

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): 03/09/2026

Name of Assisted Living: Sterling Pointe Senior Living

HFID: 30802

Unique building/unit description (if applicable): _____

Facility Address: 1250 Northland Dr, Princeton MN 55371

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:

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- 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 HHA, may fluctuate with occupancy

Evening Shift: 5 HHA, may fluctuate with occupancy

Night shift: 3 HHA, may fluctuate with occupancy

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	Ability to private pay for two years before moving to Elderly Waiver is preferred. +
Sliding Scale		
Housing Support (formerly Minnesota Group Residential Housing) Payments	x	
Federal rent subsidy		
Other; explain:		

Payment Options for Services

Payment Option	Accepted	Comments
Waivered Services (EW, CADI, BI); specify any limitations	x	EW & CADI
Private Pay	x	
Long Term Care Insurance	x	There is a processing fee for using Long Term Care Insurance. +
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	x	
Secured outdoor grounds on facility premises	x	
Individualized digital/alarm monitoring for wandering or exit-seeking behavior	x	Stanley Health Systems
Prepared to manage challenging behaviors	x	Additional fee may apply based on assessment.
Other; specify:	Congregate setting and the welfare/safety of all clients must be taken into consideration. We may not be able to manage all challenging behavior	


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	Fee based upon frequency.
Communication with physician/pharmacy about ordering or refill requests	x	With medication management package.
Medication administration by licensed or unlicensed personnel	x	With medication management package.
Delivery of medication to resident previously set up by the facility nurse	x	With medication management package.
Medications set up by nurse for resident to self-administer	x	With medication management package.
Delivery of medication from the original containers to resident	x	With medication management package.
Delivery of liquid or food to resident if required to ingest medication	x	Based on assesment.
Delegation of medication management services by licensed health professional to unlicensed staff	x	Primary Services Delivery Method.
Central storage of medication	x	
Diabetic Care: insulin pen dosing	x	Additional fee may apply.
Diabetic Care: insulin pump management	x	Provided under client arrangement through third party or clinet independent with pump. 
Diabetic Care: insulin syringe dosing	x	Additional fee may apply based on assessment.
Diabetic Care: sliding scale insulin management	x	Additional fees may apply based on assessment and only with the use of an insulin pen. 
Clinical monitoring of labs related to medications	x	Additional fee may apply based on assessment.
Anticoagulant medication management	x	Additional fee may apply based on assessment.
B-12 injections	x	Pre-Physician orders - fee based upon assesment.


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Service	Available	Comments
Nutritional supplement administration	x	Per-Physician orders - fee based upon assessment.
(IV) Intravenous management		
PICC lines (Peripherally Inserted Central Catheter)		
Injections; specify types or limits in comments (IM, SQ)	x	Scheduled medications only in coordination with nursing schedule. 
Nebulizers	x	Additional fee may apply based on assessment.
Inhalers	x	Additional fee may apply based on assessment.
Ear drops	x	Additional fee may apply based on assessment.
Eye drops	x	Additional fee may apply based on assessment.
Topicals	x	Additional fee may apply based on assessment.
Patches	x	Additional fee may apply based on assessment.
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	x	Additional fee may apply based on assessment.
Wound care: basic	x	Additional fee may apply based on assessment.
Wound care: complex	x	In coordination with skilled nursing.
Diabetic care: blood glucose monitoring	x	Additional fee may apply based on assessment.
Diabetic care: foot/nail care	x	Additional fee may apply based on assessment.
C-PAP	x	Additional fee may apply based on assessment.
Bi-PAP	x	Additional fee may apply based on assessment.
Oxygen Management; specify any delivery system limitations	x	No liquid oxygen management; additional fee may apply based on assessment. 
Oxygen saturation checks	x	
Ventilators		
Suctioning		
Tracheostomy Care: cleaning of site and tube		
Tracheostomy Care: showering assistance		
Tracheostomy Care: suctioning assistance		
Pacemaker Checks	x	In coordination with primary/cardiology physician.
Arrange for On-Site Dialysis		
Arrange for/set-up Off-Site Dialysis		

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Service	Available	Comments
Peritoneal Dialysis (on-site)		
Compression stockings	x	Additional fee may apply based on assessment.
Lymphedema wraps	x	In coordination with skilled nursing and physical therapy.
Fall Prevention: balance assessments	x	In coordination with skilled nursing and physical therapy.
Fall Prevention: exercise programs	x	In coordination with physical therapy.
Fall Prevention: strength training	x	In coordination with physical therapy.
Integrative Health Services: acupuncture		
Integrative Health Services: aromatherapy	x	Aromatherapy is used in our Memory Care.
Integrative Health Services: healing touch		
Integrative Health Services: massage		
Blood pressure checks	x	Additional fee may apply based on assessment.
Daily weight check	x	Additional fee may apply based on assessment.
Indwelling urinary catheter care; emptying and bag changes	x	Additional fee may apply based on assessment.
Indwelling urinary catheter replacement by nurse	x	Provided by client arrangement through third party provider. 
Straight (intermittent) catheter assistance		
Suprapubic catheter care		
Ostomy care	x	Additional fee may apply based upon assessment.
Arrangements for and coordination with hospice care	x	
End-of-life palliative care	x	Provided by client arrangement through third party provider. 




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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	Based on assessment.
Bathing: shower	x	Based on assessment.
Bathing: bathtub	x	Based on assessment.
Oral hygiene	x	Based on assessment.
Denture care	x	Based on assessment.
Cuing/reminders for self-cares	x	Based on assessment.
Use of special utensils	x	
Feeding assistance for residents with complicated eating problems	x	Additional fees apply, may require thrid party corrdination. 
Set-up and cut food at meals	x	MC - Yes AL - No 
Manual Feeding; specify limits in comments	x	MC - In community dining room. AL - Based on assessment, additional fees may apply. 
Tube Feeding; specify limits in comments		
Feeding in common area with one staff member per resident	x	Additional fees may apply.

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Service	Available	Comments
Feeding in resident's apartment with one staff member per resident	x	MC - Yes, if resident is not able to come to meal. AL - No +
Grooming: hair care, make-up, shaving, application of lotion, etc.	x	Based on assessment.
Nail care: toenails, fingernails	x	Based on assessment.
Toileting: standby assistance/supervision	x	Based on assessment.
Changing incontinence products; perineal care	x	Based on assessment.
Ordering replacement incontinence products	x	As needed.
Assistance with bowel and bladder control, devices, and training programs	x	Scheduled through OT if resident qualifies for Home Health services with Medicare. +
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	Based on assessment.
Transfers with assist of one staff	x	Based on assessment.
Transfers with assist of two staff	x	Based on assessment.
Transfers utilizing sit-to-stand lifts	x	Based on assessment.
Transfers utilizing sliding boards	x	Based on assessment.
Transfers utilizing bariatric equipment		
Ceiling lift transfers		


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Service	Available	Comments
Non-mechanical transfers (trapeze)	x	Based on assessment.
Mechanical lift: assist of 1 transfer		
Mechanical lift: assist of 2 transfer	x	Based on assessment.
Ambulation with assist of 1	x	Based on assessment.
Bed mobility	x	Based on assessment.
Assistance with chair mobility	x	Based on assessment.
Chair Glide System		
Mechanical Stair Lift System		
Handrails; in personal space	x	Based on assessment.
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	x	Additional fees may apply.
Every 30-minutes safety checks	x	Additional fees may apply.
Hourly safety checks	x	MC - Factored into MC level of care, based on assessment. AL - Additional cost. 
Every two-hours safety checks	x	MC - Factored into MC level of care, based on assessment. AL - Additional cost 


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Service	Available	Comments
Daily safety checks	x	AL & MC Offered for IL +
Emergency call system; specify type in comments	x	AL - Pendant and bathroom call light. MC - Pendant, based on assessment. +
Non-emergency call system; specify type in comments	x	AL - Pendant and bathroom call light. MC - Pendant, based on assessment. +
Digital wander alert device on resident	x	Stanely Health Systems
Wander alert system at facility exits	x	Stanley Health Systems
Staff monitoring at facility exits; specify method in comments		
Visitor check-in/check-out at facility main entrance	x	Visitors are buzzed in at main entrance, and sign in/out in the visitors log. +
Bed alarms or movement sensing technology		
Door sensors: specify locations (unit, resident room, exits, etc.)	x	MC - in bathroom and on apartment doors, only in use during the overnight hours. +
Security Guard		
Security cameras in common spaces	x	Cameras in common areas and throughout the community. +
Key card/fob access: specify locations (unit, resident room, exits, etc.)		
Other lock systems: specify locations (unit, resident room, exits, etc.)	x	Resident apartment are locked by key.
Emergency generator(s) to power the facility during power outages	x	Desginated power outlets, emergency lighting, and nurses station. +
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	At additional cost.
Lunch available in community space	x	
Lunch available; delivered to apartment	x	At additional cost.
Dinner available in community space	x	
Dinner available; delivered to apartment	x	At additional cost.
Meal tray delivery and pick-up from resident's unit	x	At additional cost.
Meal preparation in resident's unit		
Thickened Liquids; specify limits in comments	x	Thickened liquids needs to be purchased pre-mixed, and it is an additional cost. 
Modified Texture Diets; specify limits in comments	x	
Therapeutic Diets: cardiac	x	
Therapeutic Diets: diabetic or calorie controlled	x	
Therapeutic Diets: gluten-free	x	
Therapeutic Diets: high fiber	x	
Therapeutic Diets: low fat/low cholesterol	x	
Therapeutic Diets: low sodium	x	

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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	Always available menu options that can accommodate preferences. 
Dietitian or Nutritionist Services	x	
Carbohydrate intake/tracking		
Meal consumption tracking	x	Weekly tracking upon request. Additional fee may apply 
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	This is a service that is available at an additional cost.
Assistance with meals or food preparation		
Daily Social and Recreational Services	Required	
Housekeeping: bed making	x	
Housekeeping: defrost and clean refrigerator	x	Additional costs may apply.
Housekeeping: dusting	x	
Housekeeping: organize closets and drawers		

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
Service	Available	Comments
Housekeeping: trash removal; specify frequency in comments	x	Daily trash emptied and as needed.
Housekeeping: weekly general cleaning (clean floors, sinks, shower/tub, toilet, and vacuum)	x	Weekly housekeeping scheduled. Additional housekeeping available with additional cost. 
Housekeeping: other; specify in comments		
Laundry: linen (change bed, launder sheets, towels)	x	2 loads per week. Additional laundry available with additional cost. 
Laundry: wash, dry, and fold clothing; specify loads per week in comments	x	
Laundry: other; specify in comments		
Schedule offsite social and recreational activities	x	
Schedule medical and social service appointments		
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	
Provide transportation to medical and social service appointments	x	Can assist with setting up outside transportation.
Assistance accessing community resources and social services	Required	
Shopping: facility sponsored	x	One time a month and as transportation permits.
Spiritual Care/Religious Services; on-site	x	
Assistance with bill paying/budgeting	x	At an additional cost.
Communication boards or other supplemental communication devices		
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		Available through outside resources and can be arranged by facility. Additional fee apply. 
One-to-One staffing for special circumstances		Available through outside resources and can be arranged by facility. Additional fee apply. 
Overnight companion		Available through outside resources and can be arranged by facility. Additional fee apply. 
Registered Nurse: on-site "part time"		
Registered Nurse: on-site "full time"	x	Full time Director of Health Services and Assistant Director of Health Services. 
Licensed Practical Nurse: on site "part time"		
Licensed Practical Nurse: on-site "full time"	x	2 full time LPN's - hours vary between AM and PM shifts.
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	x	

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Staffing	Available	Comments
Physical Therapist available or can be arranged	x	Will assist with coordination with on-site agency.
Respiratory Therapist available or can be arranged	x	Will assist with coordination with on-site agency.
Occupational Therapist available or can be arranged	x	Will assist with coordination with on-site agency.
Speech Language Pathologist available or can be arranged	x	Will assist with coordination with on-site agency.
Social Worker available or can be arranged	x	Will assist with coordination with on-site agency.
Other Licensed Professional available; specify type in comments	x	CNP - on-site once weekly, residents can be seen by request if they are under their care. 
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	x	
Semi-private units		
Studio/efficiency units	x	MC - 21
One-bedroom units	x	AL - 24
Two-bedroom units	x	AL - 12
Kitchen/Kitchenettes in units	x	
Internet access	x	Included in rent.

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Amenity	Available	Comments
Cable (television)	x	Included in rent.
Pets allowed	x	Pet Deposit of \$500 and resident must be able to provide the care for the pet. +
Pet care; specify in comments		
Pool		
Whirlpool	x	
Exercise Room	x	
Library	x	
Activity Room	x	
Garden/outdoor spaces	x	
Chapel	x	
Private entertaining space	x	Private dining room, The Lodge, The Great Room may all be reserved for private events. +
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		
Washer-Dryer in units	x	AL - washer and dryer in the units.
Central Air Conditioning	x	
Fully sprinklered building	x	

Amenity	Available	Comments
Designated smoking area inside (not apartment space)		
Designated smoking area outside	x	Smoking area is located outside the Great Room door leading to the patio. away from the door. 
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 \(www.seniorlinkageline.com/\)](http://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