

**ADDENDUM A
(If Applicable)**

**SPECIAL NEEDS ASSISTED LIVING RESIDENCE
ADDENDUM TO RESIDENCY AGREEMENT**

This is an addendum to a Residency Agreement made between Heathwood Assisted Living at Williamsville (the "Operator"), _____, (the "Resident" or "You"), _____ the "Resident's Representative"), and/or _____ (the "Resident's Legal Representative"). Such 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.

I. 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 Heathwood Assisted Living at Williamsville located at 815 Hopkins Road, Williamsville, New York 14221.

II. Request for and Acceptance of Admission

You or Your Resident 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.

III. Specialized Programs, Staff Qualifications and Environmental Modifications

- Specialized services to be provided in the Special Needs Residence; a secure specially designed memory care.
- The memory care unit is staffed with direct care staff at a ratio of 1:8 for days and evenings and 1:15 for the overnight hours.
- All staff working on the memory care unit are provided additional training in dementia care by appropriately trained educators. In addition, care staff are provided at least 12 hours of work related training annually. The facility has a

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partnership with the local Alzheimer's Association to provide staff and family programs.

- Memory care offers a secure environment with a delayed egress exit, alarmed secure exit doors with a keypad to enter and exit the area to protect the health, safety and welfare of Residents.

IV. Financial Arrangements

The following supersedes the Financial Arrangements section III. A. 1 and 2 of the admission agreement:

The resident and the resident's representative, if any, agree to pay, and the operator agrees to accept, the following payment in full satisfaction of the basic rate for services, material, equipment, and food as specified in the Admission Agreement and in Section II of this addendum which the operator must provide according to law and regulation: Monthly Room/Board Rate \$_____.

V. Addendum Agreement Authorization

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

Date (Signature of Resident)

Date (Signature of Resident's Representative)

Date (Signature of Resident's Legal Representative)

Date (Signature of Operator or Operator's Representative)

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