

Uniform Disclosure of Assisted Living Services and Amenities

Purpose

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): 05/14/2021

Name of Assisted Living: SpringBrook Village of La Crescent LLC

Unique building/unit descriptive (if applicable): _____

Physical Address: 1384 County Road 25, La Crescent, MN 55947

If the indicated services are provided for more than one building/unit (on the campus), list all additional buildings/units this applies to. Use additional pages if necessary.



No additional buildings/units

Additional Building:

Unique building/unit descriptive (if applicable): _____

Physical Address (if different than above): _____

Additional Building:

Unique building/unit descriptive (if applicable): _____

Physical Address (if different than above): _____

Additional Building:

Unique building/unit descriptive (if applicable): _____

Physical Address (if different than above): _____

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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 *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: 6

Evening Shift: 6

Night shift: 3

Payment Options

The facility will indicate by placing an “X” in the “Available” column if the payment option is accepted (may check more than one). Please indicate in the “Comments” column below if a pre-determined length of private funds payment source is required before acceptance of Medicaid or waived service funds; and if yes, indicate 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		

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Payment Option	Accepted	Comments
Other; explain		

Payment Options for Services

Payment Option	Accepted	Comments
Waivered Services (EW, CADI, BI); specify any limitations	X	
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 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	Memory Care Unit - Bldg C only
Secured outdoor grounds on facility premises	X	Memory Care Unit - Bldg C only
Individualized digital/alarm monitoring for wandering or exit-seeking behavior	X	Memory Care Unit - Bldg C only
Prepared to manage challenging behaviors	X	Memory Care Unit - Bldg C only

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Service	Available	Comments
Other; specify in comments		

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	Not available for Independent Packages
Communication with physician/pharmacy about ordering or refill requests	X	Not available for Independent Packages
Medication administration by licensed or unlicensed personnel	X	Not available for Independent Packages
Delivery of medication to resident previously set up by the facility nurse	X	Not available for Independent Packages
Medications set up by nurse for resident to self-administer	X	Not available for Independent Packages
Delivery of medication from the original containers to resident		
Delivery of liquid or food to resident if required to ingest medication	X	Not available for Independent Packages
Delegation of medication management services by licensed health professional to unlicensed staff	X	Not available for Independent Packages
Central storage of medication	X	Not available for Independent Packages
Diabetic Care: insulin pen dosing	X	Not available for Independent Packages
Diabetic Care: insulin pump management		
Diabetic Care: insulin syringe dosing		
Diabetic Care: sliding scale insulin management		

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Service	Available	Comments
Clinical monitoring of labs related to medications		
Anticoagulant medication management	X	Not available for Independent Packages
B-12 injections		
Nutritional supplement administration		
(IV) Intravenous management		
PICC lines (Peripherally Inserted Central Catheter)		
Injections; specify types or limits in comments (IM, SQ)		
Nebulizers	X	Not available for Independent Packages
Inhalers	X	Not available for Independent Packages
Ear drops	X	Not available for Independent Packages
Eye drops	X	Not available for Independent Packages
Topicals	X	Not available for Independent Packages
Patches	X	Not available for Independent Packages
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		

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Service	Available	Comments
Other; specify in comments		

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	Not available for Independent Packages
Wound care: basic	X	Not available for Independent Packages
Wound care: complex		
Diabetic care: blood glucose monitoring	X	Not available for Independent Packages
Diabetic care: foot/nail care	X	Not available for Independent Packages
C-PAP	X	Not available for Independent Packages
Bi-PAP		
Oxygen Management; specify any delivery system limitations	X	Not available for Independent Packages
Oxygen saturation checks	X	Not available for Independent Packages
Ventilators		
Suctioning		
Tracheostomy Care: cleaning of site and tube		
Tracheostomy Care: showering assistance		

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Service	Available	Comments
Tracheostomy Care: suctioning assistance		
Pacemaker Checks	X	Not available for Independent Packages
Arrange for On-Site Dialysis		
Arrange for/set-up Off-Site Dialysis		
Peritoneal Dialysis (on-site)		
Compression stockings	X	Not available for Independent Packages
Lymphedema wraps		
Fall Prevention: balance assessments		
Fall Prevention: exercise programs		
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	Not available for Independent Packages
Daily weight check	X	Not available for Independent Packages
Indwelling urinary catheter care; emptying and bag changes	X	Not available for Independent Packages
Indwelling urinary catheter replacement by nurse		

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Service	Available	Comments
Straight (intermittent) catheter assistance		
Suprapubic catheter care		
Ostomy care		
Arrangements for and coordination with hospice care	x	Not available for Independent Packages
End-of-life palliative care	x	In coordination with hospice services - Not available for Independent Packages
Access to and training on use of automatic electronic defibrillators (AED)		
Training of and use of Cardiopulmonary Resuscitation (CPR)		
Other; specify in comments		

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	Not available for Independent Packages
Bathing: shower	x	Not available for Independent Packages
Bathing: bathtub	x	Spa Tubs available in specific areas not in individual units
Oral hygiene	x	Not available for Independent Packages
Denture care	x	Not available for Independent Packages
Cueing/reminders for self-care	x	Not available for Independent Packages

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Service	Available	Comments
Use of special utensils	X	Not available for Independent Packages
Feeding assistance for residents with complicated eating problems	X	Not available for Independent Packages
Set-up and cut food at meals	X	Not available for Independent Packages
Manual Feeding; specify limits in comments	X	Not available for Independent Packages
Tube Feeding; specify limits in comments		
Feeding in common area with one staff member per resident	X	Only available in building B & C for current resident change in condition
Feeding in resident's apartment with one staff member per resident	X	Only available in building B & C for current resident change in condition
Grooming: hair care, make-up, shaving, application of lotion, etc.	X	Not available for Independent Packages
Nail care: toenails, fingernails	X	Not available for Independent Packages
Toileting: standby assistance/supervision	X	Not available for Independent Packages
Changing incontinence products; perineal care	X	Not available for Independent Packages
Ordering replacement incontinence products	X	Not available for Independent Packages; Only for those on EW
Assistance with bowel and bladder control, devices, and training programs	x	Not available for Independent Packages; Purwick system
Other; specify in comments		

Section 5: Mobility Support

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

Mobility Services Available

Service	Available	Comments
Standby Assistance	X	Not available for Independent Packages
Transfers with assist of one staff	X	Not available for Independent Packages
Transfers with assist of two staff	X	Only available in building C for current resident change in condition
Transfers utilizing sit-to-stand lifts	X	Only available in building C for current resident change in condition
Transfers utilizing sliding boards		
Transfers utilizing bariatric equipment		
Ceiling lift transfers		
Non-mechanical transfers (trapeze)		
Mechanical lift: assist of 1 transfer		
Mechanical lift: assist of 2 transfer	X	Only available in building C for current resident change in condition
Ambulation with assist of 1	X	Only available in building C for current resident change in condition
Bed mobility	X	Only available in building C for current resident change in condition
Assistance with chair mobility	X	Only available in building C for current resident change in condition
Chair Glide System		
Mechanical Stair Lift System		
Handrails; in personal space	X	In all bathrooms

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Service	Available	Comments
Elevators	X	
Other; specify in comments		

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		
Every two-hours safety checks	X	Only available in Studio Assisted Living and Memory Care (both are in Building C)
Daily safety checks	X	
Emergency call system; specify type in comments	X	Call button pendants for residents to wear to notify staff
Non-emergency call system; specify type in comments	X	Call button pendants for residents to wear to notify staff
Digital wander alert device on resident		
Wander alert system at facility exits		
Staff monitoring at facility exits; specify method in comments	X	In Memory care only - alarm at exits of unit that sounds and goes to staff pager system
Visitor check-in/check-out at facility main entrance	X	Sign in/out book
Bed alarms or movement sensing technology		

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Service	Available	Comments
Door sensors: specify locations (unit, resident room, exits, etc.)		
Security Guard		
Security cameras in common spaces	X	Security cameras - Main entrances, elevator entrances, nurses stations
Key card/fob access: specify locations (unit, resident room, exits, etc.)	X	Independent Living entrance only
Other lock systems: specify locations (unit, resident room, exits, etc.)	X	Lock and key system for all resident units
Emergency generator(s) to power the facility during power outages	X	
Other; specify in comments		

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	Independent Package requires additional meal purchase above 1 meal
Breakfast available in community space	X	
Breakfast available; delivered to apartment	X	Additional fees may be charged for meal delivery
Lunch available in community space	X	
Lunch available; delivered to apartment	X	Additional fees may be charged for meal delivery
Dinner available in community space	X	
Dinner available; delivered to apartment	X	Additional fees may be charged for meal delivery

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Service	Available	Comments
Meal tray delivery and pick-up from resident's unit	X	
Meal preparation in resident's unit		
Thickened Liquids; specify limits in comments	X	Not available for Independent Packages
Modified Texture Diets; specify limits in comments	X	Not available for Independent Packages
Therapeutic Diets: cardiac		
Therapeutic Diets: diabetic or calorie controlled		
Therapeutic Diets: gluten-free		
Therapeutic Diets: high fiber		
Therapeutic Diets: low fat/low cholesterol		
Therapeutic Diets: low sodium	X	
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	Only available in Studio packages
Other; specify in comments		

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	
Assistance with meals or food preparation		
Daily Social and Recreational Services	Required	
Housekeeping: bed making	X	Not available for Independent Packages
Housekeeping: defrost and clean refrigerator	X	For independent packages - additional fees may apply
Housekeeping: dusting	X	Independent packages include 2x per month housekeeping - all other packages are weekly
Housekeeping: organize closets and drawers		
Housekeeping: trash removal; specify frequency in comments	X	Independent Packages include 2x per month All other packages are weekly
Housekeeping: weekly general cleaning (clean floors, sinks, shower/tub, toilet, and vacuum)	X	Independent Packages are 2 x per month
Housekeeping: other; specify in comments	X	Light dusting is included - we do not move personal items
Laundry: linen (change bed, launder sheets, towels)	X	Not available for Independent Packages
Laundry: wash, dry, and fold clothing; specify loads per week in comments	X	Not available for Independent Packages
Laundry: other; specify in comments		
Schedule offsite social and recreational activities		
Schedule medical and social service appointments	X	Not available for Independent Packages
Assistance with arranging transportation for personal, social, and recreational activities	Required	Not available for Independent Packages

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Service	Available	Comments
Assistance with arranging transportation to medical and social services appointments	Required	Not available for Independent Packages
Provide transportation to social and recreational activities		
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	X	
Assistance with bill paying/budgeting		
Communication boards or other supplemental communication devices	X	Communication boards with upcoming social activities
Primary languages spoken by staff	X	English
Supervision of smoking		
Other; specify in comments		

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		

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Staffing	Available	Comments
Registered Nurse: on-site “part time”	X	
Registered Nurse: on-site “full time”	X	
Licensed Practical Nurse: on site “part time”		
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		
Physical Therapist available or can be arranged	X	Can be arranged
Respiratory Therapist available or can be arranged	X	Can be arranged
Occupational Therapist available or can be arranged	X	Can be arranged
Speech Language Pathologist available or can be arranged	X	Can be arranged
Social Worker available or can be arranged		
Other Licensed Professional available; specify type in comments		
Other; specify in comments		

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	
One-bedroom units	X	Independent neighborhood and assisted living neighborhood only
Two-bedroom units	X	Independent neighborhood only
Kitchen/Kitchenettes in units	X	Independent neighborhood and assisted living neighborhoods only
Internet access	X	Non streaming only
Cable (television)	X	
Pets allowed	X	Based on Executive Director's discretion. Additional fees apply
Pet care; specify in comments		
Pool		
Whirlpool		
Exercise Room	X	
Library	X	
Activity Room	X	

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Garden/outdoor spaces	X	
Chapel	X	
Private entertaining space	X	
Communal Dining room	X	
Beauty/Barber Shop	X	Additional fees apply
Parking available for residents	X	
Parking available for guests	X	
Guest accommodations		
Laundry Room accessible to Residents	X	
Washer-Dryer in units	X	Only available in specific units - some hookups are also available
Central Air Conditioning	X	Common Areas only Apartments/units have individual AC units
Fully sprinklered building	X	
Designated smoking area inside (not apartment space)		
Designated smoking area outside	X	
Other amenity; specify in comments		
Other amenity; specify in comments		

Additional Information

Sixty days before the facility plans to reduce or eliminate one or more services for a particular resident, 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 \(https://mn.gov/board-on-aging/direct-services/ombudsman/\)](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

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

Date (MM/DD/YYYY)

Individual or Legal/Designated Representative