

ONTARIO HEALTH EAST REFERENCE# AL_2805

January 27, 2025

Mr. Ryan Bell Chief Executive Officer CVH (No. 6) LP by its general partner, Southbridge Care Homes (a limited partnership, by its general partner, Southbridge Health Care GP Inc.), in respect of Orchard Villa 766 Hespeler Road, Suite 301 Cambridge, ON N3H 5L8 Email: rbell@southbridgecare.com

Dear Mr. Bell,

<u>Re: CCA s. 22 Notice and Amendment of Long-Term Care Home Service Accountability Agreement ("Amendment Letter")</u>

The *Connecting Care Act, 2019* ("CCA") requires Ontario Health ("OH") to notify a health service provider when OH proposes to enter into, or amend, a service accountability agreement with that health service provider.

OH hereby gives notice and advises CVH (No. 6) LP by its general partner, Southbridge Care Homes (a limited partnership, by its general partner, Southbridge Health Care GP Inc.), in respect of Orchard Villa (the "HSP") of OH's proposal to amend the Multi-Long-Term Care Home Service Accountability Agreement (as described in the CCA) currently in effect between OH and the HSP (the "SAA").

Subject to the HSP's acceptance of this Amendment Letter, the SAA will be amended with effect as set out below. All other terms and conditions of the SAA will remain in full force and effect.

The terms and conditions in the SAA are amended as follows:

 Revision of Schedule A for Orchard Villa (attached), reflecting Temporary License (#2693-T02), issued on December 18, 2024. This revision extends the term of the license from January 1, 2025, to December 31, 2027, for the continued operation of 233 temporary long-stay beds at Orchard Villa. The license will remain in effect until December 31, 2027 or until replacement long-term care (LTC) capacity becomes available in the area, at which point the 233-bed Temporary License will be surrendered by the Licensee or revoked by the Director.

Unless otherwise defined in this Amendment Letter, all capitalized terms used in this letter have the meanings set out in the SAA.

ONTARIO HEALTH EAST REFERENCE# AL_2805 CCA s. 22 Notice and Amendment of Long-Term Care Home Service Accountability Agreement ("Amendment Letter")

Please indicate the HSP's acceptance and agreement to the amendments described in this Amendment Letter by signing below and returning one scanned copy of this letter by e-mail no later than the end of business day on February 5, 2025 to: <u>OH-East_Submissions@ontariohealth.ca</u>

The HSP and OH agree that this Amendment Letter may be validly executed electronically, and that their respective electronic signature is the legal equivalent of a manual signature.

Should you have any questions regarding the information provided in this Amendment Letter, please contact Marcia Providence , Lead, Performance, Accountability and Funding Allocation at <u>marcia.codougan-prov@ontariohealth.ca</u> or at 647.953.5133.

Sincerely,

Signature

Eric Partington Vice President, Performance, Accountability and Funding Allocation Ontario Health East

Attachment: Schedule A_Mult-Home_LSAA Orchard Villa

 c: Scott Ovenden, Chief Regional Officer, Toronto and East Tunde Igli, Director, Performance, Accountability and Funding Allocation, Ontario Health East Marcia Codougan-Providence, Lead, Performance, Accountability and Funding Allocation, Ontario Health East

Signature page follows



AGREED TO AND ACCEPTED BY:

CVH (No. 6) LP by its general partner, Southbridge Care Homes (a limited partnership, by its general partner, Southbridge Health Care GP Inc.), in respect of Orchard Villa

By:

Kyan Bell

Ryan Bell, Chief Executive Officer I have authority to bind the health service provider.

Date: 01/28/2025

mm/dd/yyyy



LTCH Name: Orchard Villa

A.1 General Information				
Name of Licensee: (as referred to on your Long-Term Care Home Licence)		ership, b	eral partner, Southbric y its general partner, So	-
Name of Home: (as referred to on your Long-Term Care Home Licence)	Orchard Villa			
LTCH Master Number (e.g. NH9898)	NH3235			
Address	1955 Valley Farm	n Road		
City	Pickering		Postal Code	L1V 3R6
Accreditation organization	Accreditation C	anada		
Date of Last Accreditation (Award Date – e.g. May 31, 2020)	May 24, 2	023	Year(s) Awarded (e.g. 3 years)	4 years
French Language Services (FLS)	Identified (Y/N)	N	Designated Y/N	N
Culturally Designated Home	Self Identified (Y/N)	N	Specific Community Serviced (i.e ethnic, linguistic or religious)	N

LTCH Name: Orchard Villa

A.2 Licensed or Approved Beds & Classification / Bed Type								
1. Licence Type	Total # of Beds <u>Note</u> : Each individual licence should be on a separate row. Please add additional rows as required.					Licence Expiry Date (e.g. May 31, 2025)	Comments/Additional Information	
	Α	В	С	Upgrade	d D	New		
Licence ("Regular" or Municipal Approval)	64		169				December 31, 2027	
TOTAL BEDS (1)	[<mark>/</mark>	Add tot	<mark>al of al</mark> l	beds (A,B,C	<mark>, Up</mark> E), New)]	233	
	Please include information specific to the following types of licences on a separate line below. Temporary Licence, Temporary Emergency Licence, or Short-Term Authorization Short-Term Authorization							licence should be on a
2. Licence Type	LicenceTotal # ofExpiryBedsDate(e.g., May 31, 2025)				Comments/Additional Information			
Temporary	4	233	De	cember 31, 2027				
Temporary Emergency Short-Term Authorization								
TOTAL BEDS (2)	2	233						
TOTAL # OF ALL LICENSED BEDS (1) + (2)	233							

LTCH Name: Orchard Villa

Usage Type	Total # of Beds	Expiry Date (e.g., May 31, 2025)	Comments/Additional Information <u>Please</u> specify number of beds designated as Behavioural <u>Support Unit (BSU) Beds, Other Designated</u> <u>Specialized Unit Beds and Beds held as</u> Isolation **
Long Stay Beds (not including beds below)	233	December 31, 2027	Home licensed for 233 beds, but currently accommodating 213 beds, due to elimination of 4 & 3 bed rooms.
Convalescent Care Beds	0		
Respite Beds	0		
ELDCAP Beds	0		
Interim Beds	0		
Veterans' Priority Access beds	0		
Beds in Abeyance (BIA)	0	[Expiry date represents the end date of the BIA Agreement]	
Designated Specialized Unit beds	0		
Other beds *	0		
Total # of all Bed Types (3)	233	<mark>December 31,</mark> 2027	

*Other beds available under a Temporary Emergency Licence or Short-Term Authorization

** Include beds set aside in accordance with Emergency Plans (O. Reg 246/22 s. 268)

LTCH Name: Orchard Villa

A.3 Structural Information

of redevelopment and forecasted year of completion.)

Type of Room (this refers to structural layout rather than what is charged in accommodations or current occupancy).

Room Type	Rooms	Multiplier	Number of beds			
Number of rooms with 1 bed	87	x 1	87			
Number of rooms with 2 beds	53	x 2	106			
Number of rooms with 3 beds		х 3				
Number of rooms with 4 beds		x 4	40			
Total Number of Rooms	150	Total Number of Beds*	233			
*Ensure the "Total Number of Beds" above matches "Total # of all Bed Types (3)" from Table A.2						
Original Construction Date (Year)	1979					
Redevelopment: Please list year and details (unit/resident home area, design standards, # beds, reason for redevelopment. If	etails 1)2001 – Class A section addition nt home area, 2) dards, # beds, 3)					

Number of Units/Resider	t Home Areas and Beds					
Unit/Resident Home Area	Number of Beds					
Aspen			32			
Cedar			32			
Maple	37					
Pine			49			
Birch	41					
Linden	42					
Total Number of Beds (E	233					
from Table A.2						
Other Reporting						
Accommodation Breakdown*						
Accommodation Type	Basic	Semi-Private	Private			
	80	66	87			
Total Beds						
*Correctored attack	6 : ·: · · · ·	T 0 4 (000 (

*For accommodation definition see *Fixing Long-Term Care Act, 2021* (<u>https://www.ontario.ca/laws/regulation/220246#BK4</u>)