Loudonville Assisted Living Residence
Addendum to Special Needs Residency Agreement

This is an addendum to a Residency Agreement made between the Loudonville Assisted Living Residence (the "Operator"), _____,(the "Resident or You"), _____(the Resident's Representative"),_____(the "Resident's Legal Representative"). Such residency agreement is dated_____.

Residency Agreement is dated_____

This addendum adds new sections and amends, if any, only the sections specified in this addendum. All other provisions of the Residency Agreement shall remain in effect, unless otherwise amended in accordance with this Agreement. This addendum must be attached to the Residency agreement between the parties.

Special Needs Assisted Living Certification

The Operator is currently certified by the New York State Department of Health to provide Special Needs Assisted Living at the Loudonville Assisted Living Residence, 298 Albany Shaker Road, Loudonville, NY 12211.

I. Request for and Acceptance of Admission

You or Your Representative or Legal Representative have requested that You become a Resident at this Special Needs Assisted Living Residence (the "Residence") and the Operator has accepted such request.

II. Request for and Acceptance of Admission

You or Your Resident Representative or Legal Rep have requested that You become a Resident at this Special Needs Assisted Living Residence (the Residence") and the Operator has accepted such request.

III. Specialized programs, Staff Qualifications and Environmental Modifications

Attached as Exhibit S.N. #1 and made a part of this Agreement is a written description of:

- Specialized services to be provided in the Special Needs Residence;
- Staffing Levels
- Staff education and training work experience, and any professional affiliations or special characteristics relevant to serving persons with specific special needs.
- Any environmental modifications that have been made to protect the health, safety and welfare of residence.

APPROVED BY
DIVISION OF ADULT CARE FACILITY & ASSISTED LIVING SURVEILLANCE
NYSDOH REGIONAL OFFICE
INITIALS JP DATE 4 / 25 / 19

IV. Aging in place

We, the undersigned, have read this Addendum Agreement, have received a duplicate copy thereof, and agree to abide by the terms and conditions therein.

Dated: _____ _____

Signature of Resident

Dated: _____ _____

Signature of resident's representative

Dated: _____ _____

Signature of resident's legal representative

Dated: _____ _____

Signature of operator or operator's representative

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Exhibit S.N. #1

The Loudonville Assisted Living Residence

Specialized services to be provided in the Special Needs residence

1. Programming relevant to the special needs population.
2. Individualized programming to meet the social, emotional, physical, and spiritual needs of each resident.
3. Assistance with ADL's

*Bathing *Toileting/Management-Incontinence care
*Dressing *Verbal cuing/Redirecting
*Medication management
*Injections

Staffing

Director of Resident Care-On-Call 24/7 days a week when not on the premises.
Physician - On-Call 24/7 days a week when not on the premises.
Program Supervisor - 5 days a week.
LPN – In the building 7 days a week for 8 hours, and on-call 24/7 when not on the premises. Note: the program supervisor and the LPN may be the same person responsible for both roles

Resident Care Staff
Day Shift – 7am-3pm – 3 Resident Care Aides
Eve Shift - 3pm-11pm – 2.5 Resident Care Aides
Nights shift – 11pm-7am – 2 Resident Care Aides

Staff Education Requirements

GED/High School Diploma
Current NYS License for all nursing staff
Previous work experience and /or certification as a PCA or CNA
Previous work experience working with geriatric population and Alzheimer/dementia population.

Staff Training

All special needs staff will be trained on the following:
*Alzheimer/Dementia curriculum outing
*Overview of Alzheimer Disease and related dementia
*Understanding and managing challenging behaviors
*Successful communication strategies
*Nutrition and Hydration
*Maximizing ADL function
*Caregiver Stress/working with families in the spirit of team work
*Intimacy/sexuality
*Anti embolism stockings

Environmental Features

Secured unit with delayed egress doors

Window stops

Security Cameras – entrance to unit, dining room, medication room and manager's office

Note: If additional services are required that are not listed, a consultation with administration will be held to determine if said services can be provided. If determination is made that services are not able to be provided by the facility, or a licensed certified home care agency, staff will assist resident and / or family with obtaining alternative level of care.

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