capabilities if deployed.*

### General Information

1. County/City/Community: \_\_\_\_\_

2. Team Leader:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ (o)

\_\_\_\_\_ (h)

\_\_\_\_\_ (cell)

Email address: \_\_\_\_\_

3. Team Members:

Name: \_\_\_\_\_

Role: \_\_\_\_\_

Name: \_\_\_\_\_

Role: \_\_\_\_\_

Name: \_\_\_\_\_

Role: \_\_\_\_\_

Name: \_\_\_\_\_

Role: \_\_\_\_\_

Name: \_\_\_\_\_

Role: \_\_\_\_\_

Name: \_\_\_\_\_

Role: \_\_\_\_\_

4. Local Emergency Manager:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

5. Has the CART's team leader met with the local emergency manager to discuss integrating animal response as part of the locality's emergency response plan?

Yes

No

6. Has the team leader initiated a written plan detailing emergency response needs, roles and responsibilities specific to animals in that locality? Or has the locality written a plan that can be shared and possibly updated?

Yes

No

7. Will any other team member be assuming any specific leadership roles during a disaster (i.e. safety officer, public information officer, logistics chief etc.)? If so, please identify that person and specify the training that person has completed germane to that leadership role.

8. Are any team members interested in training associated with leadership roles in the areas of safety, operations, logistics, training, public information or administration?

Yes

No

If no, go to question #10.

9. If so, has this been brought to the attention of the county emergency manager or the State Veterinarian's Office?

Yes

No

**Response Capabilities**

10. What is the scope of services your team will be able to provide? (Check all that apply).

Animal Sheltering  
Veterinary Medical Clinical Services (VMCS)\*  
Animal Rescue\*\*

- Large Animal
- Small Animal
- Large and Small Animal

Disease Outbreak/Depopulation  
Other (please describe below)

For each service, please detail below the number and type of animals your CART can provide services for. Please also estimate the number of days/weeks that your CART would be able to offer these services before requiring additional assistance.

\*VMCS includes services that are performed by or under the direct supervision of a licensed veterinarian or, in some cases, a licensed veterinary technician. These services may be broad (e.g. a full service veterinary hospital or a field hospital that has a range of preventative, diagnostic and treatment capabilities) or more basic (e.g. the ability to perform basic emergency procedures like suturing wounds, splint/cast placement, bandaging and basic first aid). Please give as much detail as possible concerning the types and kinds of VMCS your team can offer (or has access to). Please also include whether those capabilities are available regardless of where your team is deployed or is only available if your team is deployed in your community.

\*\*If your team's scope of services include animal rescue, please offer as much detail as possible about the specific type of rescue, number of team members who would be involved in rescue activities and the experience, qualifications and training those team members have in this area.

11. What type of services is your team NOT able to provide? (Please provide as much detail as in regard to either the type of service as listed in question #10 that your CART would not be able to provide or type of animals your CART would not be able to provide services for.)

12. What resources (i.e. facilities, equipment, pharmaceuticals, local support agencies/groups) do you have available to support your CART's response capabilities? (Please be as specific and detailed as possible.)

13. How and where will supplies/equipment/pharmaceuticals maintained by this CART be stored and how will inventory be maintained?

14. Are any members of the team willing to be deployed outside the local community? If so, please identify them below.

\_\_\_\_\_  
Team Leader Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Emergency Manager Signature

\_\_\_\_\_  
Date