ENHANCED ASSISTED LIVING RESIDENCE ADDENDUM TO RESIDENCY AGREEMENT

This is an Addendum ("Addendum") to a Residency Agreement made between Artis Senior Living Operator of Briarcliff Manor, LLC (the "Operator"), and

_____ (the "Resident" or "You"),

_____(the "Resident's Representative", if any) who is the Resident's _____, and

_____(the "Resident's Legal Representative", if any) who is the Resident's_____.

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 that Agreement. This Addendum must be attached to the Residency Agreement between the parties.

I. Enhanced Assisted Living Certificates

The Operator is currently certified by the New York State Department of Health to provide Enhanced Assisted Living at Artis Senior Living of Briarcliff Manor located at 553 North State Road, Briarcliff Manor, NY 10510 (the "Residence").

II. Physician Report

You have submitted to the Operator a written report from Your physician, which report states that:

a. Your physician has physically examined You within the last month prior to Your admission into this Enhanced Assisted Living Residence; and

b. You are not in need of 24-hour skilled nursing care or medical care which would require placement in a hospital or nursing home.

III. Request for and Acceptance of Admission

APPROVED BY
Revised 09/14/17
DIVISION OF ADULT CARE FACILITY & ASSISTED LIVING SURVEILLANCE
NYSDOH REGIONAL OFFICE
INITIALS SZ DATE 3/12/21

You have requested to become a Resident at this Enhanced Assisted Living Residence, and the Operator has accepted Your request.

IV. Specialized Programs, Staff Qualifications and Environmental Modifications

Attached as EALR Exhibit 1 and made a part of this Agreement is a written description of:

- Services to be provided in the Enhanced Assisted Living Residence;
- Staffing levels;
- Staff education and training work experience, and any professional affiliations or special characteristics relevant to serving persons in the Enhanced Assisted Living Residence; and
- Any environmental modifications that have been made to protect the health, safety and welfare of persons in the Residence.

V. Aging In Place

The Operator has notified You that, while the Operator will make reasonable efforts to facilitate Your ability to age in place according to Your Individualized Service Plan, there may be a point reached where Your needs cannot be safely or appropriately met at the Residence. If this occurs, the Operator will communicate with You regarding the need to relocate to a more appropriate setting, in accordance with law.

VI. If 24 Hour Skilled Nursing or Medical Care is Needed

If You reach the point where You are in need of 24 hour skilled nursing care or medical care that is required to be provided by a hospital, nursing home or a facility licensed under the Mental Hygiene Law, the Operator will initiate proceedings for the termination of this Agreement and to discharge You from residency, UNLESS each of the following conditions are met:

a. You hire appropriate nursing, medical or hospice staff to care for Your increased needs; AND

b. Your physician and a home care services agency both determine and document that with the provision of such additional nursing, medical or hospice care, You can be safely cared for in the Residence, and would not require placement in a hospital, nursing home or other facility licensed under Public Health Law Article 28 or Mental Hygiene Law Articles 19, 31, or 32; AND

APPROVED BY
Revised 09/14/17
DIVISION OF ADULT CARE FACILITY & ASSISTED LIVING SURVEILLANCE
NYSDOH REGIONAL OFFICE
INITIALS SZ DATE 3/12/21

c. The Operator agrees to retain You as Resident and to coordinate the care provided by the Operator and the additional nursing, medical or hospice staff; AND

d. You are otherwise eligible to reside at the Residence.

VII.Addendum Agreement Authorization

We, the undersigned, have read this Addendum, 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)

Artis Senior Living Operator of Briarcliff Manor, LLC, a Delaware limited liability company (doing business as Artis Senior Living of Briarcliff Manor, LLC)

Dated:_____ By:_____Its:

_____
(Signature of Operator or the Operator's Representative)

APPROVED BY
Revised 09/14/17
DIVISION OF ADULT CARE FACILITY & ASSISTED LIVING SURVEILLANCE
NYSDOH REGIONAL OFFICE
INITIALS SZ DATE 3/12/21

EALR Exhibit 1 to Enhanced Assisted Living Residence Addendum

EALR Exhibit 1

EALR Services and Staffing

Services to Be Provided:

- Assistance with transfer
- Assistance with ambulation
- **Assistance with feeding**
- Assistance with medical equipment
- Ongoing skilled observations by a licensed nurse which need to be reported to a physician
- Treatment by the appropriate licensed personnel, including:
    - Eye drops
    - Injections
    - Diabetes Management
    - Pain Management
    - Catheter Care
    - Colostomy Care
    - PRN Medications Administration
    - Dressing changes
    - Wound Care (Stages 1 and 2)
    - Other nursing services consistent with the Nurse Practices Act for which this facility has a policy approved by the Department of Health. (10 NYCRR 1001.10(m)(2)
- Therapy (PT, OT, and/or ST) as provided by an outside licensed outpatient therapy provider
- Hospice care as provided by a licensed outside Hospice Care Agency

Staffing Levels, Certification, and Work Experience

- All residents in the ALR will have Alzheimer's disease or a related dementia. As such the staffing level will be appropriate for this population; all staff will be trained to service this population; and the physical plant has been specifically designed to serve this population.
- The staffing will be as follows:
    - Execute Director who oversees the operations of the facility; certified as an assisted living residence manager (as required) in NY; prior experience in managing similar services
    - One Administrative Services Coordinator and part-time assistance who manage billing, accounting and other administrative tasks.
    - One Community and Family Services Coordinator who assist residents/families seeking move-in
    - Food Services Staff (One Coordinator, one cook, and part-time food services assistants) who prepare the food and transport it to the resident house kitchens for service; certified as safe food services handlers
    - One Program Services Coordinator, one Assistant and part-time assistants who provide activities and programs 7 days a week in the common areas

APPROVED BY
DIVISION OF ADULT CARE FACILITY & ASSISTED LIVING SURVEILLANCE
Revised 2/19/2021
NYSDOH REGIONAL OFFICE
INITIALS SZ DATE 3/12/21

- One Environmental Services Coordinator and two housekeepers who maintain the operation and cleanliness of the physical plant
- One Resident Services Coordinator (RN) who manages the overall resident care staff and services and provides case management; an RN on-call 24 hours a day
- One LPN 24 hours per day who assists the RN in direct nursing care and administers medications
- Two Resident Caregivers (including Certified Nursing Assistants and Certified Home Healthcare Aides) for up to 16 residents on day and evening shift. Four Resident care givers on night shift
- Services will be supplemented by a licensed home healthcare agency and a licensed outpatient therapy provider as required

- All staff will be trained in serving residents with dementia, including:
  - Normal aging versus dementia
  - Communication skills to enhance interactions with residents
  - Understanding and working with behavioral symptoms
  - Activities of daily living
  - Making every moment matter
  - The care triangle – resident, family, and staff
  - Taking care of the caregivers

Environmental Modifications

- The entire physical plant has been designed and built to vest serve and accommodate the needs of residents with dementia
- The building consists of six (6) compartments and a surrounding yard with a seven (7) foot high fence and two (2) gates leading form the yard to the public way. There are two (2) wings and a central core on each of the two (2) floors.
- The building will have the code-required NFPA-compliant, fire alarm system connected to the local fire department or monitoring station, and a code-required, NFPA-compliant automatic fire sprinkler system.
- The system consists of 10 delayed egress systems (doors) using positive initiation (bars with switches) and electromagnetic locks and two (2) free egress doors with keypad entry. There are two (2) gates at the front of the exterior fence that control entry to the yard.
- In addition to all safety requirements of an Assisted Living Residence, the facility includes at least two (2) smoke compartments per floor.

APPROVED BY

DIVISION OF ADULT CARE FACILITY & ASSISTED LIVING SURVEILLANCE

NYSDOH REGIONAL OFFICE

INITIALS SZ DATE 3/12/21