

Uniform Disclosure of Assisted Living Services & Amenities (UDALSA)

This is a required document per [144G.40 Subd. 2 \(www.revisor.mn.gov/statutes/cite/144G.40\)](http://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): 04/14/2025

Name of Assisted Living: Skylight Gardens Apartments, LLC

HFID: 20347

Unique building/unit description (if applicable): _____

Facility Address: 501 1st Street North St. Cloud, MN 56303

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): _____

Physical Address (if different than above): _____

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:

UNIFORM DISCLOSURE OF ASSISTED LIVING SERVICES & AMENITIES (UDALSA)

- 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 *addition* 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: 5

Evening Shift: 4

Night shift: 2

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 waived 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	
Federal rent subsidy	x	
Other; explain:		

Payment Options for Services

Payment Option	Accepted	Comments
Waivered Services (EW, CADI, BI); specify any limitations	x	Do Not Accept Case Mix L
Private Pay	x	
Long Term Care Insurance	x	
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 building for wandering or exit-seeking behavior		
Secured outdoor grounds on facility premises		
Individualized digital/alarm monitoring for wandering or exit-seeking behavior		
Prepared to manage challenging behaviors		
Other; specify:		

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	x	
Communication with physician/pharmacy about ordering or refill requests	x	
Medication administration by licensed or unlicensed personnel	x	
Delivery of medication to resident previously set up by the facility nurse	x	Medications set up by pharmacy or nurse
Medications set up by nurse for resident to self-administer	x	
Delivery of medication from the original containers to resident	x	
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	x	
Central storage of medication	x	Some medications stored centrally in nursing office.
Diabetic Care: insulin pen dosing	x	Staff verify dose only, resident must dial and inject self.
Diabetic Care: insulin pump management		
Diabetic Care: insulin syringe dosing	x	Nurse to pre-fill syringes during nursing office hours M-F.
Diabetic Care: sliding scale insulin management	x	Resident required to determine dosing.
Clinical monitoring of labs related to medications	x	
Anticoagulant medication management	x	
B-12 injections	x	By Nurse during nursing office hours M-F.

UNIFORM DISCLOSURE OF ASSISTED LIVING SERVICES & AMENITIES (UDALSA)

Service	Available	Comments
Nutritional supplement administration	x	Oral supplements only, resident must supply
(IV) Intravenous management		
PICC lines (Peripherally Inserted Central Catheter)		
Injections; specify types or limits in comments (IM, SQ)	x	IM, SQ, by nurse during nursing office hours M-F
Nebulizers	x	
Inhalers	x	
Ear drops	x	
Eye drops	x	
Topicals	x	
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: Safety lancets and safety needles required for blood testing and injections.		

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	x	
Wound care: basic	x	Basic First Aid.
Wound care: complex	x	3rd party vendor must provide all aspects of wound care.
Diabetic care: blood glucose monitoring	x	Resident must supply meter and supplies.
Diabetic care: foot/nail care	x	By Nurse Only, Referrals made as needed.
C-PAP	x	
Bi-PAP	x	
Oxygen Management; specify any delivery system limitations	x	3rd party vendor to supply oxygen and supplies, no transportation of oxygen
Oxygen saturation checks	x	Per physicians order, nurse descretion, and as needed
Ventilators		
Suctioning		
Tracheostomy Care: cleaning of site and tube		
Tracheostomy Care: showering assistance		
Tracheostomy Care: suctioning assistance		
Pacemaker Checks	x	By nurse during nursing office hours M-F
Arrange for On-Site Dialysis	x	Assist with scheduling
Arrange for/set-up Off-Site Dialysis	x	Assist with scheduling

UNIFORM DISCLOSURE OF ASSISTED LIVING SERVICES & AMENITIES (UDALSA)

Service	Available	Comments
Peritoneal Dialysis (on-site)	x	3rd party vendor to provide set up, supplies, monitoring, vitals, cares and 1:1
Compression stockings	x	
Lymphedema wraps	x	
Fall Prevention: balance assessments	x	3rd party vendor PT/OT with physician order
Fall Prevention: exercise programs	x	3rd party vendor PT/OT with physician order
Fall Prevention: strength training	x	3rd party vendor PT/OT with physician order
Integrative Health Services: acupuncture		
Integrative Health Services: aromatherapy	x	Physician order with instructions of use. Resident must supply essential oils.
Integrative Health Services: healing touch		
Integrative Health Services: massage		
Blood pressure checks	x	Per physicians order, nurse descretion, and as needed
Daily weight check	x	Per physicians order, nurse descretion, and as needed
Indwelling urinary catheter care; emptying and bag changes	x	
Indwelling urinary catheter replacement by nurse		
Straight (intermittent) catheter assistance		
Suprapubic catheter care	x	Daily dressing changes and bag cleaning by staff. 3rd party vendor must provide insertions
Ostomy care	x	
Arrangements for and coordination with hospice care	x	
End-of-life palliative care	x	3rd party vendor

UNIFORM DISCLOSURE OF ASSISTED LIVING SERVICES & AMENITIES (UDALSA)

Service	Available	Comments
Access to and training on use of automatic electronic defibrillators (AED)		
Training of and use of Cardiopulmonary Resuscitation (CPR)		
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	x	
Oral hygiene	x	
Denture care	x	
Cuing/reminders for self-cares	x	
Use of special utensils	x	Resident must provide
Feeding assistance for residents with complicated eating problems		
Set-up and cut food at meals	x	Staff assist with making coffee, cutting up food, applying condiments.
Manual Feeding; specify limits in comments		
Tube Feeding; specify limits in comments		
Feeding in common area with one staff member per resident		

UNIFORM DISCLOSURE OF ASSISTED LIVING SERVICES & AMENITIES (UDALSA)

Service	Available	Comments
Feeding in resident's apartment with one staff member per resident		
Grooming: hair care, make-up, shaving, application of lotion, etc.	x	Electric shaver only, resident must provide
Nail care: toenails, fingernails	x	
Toileting: standby assistance/supervision	x	
Changing incontinence products; perineal care	x	Bladder and Bowel
Ordering replacement incontinence products	x	Supplies obtained from 3rd party vendor.
Assistance with bowel and bladder control, devices, and training programs	x	Bladder only, every 2 hour toileting. No monitoring of output.
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	x	Assist of 1 or independent with transfer
Transfers utilizing bariatric equipment		
Ceiling lift transfers		

UNIFORM DISCLOSURE OF ASSISTED LIVING SERVICES & AMENITIES (UDALSA)

Service	Available	Comments
Non-mechanical transfers (trapeze)	x	
Mechanical lift: assist of 1 transfer		
Mechanical lift: assist of 2 transfer		
Ambulation with assist of 1	x	
Bed mobility	x	Assist of one
Assistance with chair mobility	x	Assist of one
Chair Glide System		
Mechanical Stair Lift System		
Handrails; in personal space	x	
Elevators	x	
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	Based on nurses assessment
Every two-hours safety checks	x	Based on nurses assessment

UNIFORM DISCLOSURE OF ASSISTED LIVING SERVICES & AMENITIES (UDALSA)

Service	Available	Comments
Daily safety checks	x	
Emergency call system; specify type in comments	x	Pendant call system to reach staff in building
Non-emergency call system; specify type in comments	x	Pendant call system to reach staff in building
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		
Door sensors: specify locations (unit, resident room, exits, etc.)		
Security Guard		
Security cameras in common spaces	x	
Key card/fob access: specify locations (unit, resident room, exits, etc.)		
Other lock systems: specify locations (unit, resident room, exits, etc.)	x	Keys for resident's unit
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	x	based on assessed need
Lunch available in community space	x	
Lunch available; delivered to apartment	x	based on assessed need
Dinner available in community space	x	
Dinner available; delivered to apartment	x	based on assessed need
Meal tray delivery and pick-up from resident's unit	x	
Meal preparation in resident's unit		
Thickened Liquids; specify limits in comments		
Modified Texture Diets; specify limits in comments		
Therapeutic Diets: cardiac		
Therapeutic Diets: diabetic or calorie controlled	x	Alternative options upon request, when available
Therapeutic Diets: gluten-free		
Therapeutic Diets: high fiber		
Therapeutic Diets: low fat/low cholesterol		
Therapeutic Diets: low sodium		

UNIFORM DISCLOSURE OF ASSISTED LIVING SERVICES & AMENITIES (UDALSA)

Service	Available	Comments
Therapeutic Diets: no added salt		
Therapeutic Diets: renal diet		
Other special diets: kosher		
Other special diets: (vegetarian, vegan, etc.) specify in comments		
Dietitian or Nutritionist Services		
Carbohydrate intake/tracking		
Meal consumption tracking	x	Percentage eaten
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		
Assistance with meals or food preparation		
Daily Social and Recreational Services	Required	
Housekeeping: bed making	x	
Housekeeping: defrost and clean refrigerator	x	upon request
Housekeeping: dusting	x	
Housekeeping: organize closets and drawers	x	upon request

UNIFORM DISCLOSURE OF ASSISTED LIVING SERVICES & AMENITIES (UDALSA)

Service	Available	Comments
Housekeeping: trash removal; specify frequency in comments	x	Daily
Housekeeping: weekly general cleaning (clean floors, sinks, shower/tub, toilet, and vacuum)	x	
Housekeeping: other; specify in comments		
Laundry: linen (change bed, launder sheets, towels)	x	
Laundry: wash, dry, and fold clothing; specify loads per week in comments	x	based on need.
Laundry: other; specify in comments		
Schedule offsite social and recreational activities	x	Based on need
Schedule medical and social service appointments	x	Based on need
Assistance with arranging transportation for personal, social, and recreational activities	Required	
Assistance with arranging transportation to medical and social services appointments	Required	
Provide transportation to social and recreational activities	x	Through Dial a Ride
Provide transportation to medical and social service appointments		
Assistance accessing community resources and social services	Required	
Shopping: facility sponsored	x	Resident must have the ability to shop and make purchases
Spiritual Care/Religious Services; on-site	x	Church services weekly, communion weekly, no chaplain on-site
Assistance with bill paying/budgeting	x	M- F only
Communication boards or other supplemental communication devices	x	
Primary languages spoken by staff	x	English
Supervision of smoking		

Service	Available	Comments
Other; specify:		

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"		
Registered Nurse: on-site "full time"	x	
Licensed Practical Nurse: on site "part time"	x	
Licensed Practical Nurse: on-site "full time"		
Assisted Living Director: on-site "part time"		
Assisted Living Director: on site "full time"	x	
Advanced Practice Registered Nurse: on-site "part time"		
Advanced Practice Registered Nurse: on site "full time"		
Activities Director: Part Time		
Activities Director: Full Time	x	
Dietician/Nutritionist consultant available or can be arranged		

UNIFORM DISCLOSURE OF ASSISTED LIVING SERVICES & AMENITIES (UDALSA)

Staffing	Available	Comments
Physical Therapist available or can be arranged		3rd party vendor, if available and covered by insurance.
Respiratory Therapist available or can be arranged		3rd party vendor, if available and covered by insurance
Occupational Therapist available or can be arranged		3rd party vendor, if available and covered by insurance
Speech Language Pathologist available or can be arranged		3rd party vendor, if available and covered by insurance
Social Worker available or can be arranged		
Other Licensed Professional available; specify type in comments		
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		
Private units		
Semi-private units		
Studio/efficiency units	x	
One-bedroom units	x	
Two-bedroom units	x	
Kitchen/Kitchenettes in units	x	
Internet access		

UNIFORM DISCLOSURE OF ASSISTED LIVING SERVICES & AMENITIES (UDALSA)

Amenity	Available	Comments
Cable (television)	x	Basic channels only
Pets allowed	x	small dog (1) and cats, no more than 2
Pet care; specify in comments		resident must provide
Pool		
Whirlpool		
Exercise Room		
Library		
Activity Room		
Garden/outdoor spaces	x	Raised Garden
Chapel		
Private entertaining space		
Communal Dining room	x	
Beauty/Barber Shop	x	
Parking available for residents	x	
Parking available for guests	x	
Guest accommodations		
Laundry Room accessible to Residents	x	
Washer-Dryer in units		
Central Air Conditioning		
Fully sprinklered building	x	

Amenity	Available	Comments
Designated smoking area inside (not apartment space)		
Designated smoking area outside	x	
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 may 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/) (<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/) (<https://mn.gov/omhdd/>); 1-800-657-3506
- Minnesota Directory for community resources: www.MinnesotaHelp.Info
- [Minnesota Senior LinkAge Line](http://www.seniorlinkageline.com/) (www.seniorlinkageline.com/); 1-800-333-2433

(Optional) By signing below, I acknowledge that I have reviewed this document. This is NOT a contract to receive services.

Received Date

Individual or Legal/Designated Representative