

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

Attachment 17

This is an addendum to a Residency Agreement made between Episcopal Senior Housing, Penfield, LLC, d/b/a Ashley Woods (the "Operator"), , (the "Resident" or "You"), (the "Resident's Representative"), , (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 Ashley Woods located at 400 YMCA Way Penfield, New York 14526.

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

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 and work experience, and 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 Residents.*

IV. Rates

Effective as of the date of this agreement your new housing rate will be:

APPROVED BY	
DIVISION OF ADULT CARE FACILITY & ASSISTED LIVING SURVEILLANCE	
NYSDOH REGIONAL OFFICE	
INITIALS <i>Tah</i>	DATE <i>7, 20, 2021</i>

- \$6,000 per month – Memory Care Studio ☐

These rates are effective through December 31st, 2021.

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.

Dated: _____
(Signature of Resident)

Dated: _____
(Signature of Resident's Representative)

Dated: _____
(Signature of Resident's Legal Representative)

Dated: _____
(Episcopal Senior Housing, Penfield, LLC d/b/a Ashley Woods)

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NYSBCH REGIONAL OFFICE	
INITIALS <u>Tah</u>	DATE <u>7</u> / <u>20</u> / <u>2021</u>

SPECIAL NEEDS ASSISTED LIVING RESIDENCE -
ATTACHMENT SN #1

Services to be provided by Special Needs Assisting Living Program:

- *24 Hour Supervision in a Secured Environment.*
- *Assistance with Medications.*
- *Monitoring and assistance with meals.*
- *Toileting Schedules*
- *Recreation programs designed for the memory impaired*
- *Laundry, Housekeeping, Case Management and other Ancillary Services*

SNALR Nursing Staffing Levels:

Day Shift

- *1 - Registered Nurse Monday through Friday 800a-400p (and 24 hours on call responsibility.*
- *1 - Registered Nurse or Licensed Practical Nurse 700a-300pm seven days per week.*
- *4- Resident Care Assistants 700a-300p seven days per week*

Evening Shift

- *1 - Registered Nurse or Licensed Practical Nurse 300p-1100pm seven days per week*
- *4 - Resident Care Assistants 300p-1100p seven days per week*

Night Shift

- *2- Resident Care Assistants 1100p-700a seven days per week*

Staff Education and Training and Affiliations:

- *All staff receive facility specific in-service training at a minimum of 12 hours per year.*
- *Annual Staff Training by the Alzheimer's Association*
- *Staff Dementia Specific training by the Director of Resident Services*
- *Ashley Woods offers a monthly Alzheimer's Association Support Group which can be attended by Residents, families, staff and members of the community.*

Environmental Modifications:

- *Ashley Woods was built in 2021, this secured environment has been designed for memory impaired individuals.*

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DIVISION OF ADULT CARE FACILITY & ASSISTED LIVING SURVEILLANCE	
NYS DOH REGIONAL OFFICE	
INITIALS <u>Tah</u>	DATE <u>7/20/2021</u>