**AGREEMENT TO PROVIDE PHYSICAL FACILITIES FOR TEMPORARY SHELTER**

THIS AGREEMENT (Agreement) is entered into as of this day of \_\_2018 by and between Gallatin Nursing and Rehab , (the FACILITY) and Gallatin County School District , (the SHELTER) for the provision of physical facilities to serve as a temporary shelter for the residents of the FACILITY in the event of the need for emergency evacuation of the FACILITY.

RECITALS

1. The FACILITY is a Skilled Nursing Facility, with census at full capacity of

 120 .

1. The SHELTER is a school gymnasium, that has the capacity to temporarily accommodate , and the FACILITY’s staff who care for those residents.

AGREEMENT

In consideration of the mutual promises in this Agreement, The FACILITY and the SHELTER agree as follows:

* 1. **Nature of Services.** The SHELTER is not a nursing facility, health care facility, or residential facility licensed by the State of Michigan.
		1. The SHELTER will provide the following physical facilities to the FACILITY on a temporary basis:
			+ Space sufficient to accommodate beds, sleeping arrangements, residents, and the FACILITY staff who provide care for the residents.
			+ Restrooms
			+ Electricity to provide light and to supply power to necessary medical devices and/or equipment to care for the residents.
			+ A potable water source or space to accommodate water reserves.
		2. The SHELTER’s physical facilities will only include the aforementioned services and do not include:
			+ Staffing
			+ Supplies
			+ Medical care
			+ Food or water (other than city services)
			+ Clothing
			+ Beds or linen
			+ Transportation
		3. The FACILITY will be responsible for providing food, clothing, beds, linen, appropriate medical and other supplies, transportation, appropriate equipment, staff, and medication (if appropriate) or arranging for these services and provisions.
	2. **Availability of SHELTER.** As part of the emergency nature of the services required by the FACILITY, the SHELTER agrees to be available as provided in the AGREEMENT at any time, 24 hours/day, seven days/week.
		1. The FACILITY will designate a contact person (or designee) who will notify the SHELTER of the need for its services.
		2. The SHELTER will designate a contact person (or designee) who will ensure that the SHELTER is available for use by the FACILITY in the case of an emergency at any time, 24 hours/day, seven days/week.
		3. In the alternative, the SHELTER and the FACILITY will agree on a designated contact person or designee who will have access to the SHELTER in the event of an emergency at any time, 24 hours/day, seven days/week.
		4. In the event of an emergency, the services of the SHELTER will be necessary for a period not to exceed seven (7) days and it has been deemed safe for the residents to return to the FACILITY, or the residents have been placed in an alternative setting.
		5. The FACILITY agrees to make a good faith effort to utilize the SHELTER only as long as necessary and make a good faith effort to transfer residents to alternative placement as quickly as safely possible.

3.0 **Insurance coverage.** The Facility agrees to maintain premises liability insurance.

4.0 **Indemnification.** The FACILITY agrees to indemnify and hold the Shelter harmless for all claims and damages for all negligent acts or omissions arising out of or as a result of the performance of this AGREEMENT.

* 1. **Fees.** The FACILITY agrees to pay the SHELTER at a rate of $ 200.00 per day to maintain the SHELTER in a position to accommodate all the terms of this AGREEMENT.
	2. The FACILITY agrees to reimburse the SHELTER for additional expenses incurred during the use of its facilities, including janitorial services.
	3. **Entire Agreement.** This Agreement contains the entire Agreement between parties.
	4. Any amendments to this Agreement must be made in writing and signed by both parties.

7. **Applicable Law.** This Agreement and any disputes relating to it shall be construed under Kentucky Law.

7.1 If any of the provisions in this Agreement are determined to be in violation of State or Federal law, said provisions shall be interpreted so as to be in compliance with such law or said provisions shall fall out of this Agreement, but otherwise, the Agreement shall be unaffected and shall remain in full force and effect.

IN WITNESS WHEREOF, the parties have executed this Agreement effective as of the date stated above.

 Gallatin Nursing and Rehab

By:

Its: Administrator

 Gallatin County School District

By: Its:

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