

**Vermont**  
**Veterans Home**  
*Community*  
*Wide*  
*Agreement*

# Memorandum of Agreement

## Transportation services for evacuation of Vermont Veterans Home

Between: Vermont Veterans Home

And Dufour Tours

### 1. Purpose

The purpose of this Memorandum of Agreement (MOA) is to establish a mechanism whereby through which Dufour Tours (hereafter referred to as the Transportation Company) agrees to support Vermont Veterans Home and work together as cooperating parties during emergency evacuations.

### 2. Description

Vermont Veterans Home and the Transportation Company enter into this MOA in good faith for the provision of transportation services to support evacuation orders issued as a result of natural, technological or human-caused disaster. The following is representative of, but not limited to, the principle tasks the Transportation Company might be activated to accomplish:

- a. Transport evacuees from at-risk areas to reception centers, shelters or other safe havens
- b. Modify existing transportation services to better serve the transportation needs of evacuees
- c. Modify existing transportation policies (e.g. fare policies, pets on vehicles, securement of mobility devices) to better accommodate the needs of evacuees (including people with access and functional needs)
- d. Return evacuees from safe havens to to their residences (re-entry).

### 3. Deployment Activity

This agreement may be activated only by notification by the designated Incident Commander (IC) or his/her designee. Deployment activation, pursuant to this MOA, may occur at any time, day or night, including weekends and/or holidays; including 24/7 continuous service.

Upon acceptance of deployment, the Transportation Company will have equipment en route to the designated location within 120 minutes from the time it receives the official deployment notification from the IC or his/her designee. For reimbursement purposes, mission tasking will begin when the Transportation Company's personnel checks in at the incident Staging Area and will conclude when the deployment authorization has been met or the IC and/or his designee issues demobilization orders for the resource(s).

### 4. Terms

- a. This agreement shall be in full force and effect beginning the date of execution.
- b. This agreement will be renewed automatically unless terminated pursuant to the terms hereof
- c. This agreement will be reviewed yearly.
- d. Transportation Company personnel who respond must be in good standing with the company, and up to date on all requisite licensing and permitting
- e. Deployed Transportation Company personnel must abide by all federal, state and local laws
- f. All deployed personnel from the Transportation Company will be properly identified by uniform and employer identification card with photo.
- g. The Transportation Company will only deploy staff upon receipt and under the terms of the official deployment notification(s) as described in Section 3.
- h. The Transportation Company must provide detailed records certifying miles and hours of service provided.

**5. Cost Reimbursement**

In the event that this Agreement is activated and Transportation Company assets are deployed, the Transportation Company may invoice Vermont Veterans Home based on the total allocated cost per mile and cost per hour.

**6. Method for reimbursement**

- a. Vermont Veterans Home will provide a method for submitting the required information for invoicing as part of the initial notification.
- b. The Transportation Company must submit accurate paperwork, documentation, receipts and invoices to Vermont Veterans Home within 30 days after demobilization.
- c. If Vermont Veterans Home determines that the Transportation Company has met all requirements for reimbursement, they will reimburse the Transportation Company within 30 days of receiving a properly executed reimbursement request.

**7. Resource estimates**

In order for Vermont Veterans Home to properly plan for transportation needs for disaster response, the Transportation Company estimates the following resources could be made available by the Transportation Company:

- # School Buses \_\_\_\_\_
- # Handicapped buses \_\_\_\_\_
- # Staff that may be made available \_\_\_\_\_

**8. Contract Claims**

This Agreement shall be governed by and constructed in accordance with the laws of the state of Vermont as interpreted by Vermont courts. However, the parties may attempt to resolve any dispute arising under this Agreement by any appropriate means of dispute resolution.

**9. Hold Harmless/Indemnification**

The Transportation Company will hold harmless and indemnify Vermont Veterans Home against any and all claims for damages, including but not limited to all costs of defense including attorneys fees, all personal injury or wrongful death claims, all worker's compensation claims, or other on the job injury claims arising in any way whatsoever from transportation of the public, including individuals with access and functional needs; during the disaster evacuation or re entry to their residence(s).

**10. Acceptance Agreement**

A Transportation Company offering to enter into this MOA shall fully complete this MOA with information requested herein, sign two originals of a fully completed MOA, and sent both via regular US mail.

In addition, a copy of the MOA, signed and fully completed by the Transportation Company, shall be faxed or sent to Vermont Veteran Home.

As noted, by the signature (below) of the Transportation Company or its authorized agent, the Transportation Company agrees to accept the terms and conditions as set forth in this Agreement, agrees to abide by the requirements for reimbursement and waives the right to file a claim to be reimbursed for any amount above the payment schedule amount, as outlined herein. All amendments of this MOA must be in writing and agreed to by the Transportation Company and Vermont Veterans Home.

**Dufour Tours**  
272 Benmont Avenue  
Bennington Vermont 05201  
802-442-5995-phone  
802-442-5561-fax

\_\_\_\_\_  
Signature of Company Representative or Authorized Agent:

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Date

**Vermont Veteran Home**  
325 North Street  
Bennington, Vermont 05201  
802-442-6353-phone  
802-447-6466-fax

\_\_\_\_\_  
Signature of Administrator

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Date

# Community Wide Evacuation

## Contact at Receiving Facility:

### ***Center for Living and Rehabilitation***

Enter thru main entrance into connector, proceed to Main lobby and check in at the desk (staffed daily from 8-4:30), if no one is there go back thru the connector past the elevators to Rockwell nurses station for further assistance.

### ***Centers for Nursing and Rehabilitation***

Enter thru the Main entrance and check in at the desk in the lobby, if no one is there then proceed to one of the nursing units for assistance.

### ***Crescent Manor Rehabilitation***

Enter thru the main entrance and proceed to the main office, if no one is there then go right to the South/West Nurses station for assistance.

### ***Bennington Health and Rehabilitation***

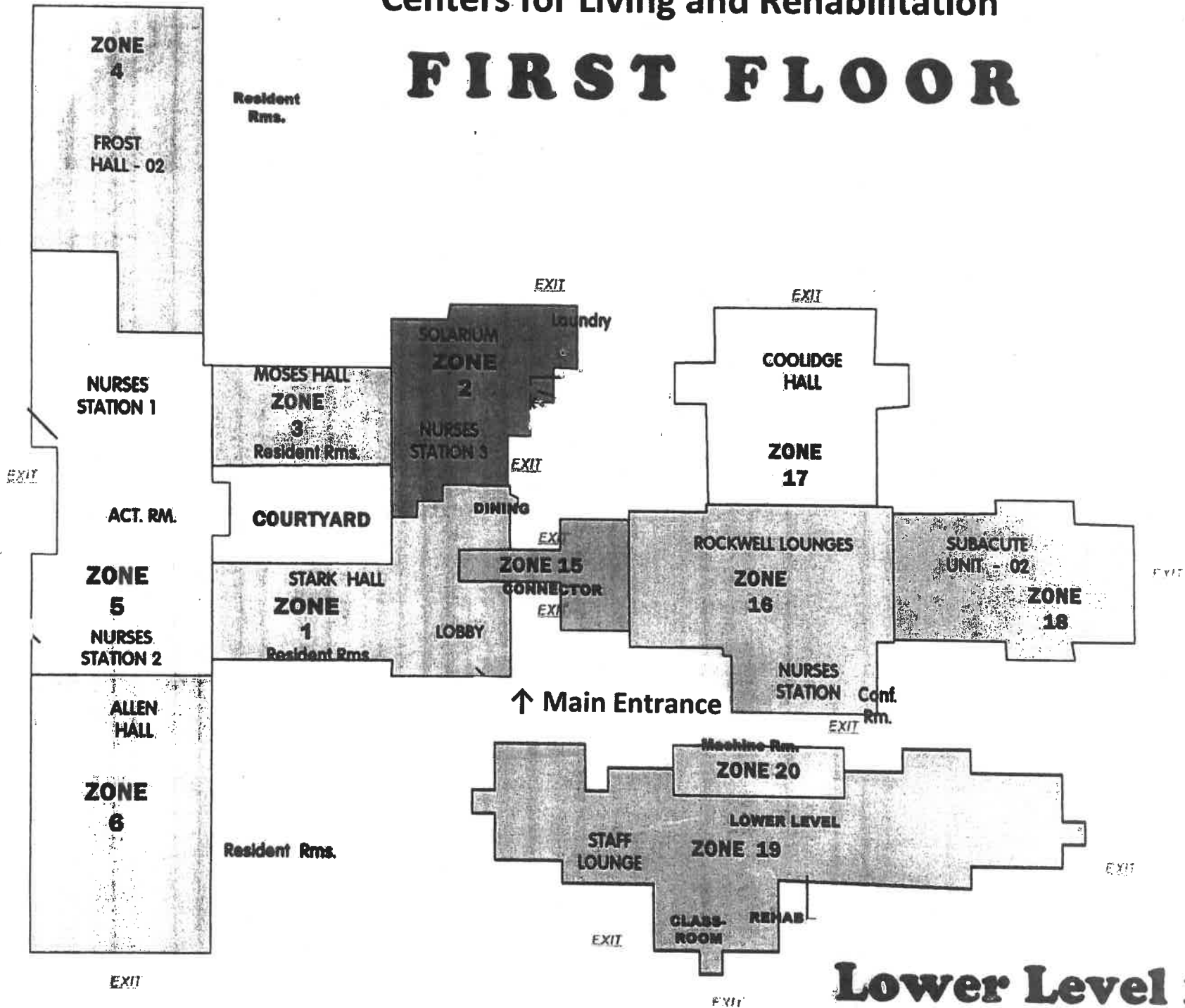
Check in at the main office

### ***Vermont Veterans Home***

Check in at the main office

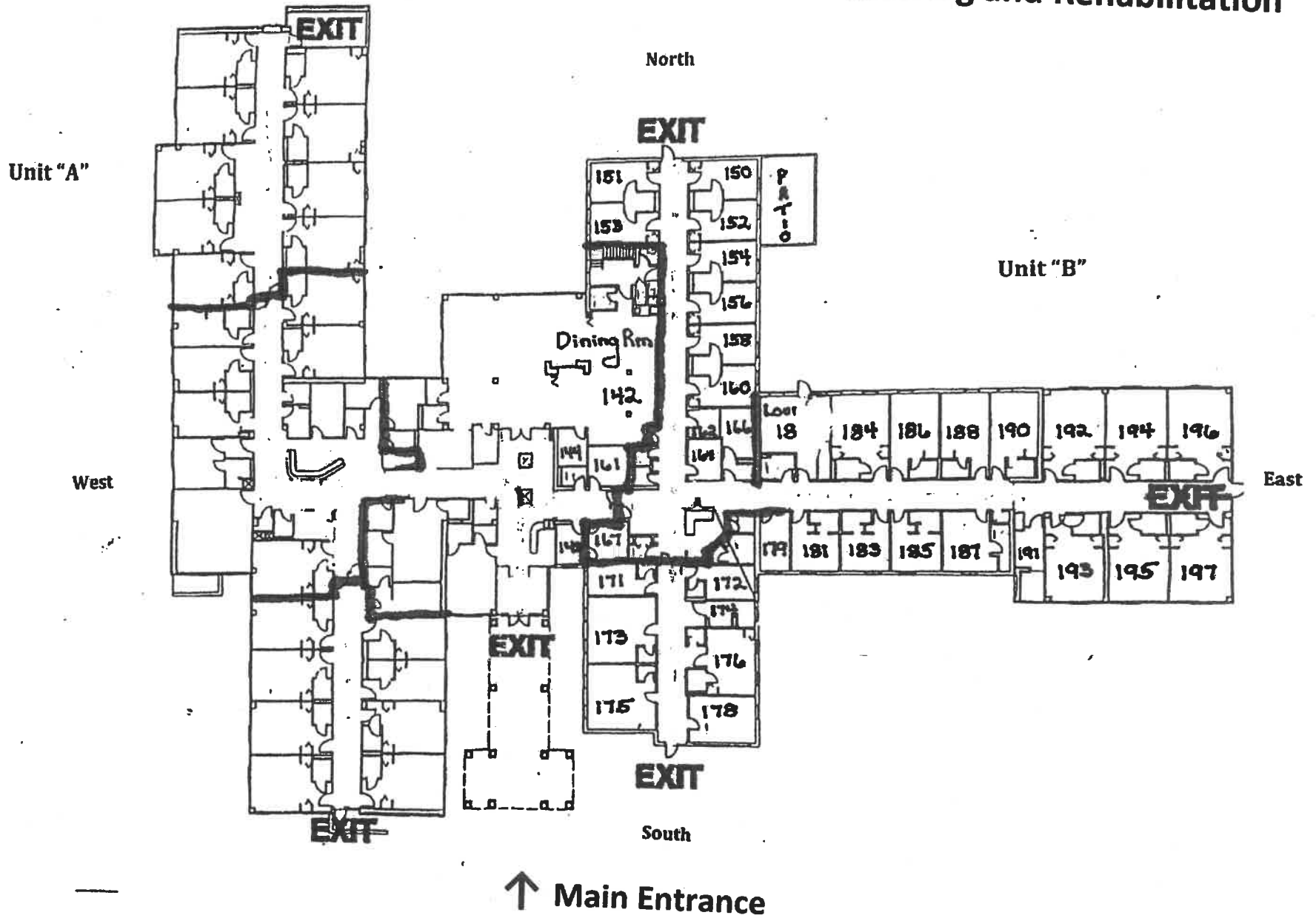
# Centers for Living and Rehabilitation

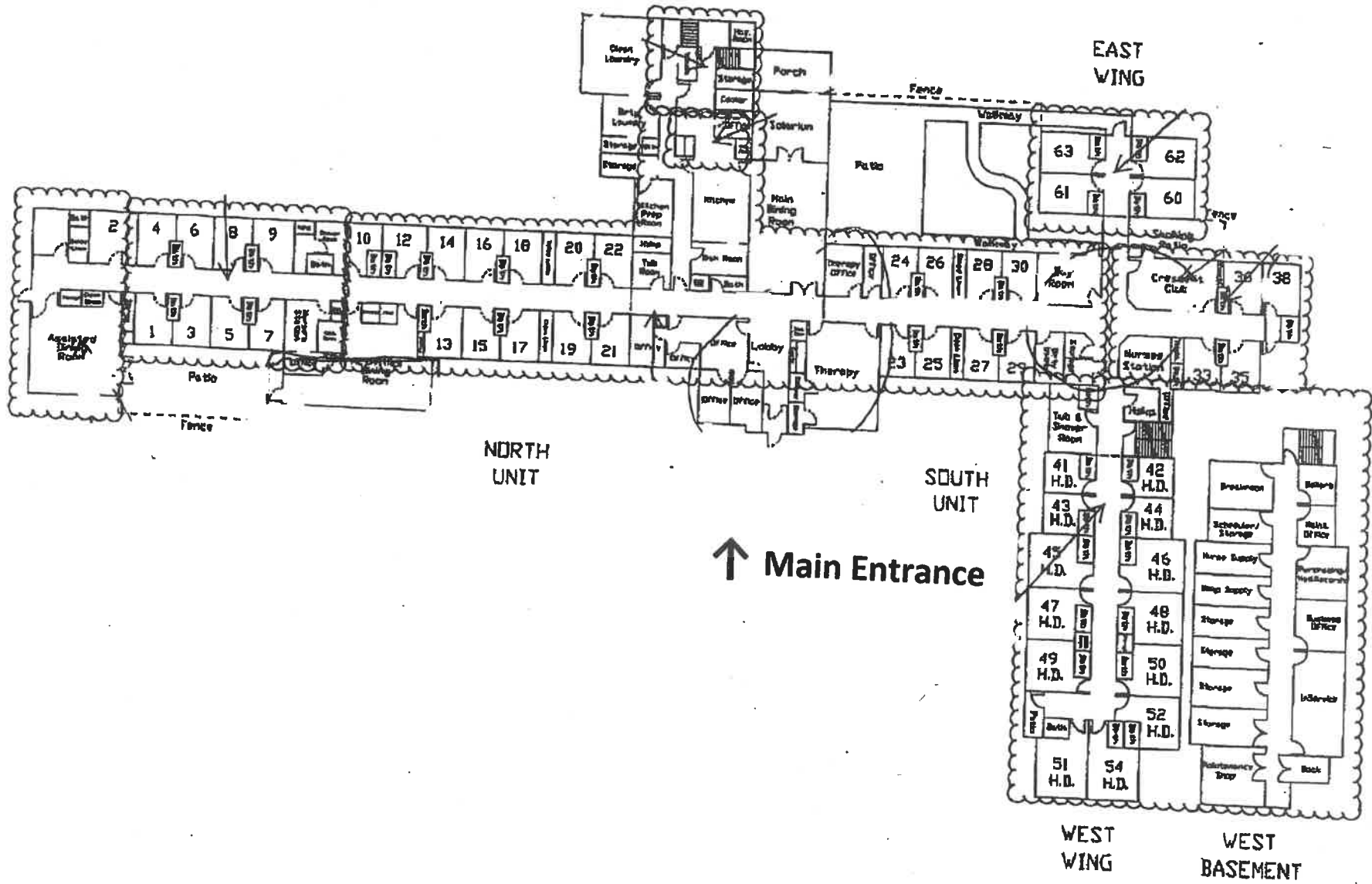
# FIRST FLOOR



# Lower Level 1

# Centers for Nursing and Rehabilitation

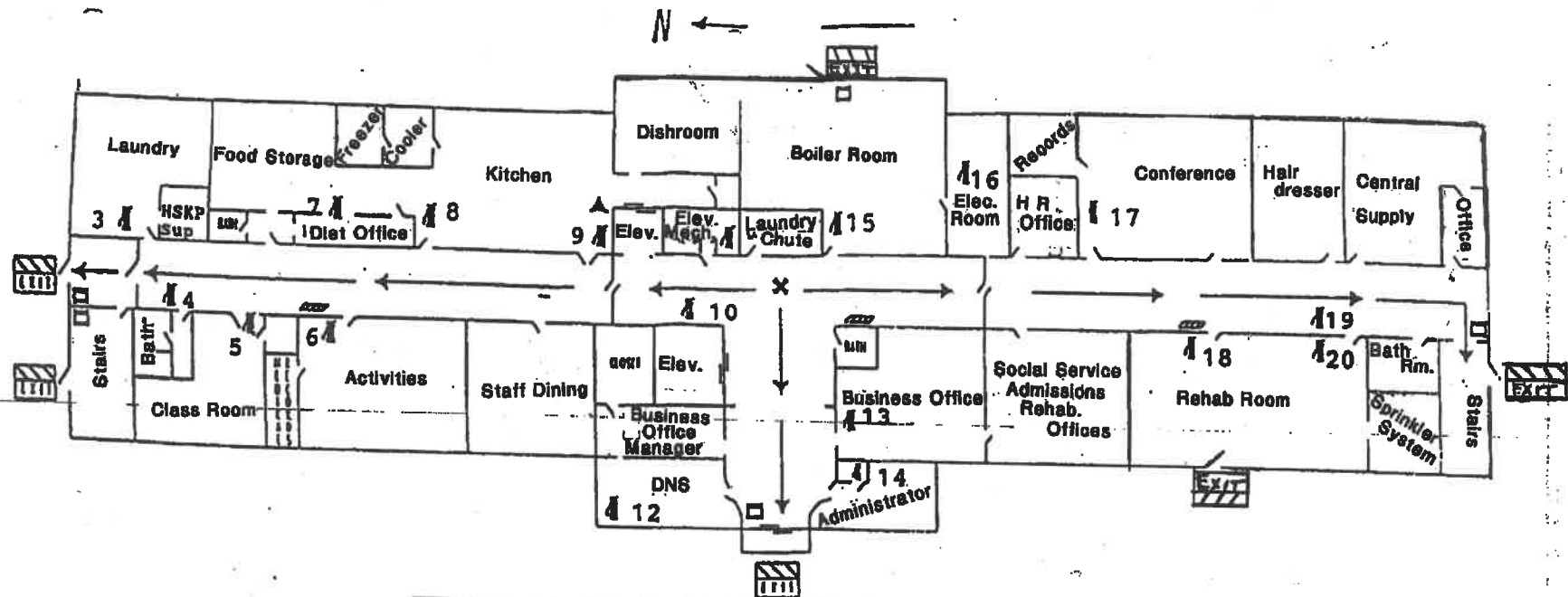




Crescent Manor Care Center 312 Crescent Blvd. Bennington VT 05201

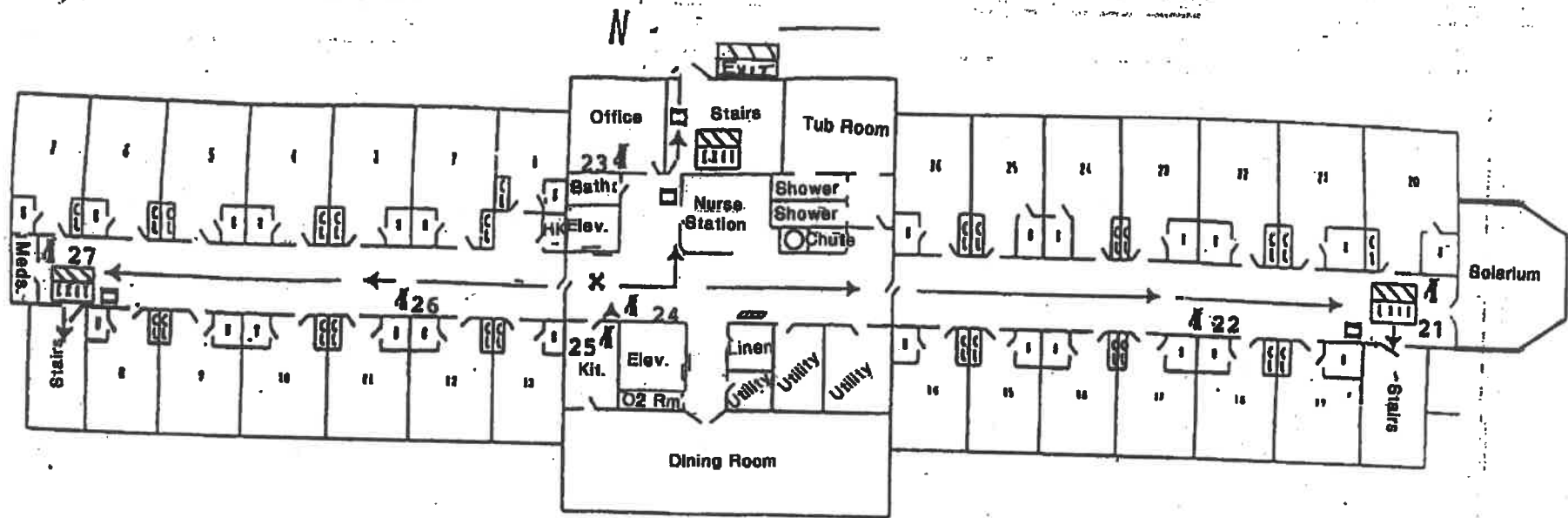
Date	Drawing Name	Drawn By	Scale
1/10/2014	Building Layout with West Basement	Louis Tobin	





BENNINGTON HEALTH AND REHAB CENTER FIRE AND EMERGENCY EVACUATION PLAN AND LEGEND	
1	FIRE EXTINGUISHER ABC
2	FIRE EXTINGUISHER HALON
□	PULL STATION
▨	FIRE HOSE CONNECTION
∠	FIRE DOORS
—	EMERGENCY EXIT ROUTE
▲	FIRE BLANKET

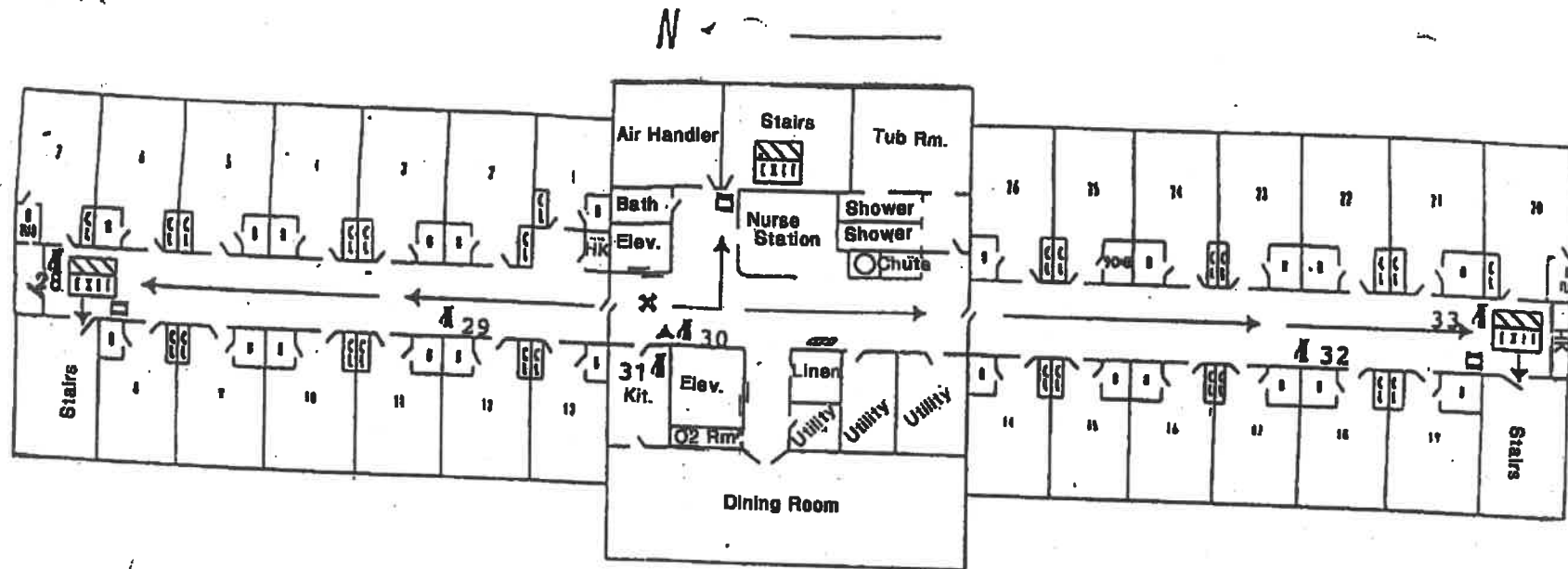
FIRST FLOOR



<b>BENNINGTON HEALTH AND REHAB CENTER FIRE AND EMERGENCY EVACUATION PLAN AND LEGEND</b>	▲	FIRE EXTINGUISHER ABC
	▲	FIRE EXTINGUISHER HALON
	□	PULL STATION
	—	FIRE HOSE CONNECTION
	⌋	FIRE DOORS
	←	EMERGENCY EXIT ROUTE
	▲	FIRE BLANKET

SECOND FLOOR

9-8-17



<b>BENNINGTON HEALTH AND REHAB CENTER FIRE AND EMERGENCY EVACUATION PLAN AND LEGEND</b>	▲	FIRE EXTINGUISHER ABC
	▲	FIRE EXTINGUISHER HALON
	□	PULL STATION
	▨	FIRE HOSE CONNECTION
	⚡	FIRE DOORS
	—	EMERGENCY EXIT ROUTE
	▲	FIRE BLANKET

THIRD FLOOR

9-8-17

# Community Wide Agreement

## Agenda

### Introduction

- Identify purpose of the meeting
- Introduction of each facility

### Review Community Wide Agreement

- Community Agreement
- Bus Agreement
- Community Wide Transport Agreement
- Community Wide Evacuation Agreement
- Floor plans

### Open Discussion

# Nursing Home Evacuation

## Facility Email

Centers for Living and Rehab	Suzanne.anair@svhealthcare.org
Bennington Health and Rehab	wendy.beatty@genesishcc.com
Crescent Manor	mliese@crescentmanor.com
Vermont Veterans Home	melissa.jackson@vermont.gov
Centers for Nursing and Rehab	

## COMMUNITY WIDE TRANSFER AGREEMENT

This is a mutual agreement between local facilities to provide assistance in the event an evacuation of either facility is required.

*Please note that each resident's original "home" facility is ultimately responsible for ensuring appropriate care and services for those residents remaining under the care of the said facility, regardless of the resident's relocation status during a disaster. All costs incurred for care and services provided are the responsibility of the resident's "home" facility.*

The **Evacuating Facility responsibilities** include, but are not limited to:

- Promptly notify the Sheltering Facility of the potential to evacuate
- Promptly notify the Sheltering Facility when the decision to evacuate has been made
- Evacuate residents, utilizing own resources, to the Sheltering Facility
- Supplement the Sheltering Facility's staff
- Provide the following items:
  - Resident medications and medication storage unit
  - Medical supplies and equipment
  - Food and water
  - Medical records
  - Blankets as needed
  - Staff

- The **Sheltering Facility responsibilities** include, but are not limited to:
  - Provide a person of contact upon notification of imminent evacuation
  - Receive residents and direct to area where they will be sheltered
  - Coordinate appropriate use of medical supplies and services
  - Integrate Evacuating Facility's staff into resident care planning
  - Integrate Evacuating Facility's kitchen staff
  - Provide dietary needs using food supplies from Evacuating Facility

In the event of a disaster or other emergency that damages any of the other facilities, the senior management of the facilities will determine to what extent each facility may assist the other.

This agreement is effective upon signature of the facility administrators.

This agreement shall be automatically renewed on a month to month basis without action by either facility. Any party may terminate this agreement with a thirty (30) day written notice.

The agreement should be reviewed yearly by the administrators/senior management.


The agreement will be updated with new signatures every 3 years.

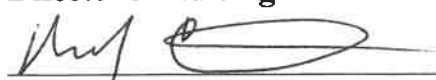
Facility	Telephone Number	Number of transfers facility can accept
Center for Living and Rehabilitation	802-447-1547	
Crescent Manor Rehabilitation	802-447-1501	
Bennington Health & Rehabilitation	802-442-8525	20 69
Vermont Veterans Home	802- <del>442-6353</del> 447-6510	5-10
Centers for Nursing and Rehabilitation	518-686-4371	

# Vermont Veterans Home Signature Sheet

Center for Living and Rehabilitation

  
\_\_\_\_\_  
Administrator Date 09062018

  
\_\_\_\_\_  
Director of Nursing Date 9/6/18

  
\_\_\_\_\_  
Other Date 9/06/18

Vermont Veterans Home

  
\_\_\_\_\_  
Administrator Date 9/6/18

  
\_\_\_\_\_  
Director of Nursing Date 9/6/18

  
\_\_\_\_\_  
Other Date 9/6/18

  
\_\_\_\_\_  
Other COO Date 9/6/18

Bennington Health & Rehabilitation

  
\_\_\_\_\_  
Administrator Date 9.6.18

\_\_\_\_\_  
Director of Nursing Date

  
\_\_\_\_\_  
Other Date 9-6-18

Crescent Manor Rehabilitation

  
\_\_\_\_\_  
Administrator Date 9/6/18

  
\_\_\_\_\_  
Director of Nursing Date 9/6/18

  
\_\_\_\_\_  
Other Date 9/6/18

Center for Nursing & Rehabilitation

\_\_\_\_\_  
Administrator Date

\_\_\_\_\_  
Director of Nursing Date

\_\_\_\_\_  
Other Date

# Community Wide Transport Agreement

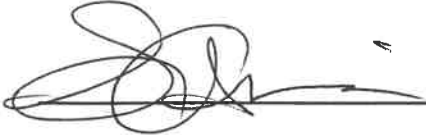
## Purpose of Agreement

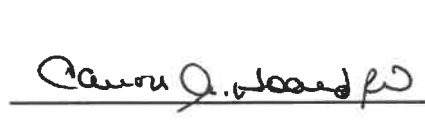
This agreement is to ensure the safe transportation of the residents/patients in the case of an evacuation from the facility being evacuated to the facility receiving those residents/patients.


As part of The Community Wide Transfer Agreement the representatives from these facilities agree that in the case of an evacuation the transport vehicles and operators from their respective facilities will be utilized to assist with the evacuation and possible subsequent transfer/transportation to another facility.

Should evacuation occur requiring transportation the evacuating facility will notify the other Community Wide members for assistance; If able to assist, then the transport vehicle/operator will be available and at the evacuating facility within 120 minutes. Instructions will be given to them when they arrive by the Administrator-on-call or designee.

## Centers for Living and Rehabilitation

 Administrator signature/date  
09062018

 Other signature/date

 Other signature/date

2018


## Crescent Manor Rehabilitation

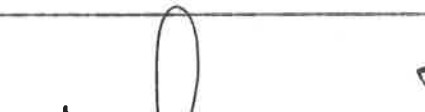
 Administrator signature/date  
9/6/18


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Dor  
9/6/18


 Other signature/date  
9/6/18

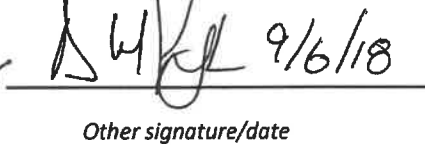
## Vermont Veterans Home


 Administrator signature/date  
9/6/18

 Other signature/date  
9/6/18


 Other signature/date  
9/6/2018

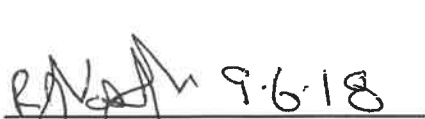
 Administrator signature/date  
9/6/18

 Other signature/date  
9/6/18

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9/6/2018

## Bennington Health and Rehabilitation

 Administrator signature/date  
9.6.18

 Other signature/date  
9.6.18

Other signature/date

## Centers for Nursing and Rehabilitation

Administrator signature/date

Other signature/date

Other signature/date



