

Uniform Disclosure of Assisted Living Services & Amenities (UDALSA)

This is a required document per 144G.40 Subd. 2 (www.revisor.mn.gov/statutes/cite/144G.40) of all assisted living facilities to describe the services, supports, and amenities available at the assisted living facility. Prospective residents and their families can use this tool to determine if the assisted living facility can meet their needs, allow them to compare options among various settings, and make informed decisions about selecting an assisted living facility setting. The information presented here may be important for a resident's ability to age in place. Assisted living facilities are not required to provide all the services listed, and available services are subject to change. The facility will indicate which services are provided and any limitations that may pertain to the service.

You are also encouraged to tour facilities, talk with other residents, residents' family members, or meet one-on-one with facility staff during the selection process. The disclosure checklist is not a substitute for the assisted living contract, which is a separate document that will include the specific services to be provided to the individual resident and the fees per services.

General Information

This information is current as of (MM/DD/YYYY): 04/18/2023				
Name of Assisted Living: Adith Miller Manor				
HFID: 20147				
Unique building/unit description (if applicable):				
Facility Address: 885 Mankato Ave. Winona MN 55987				
If services are provided at more than one building (on the assisted living campus), please list all locations below.				
■ No additional buildings				
Additional Building:				
Building Name (if applicable): Roger Metz Manor				
Physical Address (if different than above): 875 Mankato Ave. Winona MN 55987				
Additional Building:				
Building Name (if applicable):				
Physical Address (if different than above):				
Additional Building:				
Building Name (if applicable):				
Physical Address (if different than above):				

Facility/Campus listed above has the following license; Check one:

Assisted Living Facility License
Assisted Living Facility with Dementia Care License
Availability of Unlicensed Staff (ULP); check one:
Unlicensed staff are in the building and available to respond to resident requests 24/7
Unlicensed staff may either be in the building, in an attached building, or within the campus and available to respond to resident requests 24/7
Availability of Licensed (RN/LPN) Staff (in <i>addition</i> to an RN who is required to be accessible to the staff 24/7 check one if applicable:
Licensed staff are on site 24/7
Licensed staff are either in the building, an attached building, or within the campus and available to respond to resident requests 24/7
Number of unlicensed direct care staff typically scheduled per shift:
Day Shift: 2
Evening Shift: 2
Night shift: 1

Payment Options

The facility will indicate by placing an "X" in the "Accepted" column if the payment option is accepted (may check more than one). The facility may indicate in the "Comments" column if a pre-determined length of private funds payment source is required before acceptance of Medicaid or waivered service funds as well as the number of months required.

Payment Options for Housing Contract

Payment Option	Accepted	Comments
Private Pay	x	
Sliding Scale		
Housing Support (formerly Minnesota Group Residential Housing) Payments	x	Contact Winona County Human Services for approval.
Federal rent subsidy		
Other; explain:		

Payment Options for Services

Payment Option	Accepted	Comments
Waivered Services (EW, CADI, BI); specify any limitations	x	Contact Winona County Human Services for approval.
Private Pay	x	
Long Term Care Insurance	x	Contact Policy Holder for Coverage Details.

Other; explain:

Services and Amenities Available

Below is a list of services that are available to assisted living residents. The facility will indicate by placing a "yes" or "X" in the "Available" column if the service is provided or available at/on the campus/unit of the location listed above. If the "Available" column is blank, the facility does **not** provide that service.

Section 1: Dementia Care Pertains only to facilities with an **Assisted Living with Dementia Care** license

Check each service available at the location(s) listed above.

Dementia Care Services Available

	Service	Available	Comments
Secured unit or bu exit-seeking behav	uilding for wandering or vior	x	
Secured outdoor g premises	grounds on facility	x	
Individualized digi- wandering or exit-	tal/alarm monitoring for seeking behavior		
Prepared to mana	ge challenging behaviors	x	
Other; specify: We accept challenging behaviors are a symptom of disease. Behaviors that put self or others at risk will be assessed for community appriateness.			

Section 2: Medication Management

Check each service available at the location(s) listed above.

Medication Management Services Available

Service	Available	Comments
Verbal or visual reminders to take regularly scheduled medications; specify any limit to frequency in comments		
Communication with physician/pharmacy about ordering or refill requests	х	
Medication administration by licensed or unlicensed personnel	х	
Delivery of medication to resident previously set up by the facility nurse	х	Unlicensed staff trained to administer medications set up by the RN.
Medications set up by nurse for resident to self-administer		
Delivery of medication from the original containers to resident	х	Medications are required to be bubbled packed for administration, as resident/pharmacy allows.
Delivery of liquid or food to resident if required to ingest medication	x	
Delegation of medication management services by licensed health professional to unlicensed staff	х	Unlicensed caregivers are trained and competency tested by the RN.
Central storage of medication	x	
Diabetic Care: insulin pen dosing		
Diabetic Care: insulin pump management		
Diabetic Care: insulin syringe dosing		
Diabetic Care: sliding scale insulin management		
Clinical monitoring of labs related to medications	х	As ordered by provider.
Anticoagulant medication management	х	In coordianation with Anticoagulation Clinic.
B-12 injections		

Service	Available	Comments
Nutritional supplement administration	х	Oral supplement only (ex: Ensure). Covered by resident.
(IV) Intravenous management		
PICC lines (Peripherally Inserted Central Catheter)		
Injections; specify types or limits in comments (IM, SQ)		
Nebulizers	x	
Inhalers	x	
Ear drops	x	
Eye drops	x	
Topicals	х	
Patches	x	
Medication delivery via enteral (feeding) tube		
Pain pump management		
Medical cannabis administration (pill form) for certified patients		
Medical Cannabis storage for certified patients		
Cannabidiol oil administration for certified patients		
Other; specify:		

Section 3: Treatments & Therapies

Check each service available at the location(s) listed above.

Treatments & Therapies Available

Service	Available	Comments
Verbal or visual reminders to perform regularly scheduled treatments or exercises		
Wound care: basic	x	
Wound care: complex		
Diabetic care: blood glucose monitoring		
Diabetic care: foot/nail care		
C-PAP	x	Resident provides equipment.
Bi-PAP		
Oxygen Management; specify any delivery system limitations	x	Resident provides equipment.
Oxygen saturation checks	x	Provider ordered.
Ventilators		
Suctioning		
Tracheostomy Care: cleaning of site and tube		
Tracheostomy Care: showering assistance		
Tracheostomy Care: suctioning assistance		
Pacemaker Checks	x	In coordination with Cardiology. Resident provide equipment.
Arrange for On-Site Dialysis		
Arrange for/set-up Off-Site Dialysis	x	In coordination with legal decision maker.

Service	Available	Comments
Peritoneal Dialysis (on-site)		
Compression stockings	x	
Lymphedema wraps	x	
Fall Prevention: balance assessments		
Fall Prevention: exercise programs	х	Directed by PT
Fall Prevention: strength training		
Integrative Health Services: acupuncture		
Integrative Health Services: aromatherapy		
Integrative Health Services: healing touch		
Integrative Health Services: massage		
Blood pressure checks	x	Provider Ordered
Daily weight check	x	Provider Ordered
Indwelling urinary catheter care; emptying and bag changes	х	
Indwelling urinary catheter replacement by nurse		
Straight (intermittent) catheter assistance		
Suprapubic catheter care	x	
Ostomy care	х	
Arrangements for and coordination with hospice care	х	
End-of-life palliative care	х	

Service	Available	Comments
Access to and training on use of automatic electronic defibrillators (AED)	x	
Training of and use of Cardiopulmonary Resuscitation (CPR)	х	
Other; specify:		

Section 4: Assistance with Activities of Daily Living

Check each service available at the location(s) listed above.

Assistance with Daily Living Activities Available

Service	Available	Comments
Dressing	x	
Bathing: shower	x	
Bathing: bathtub		
Oral hygiene	x	
Denture care	x	
Cuing/reminders for self-cares	x	
Use of special utensils	x	
Feeding assistance for residents with complicated eating problems		
Set-up and cut food at meals	x	
Manual Feeding; specify limits in comments		
Tube Feeding; specify limits in comments		
Feeding in common area with one staff member per resident	х	

Service	Available	Comments
Feeding in resident's apartment with one staff member per resident	x	During periods of episodic illness.
Grooming: hair care, make-up, shaving, application of lotion, etc.	x	
Nail care: toenails, fingernails	x	
Toileting: standby assistance/supervision	x	
Changing incontinence products; perineal care	x	
Ordering replacement incontinence products	x	
Assistance with bowel and bladder control, devices, and training programs	x	
Other; specify:		

Section 5: Mobility Support

Check each service available at the location(s) listed above.

Mobility Services Available

Service	Available	Comments
Standby Assistance	x	
Transfers with assist of one staff	x	
Transfers with assist of two staff		
Transfers utilizing sit-to-stand lifts		
Transfers utilizing sliding boards		
Transfers utilizing bariatric equipment		
Ceiling lift transfers		

Service	Available	Comments
Non-mechanical transfers (trapeze)		
Mechanical lift: assist of 1 transfer		
Mechanical lift: assist of 2 transfer		
Ambulation with assist of 1		
Bed mobility	x	
Assistance with chair mobility	x	
Chair Glide System		
Mechanical Stair Lift System		
Handrails; in personal space	x	Bathroom Grab Bars; Hallway Handrails
Elevators		
Other; specify:		

Section 6: Security & Monitoring

Check each service/option available at the location(s) listed above.

Security and Monitoring Services

Service	Available	Comments
Every 15-minutes safety checks		
Every 30-minutes safety checks		
Hourly safety checks	x	During sleeping hours and as care planned.
Every two-hours safety checks	x	As care planned

Service	Available	Comments
Daily safety checks		
Emergency call system; specify type in comments		
Non-emergency call system; specify type in comments		
Digital wander alert device on resident		
Wander alert system at facility exits		
Staff monitoring at facility exits; specify method in comments		
Visitor check-in/check-out at facility main entrance	x	
Bed alarms or movement sensing technology	x	
Door sensors: specify locations (unit, resident room, exits, etc.)		
Security Guard		
Security cameras in common spaces	x	Outdoor campus cameras.
Key card/fob access: specify locations (unit, resident room, exits, etc.)		
Other lock systems: specify locations (unit, resident room, exits, etc.)	x	Facility doors are secured and armed.
Emergency generator(s) to power the facility during power outages		
Other; specify:		

Section 7: Dining and Nutrition

Check each service/option available at the location(s) listed above.

Dining and Nutrition Services

Service	Available	Comments
Three meals available, plus snacks	Required	
Breakfast available in community space	x	
Breakfast available; delivered to apartment		
Lunch available in community space	x	
Lunch available; delivered to apartment		
Dinner available in community space	х	
Dinner available; delivered to apartment		
Meal tray delivery and pick-up from resident's unit	х	During periods of episodic illness.
Meal preparation in resident's unit		
Thickened Liquids; specify limits in comments	х	
Modified Texture Diets; specify limits in comments	х	х
Therapeutic Diets: cardiac	х	
Therapeutic Diets: diabetic or calorie controlled	х	
Therapeutic Diets: gluten-free	х	
Therapeutic Diets: high fiber	х	
Therapeutic Diets: low fat/low cholesterol	х	
Therapeutic Diets: low sodium	х	

Service	Available	Comments
Therapeutic Diets: no added salt	x	
Therapeutic Diets: renal diet	x	
Other special diets: kosher		
Other special diets: (vegetarian, vegan, etc.) specify in comments	x	
Dietitian or Nutritionist Services		
Carbohydrate intake/tracking		
Meal consumption tracking		
Other; specify:		

Section 8: Supportive Services

Check each service available at the location(s) listed above.

Supportive Services Available

Service	Available	Comments
Daily "I'm okay" checks service; specify procedure in comments	x	All residents recieve daily services and direct oversight.
Assistance with meals or food preparation		
Daily Social and Recreational Services	Required	
Housekeeping: bed making	х	
Housekeeping: defrost and clean refrigerator		
Housekeeping: dusting	х	
Housekeeping: organize closets and drawers	х	Responsible decision maker helps to maintain apartment for over crowding of items.

Service	Available	Comments
Housekeeping: trash removal; specify frequency in comments	x	
Housekeeping: weekly general cleaning (clean floors, sinks, shower/tub, toilet, and vacuum)		
Housekeeping: other; specify in comments	х	Housekeeping is provided daily and as need to maintain the cleanliness of community space.
Laundry: linen (change bed, launder sheets, towels)	x	
Laundry: wash, dry, and fold clothing; specify loads per week in comments	x	
Laundry: other; specify in comments	х	Community is not responsible to dry clean / delicate only or over sized items.
Schedule offsite social and recreational activities	х	
Schedule medical and social service appointments		Responsible decision maker manages medical appointments.
Assistance with arranging transportation for personal, social, and recreational activities	Required	
Assistance with arranging transportation to medical and social services appointments	Required	In coordination with responsible decision maker.
Provide transportation to social and recreational activities	х	Transporation is provided for scheduled life enrichment events outside of the community.
Provide transportation to medical and social service appointments		
Assistance accessing community resources and social services	Required	
Shopping: facility sponsored		
Spiritual Care/Religious Services; on-site	х	
Assistance with bill paying/budgeting		
Communication boards or other supplemental communication devices	х	
Primary languages spoken by staff	х	English
Supervision of smoking		

	Service	Available	Comments
Other; specify:	Winona Health / Adith Miller	Manor & Ro	ger Metz Manor is a tobacco free campus.

Section 9: Staffing

Check each option available at the address location(s) listed above.

Staffing Available

Staffing	Available	Comments
One-to-One staffing available		
One-to-One staffing for special circumstances		
Overnight companion		
Registered Nurse: on-site "part time"	x	RN caregivers work acoss assisted living campuses and are available on site or on call 24/7.
Registered Nurse: on-site "full time"	x	RN caregivers work acoss assisted living campuses and are available on site or on call 24/7.
Licensed Practical Nurse: on site "part time"	x	Occasional LPN presence per RN delegation.
Licensed Practical Nurse: on-site "full time"		
Assisted Living Director: on-site "part time"	x	Assisted Living Director shares LALD license with muliple sites within a 2 mile radius.
Assisted Living Director: on site "full time"		Full time memory care supervisor provides daily direct oversight and supervision.
Advanced Practice Registered Nurse: on- site "part time"		
Advanced Practice Registered Nurse: on site "full time"		
Activities Director: Part Time	х	Life enrichment caregivers provide scheduling of daily life enrichment program.
Activities Director: Full Time		
Dietician/Nutritionist consultant available or can be arranged		

Staffing	Available	Comments
Physical Therapist available or can be arranged	х	
Respiratory Therapist available or can be arranged	x	
Occupational Therapist available or can be arranged	x	
Speech Language Pathologist available or can be arranged	x	
Social Worker available or can be arranged	x	
Other Licensed Professional available; specify type in comments	х	MD provider rounds available.
Other; specify:	•	

Section 10: Amenities

Check each option available at the location(s) listed above.

Amenities Available

Amenity	Available	Comments
Accessible bathrooms; specify limits in comments	x	
Private units	х	Adith Miller Manor and Roger Metz Manor
Semi-private units	х	Adith Miller Manor
Studio/efficiency units		
One-bedroom units		
Two-bedroom units		
Kitchen/Kitchenettes in units		
Internet access	х	

Amenity	Available	Comments
Cable (television)	х	
Pets allowed	х	Pet visitation is allowed per pet policy.
Pet care; specify in comments		
Pool		
Whirlpool		
Exercise Room		
Library		
Activity Room	x	
Garden/outdoor spaces	x	
Chapel	х	Located on campus at Lake Winona Manor.
Private entertaining space		
Communal Dining room	x	
Beauty/Barber Shop	x	Located on campus at Lake Winona Manor.
Parking available for residents		
Parking available for guests	х	
Guest accommodations	х	Overnight guests will be accomodated during periods of episodic illness and at end of life.
Laundry Room accessible to Residents	х	
Washer-Dryer in units		
Central Air Conditioning	х	
Fully sprinklered building	х	

Amenity	Available	Comments
Designated smoking area inside (not apartment space)		
Designated smoking area outside		
Other; specify:		

Additional Information

Sixty days before the facility plans to reduce or eliminate the availability of one or more services, the facility must provide written notice of the reduction. Refer to 144G.55 Subd. 1(d) (www.revisor.mn.gov/statutes/cite/144G.55).

Residents may choose to obtain services from an outside service provider at their own cost. Residents may also obtain services from an outside service provider if the resident's assessed needs exceed the scope of services the facility can provide as agreed upon in the contract and are not included in the checklist. If this occurs and the resident is not able to obtain services from an outside service provider, then the facility may require the resident move to another facility or care setting that is able to meet the resident's needs. In the event this occurs, the facility will assist in a coordinated move of the resident to a safe and appropriate location.

Prospective Residents need to call the Senior LinkAge Line to discuss their housing options before signing a contract with a licensed assisted living facility. The Senior LinkAge Line is available Monday through Friday from 8am to 4:30pm at 1-800-333-2433.

You can get further information, at no cost, about advocacy or care options from:

- Office of Ombudsman for Long Term Care (https://mn.gov/board-on-aging/direct-services/ombudsman/);
 1-800-657-3591
- Office of Ombudsman for Mental Health and Developmental Disabilities (https://mn.gov/omhdd/); 1-800-657-3506
- Minnesota Directory for community resources: <u>www.MinnesotaHelp.Info</u>
- Minnesota Senior LinkAge Line (www.seniorlinkageline.com/); 1-800-333-2433

This is NOT a contract to receiv	cknowledge that I have reviewed this document. e services.
Received Date	Individual or Legal/Designated Representative