

# 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): 05/29/2022

Name of Assisted Living: Twin Cities Group Homes LLC

Unique building/unit descriptive (if applicable): N/A

Physical Address: 711 22nd Ave NE Minneapolis MN 55418

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): N/A

Physical Address (if different than above): \_\_\_\_\_

Additional Building:

Unique building/unit descriptive (if applicable): N/A

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: 2

Evening Shift: 2

Night shift: 1

## 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		N/A
Sliding Scale		N/A
Housing Support (formerly Minnesota Group Residential Housing) Payments		N/A
Federal rent subsidy		N/A

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Payment Option	Accepted	Comments
Other; explain		N/A

**Payment Options for Services**

Payment Option	Accepted	Comments
Waivered Services (EW, CADI, BI); specify any limitations	X	No limitation.
Private Pay		N/A
Long Term Care Insurance		N/A
Other; explain		N/A

**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		Dementia care not available.
Secured outdoor grounds on facility premises		Dementia care not available.
Individualized digital/alarm monitoring for wandering or exit-seeking behavior		Dementia care not available.
Prepared to manage challenging behaviors		Dementia care not available.

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Service	Available	Comments
Other; specify in comments		Dementia care not available.

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

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Service	Available	Comments
Clinical monitoring of labs related to medications	Y	Available.
Anticoagulant medication management		Not available.
B-12 injections		Not available.
Nutritional supplement administration		Not available.
(IV) Intravenous management		Not available.
PICC lines (Peripherally Inserted Central Catheter)		Not available.
Injections; specify types or limits in comments (IM, SQ)		Not available.
Nebulizers	Y	Available
Inhalers	Y	Available.
Ear drops	Y	Available.
Eye drops	Y	Available.
Topicals	Y	Available.
Patches	Y	Available.
Medication delivery via enteral (feeding) tube		Not available.
Pain pump management		Not available.
Medical cannabis administration (pill form) for certified patients		Not available.
Medical Cannabis storage for certified patients		Not available.
Cannabidiol oil administration for certified patients		Not available.

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Service	Available	Comments
Other; specify in comments		None.

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

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Service	Available	Comments
Tracheostomy Care: suctioning assistance		Not available.
Pacemaker Checks		Not available.
Arrange for On-Site Dialysis		Not available.
Arrange for/set-up Off-Site Dialysis		Not available.
Peritoneal Dialysis (on-site)		Not available.
Compression stockings		Not available.
Lymphedema wraps		Not available.
Fall Prevention: balance assessments	Y	Available.
Fall Prevention: exercise programs		Not available.
Fall Prevention: strength training		Not available.
Integrative Health Services: acupuncture		Not available.
Integrative Health Services: aromatherapy		Not available.
Integrative Health Services: healing touch		Not available.
Integrative Health Services: massage		Not available.
Blood pressure checks	Y	Available.
Daily weight check	Y	Available.
Indwelling urinary catheter care; emptying and bag changes		Not available.
Indwelling urinary catheter replacement by nurse		Not available.

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Service	Available	Comments
Straight (intermittent) catheter assistance		Not available.
Suprapubic catheter care		Not available.
Ostomy care		Not available.
Arrangements for and coordination with hospice care		Not available.
End-of-life palliative care		Not available.
Access to and training on use of automatic electronic defibrillators (AED)		Not available.
Training of and use of Cardiopulmonary Resuscitation (CPR)		Not available.
Other; specify in comments		None.

### 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	Y	Available.
Bathing: shower	Y	Available.
Bathing: bathtub	Y	Available.
Oral hygiene	Y	Available.
Denture care	Y	Available.
Cueing/reminders for self-care	Y	Available.

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Service	Available	Comments
Use of special utensils		Not available.
Feeding assistance for residents with complicated eating problems		Not available.
Set-up and cut food at meals	Y	Available.
Manual Feeding; specify limits in comments		Not available.
Tube Feeding; specify limits in comments		Not available.
Feeding in common area with one staff member per resident	Y	Available.
Feeding in resident's apartment with one staff member per resident		Not available.
Grooming: hair care, make-up, shaving, application of lotion, etc.	Y	Available.
Nail care: toenails, fingernails	Y	Available.
Toileting: standby assistance/supervision	Y	Available.
Changing incontinence products; perineal care	Y	Available.
Ordering replacement incontinence products	Y	Available.
Assistance with bowel and bladder control, devices, and training programs	Y	Available.
Other; specify in comments		None.

## Section 5: Mobility Support

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

### Mobility Services Available

Service	Available	Comments
Standby Assistance	Y	Available.
Transfers with assist of one staff	Y	Available.
Transfers with assist of two staff	Y	Available.
Transfers utilizing sit-to-stand lifts		Not available.
Transfers utilizing sliding boards		Not available.
Transfers utilizing bariatric equipment		Not available.
Ceiling lift transfers		Not available.
Non-mechanical transfers (trapeze)	Y	Available.
Mechanical lift: assist of 1 transfer		Not available.
Mechanical lift: assist of 2 transfer		Not available.
Ambulation with assist of 1	Y	Available.
Bed mobility	Y	Available.
Assistance with chair mobility	Y	Available.
Chair Glide System		Not Available.
Mechanical Stair Lift System		Not available.
Handrails; in personal space	Y	Available.

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Service	Available	Comments
Elevators		Not available.
Other; specify in comments		None.

## 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	Y	Available.
Every 30-minutes safety checks	Y	Available.
Hourly safety checks	Y	Available.
Every two-hours safety checks	Y	Available.
Daily safety checks	Y	Available.
Emergency call system; specify type in comments	Y	Phones.
Non-emergency call system; specify type in comments	Y	Phones.
Digital wander alert device on resident		Not available.
Wander alert system at facility exits		Not available.
Staff monitoring at facility exits; specify method in comments	Y	Camera and door alarm.
Visitor check-in/check-out at facility main entrance	Y	Available.
Bed alarms or movement sensing technology		Not available.

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Service	Available	Comments
Door sensors: specify locations (unit, resident room, exits, etc.)	Y	Available.
Security Guard		Not available.
Security cameras in common spaces	Y	Available.
Key card/fob access: specify locations (unit, resident room, exits, etc.)	Y	Available.
Other lock systems: specify locations (unit, resident room, exits, etc.)	Y	Locker and key provided to each resident.
Emergency generator(s) to power the facility during power outages		Not available.
Other; specify in comments		None.

## 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	Available.
Breakfast available in community space	Y	Available.
Breakfast available; delivered to apartment	Y	Available.
Lunch available in community space	Y	Available.
Lunch available; delivered to apartment	Y	Available.
Dinner available in community space	Y	Available.
Dinner available; delivered to apartment	Y	Available.

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Service	Available	Comments
Meal tray delivery and pick-up from resident's unit	Y	Available.
Meal preparation in resident's unit		Not available.
Thickened Liquids; specify limits in comments	Y	Available.
Modified Texture Diets; specify limits in comments	Y	Available.
Therapeutic Diets: cardiac		Not available but can be prepared.
Therapeutic Diets: diabetic or calorie controlled		Not available but can be prepared.
Therapeutic Diets: gluten-free		Not available but can be prepared.
Therapeutic Diets: high fiber		Not available but can be prepared.
Therapeutic Diets: low fat/low cholesterol		Not available but can be prepared.
Therapeutic Diets: low sodium		Not available but can be prepared.
Therapeutic Diets: no added salt		Not available but can be prepared.
Therapeutic Diets: renal diet		Not available but can be prepared.
Other special diets: kosher	Y	Available.
Other special diets: (vegetarian, vegan, etc.) specify in comments	Y	Available upon request.
Dietitian or Nutritionist Services		Not available but can be provided.
Carbohydrate intake/tracking		Not available but can be done.
Meal consumption tracking		Not available but can be done.
Other; specify in comments		None.

## 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	Y	Available.
Assistance with meals or food preparation	Y	Available.
Daily Social and Recreational Services	Required	Available.
Housekeeping: bed making	Y	Available.
Housekeeping: defrost and clean refrigerator	Y	Available.
Housekeeping: dusting	Y	Available.
Housekeeping: organize closets and drawers	Y	Available.
Housekeeping: trash removal; specify frequency in comments	Y	Available.
Housekeeping: weekly general cleaning (clean floors, sinks, shower/tub, toilet, and vacuum)	Y	Available.
Housekeeping: other; specify in comments	Y	Available.
Laundry: linen (change bed, launder sheets, towels)	Y	Available.
Laundry: wash, dry, and fold clothing; specify loads per week in comments	Y	Available.
Laundry: other; specify in comments	Y	Available.
Schedule offsite social and recreational activities	Y	Available.
Schedule medical and social service appointments	Y	Available.
Assistance with arranging transportation for personal, social, and recreational activities	Required	Available.

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Service	Available	Comments
Assistance with arranging transportation to medical and social services appointments	Required	Available.
Provide transportation to social and recreational activities	Y	Available.
Provide transportation to medical and social service appointments	Y	Available.
Assistance accessing community resources and social services	Required	Available.
Shopping: facility sponsored	Y	Available.
Spiritual Care/Religious Services; on-site	Y	Available.
Assistance with bill paying/budgeting	Y	Available.
Communication boards or other supplemental communication devices	Y	Available.
Primary languages spoken by staff	Y	Available.
Supervision of smoking	Y	
Other; specify in comments		None.

## Section 9: Staffing

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

### Staffing Available

Staffing	Available	Comments
One-to-One staffing available	Y	Available.
One-to-One staffing for special circumstances	Y	Available.
Overnight companion	Y	Available.

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Staffing	Available	Comments
Registered Nurse: on-site "part time"	Y	Available.
Registered Nurse: on-site "full time"	Y	Available.
Licensed Practical Nurse: on site "part time"		Not available.
Licensed Practical Nurse: on-site "full time"		Not available.
Assisted Living Director: on-site "part time"	Y	Available.
Assisted Living Director: on site "full time"	Y	Available.
Advanced Practice Registered Nurse: on-site "part time"		Not available.
Advanced Practice Registered Nurse: on site "full time"		Not available.
Activities Director: Part Time		Not available, done by trained staff.
Activities Director: Full Time		Not available, done by trained staff.
Dietician/Nutritionist consultant available or can be arranged		Can be arranged.
Physical Therapist available or can be arranged		Can be arranged.
Respiratory Therapist available or can be arranged		Can be arranged.
Occupational Therapist available or can be arranged		Can be arranged.
Speech Language Pathologist available or can be arranged		Can be arranged.
Social Worker available or can be arranged		Can be arranged.
Other Licensed Professional available; specify type in comments		Can be arranged.
Other; specify in comments		None.

## Section 10: Amenities

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

### Amenities Available

Amenity	Available	Comments
Accessible bathrooms; specify limits in comments	Y	Available to each resident.
Private units	Y	Available.
Semi-private units	Y	Available.
Studio/efficiency units		Not available.
One-bedroom units	Y	Available.
Two-bedroom units	Y	Available.
Kitchen/Kitchenettes in units		Not available.
Internet access	Y	Available 24/7.
Cable (television)	Y	Available 24/7.
Pets allowed	Y	Allowed.
Pet care; specify in comments		Not available.
Pool		Not available.
Whirlpool		Not available.
Exercise Room		Not available.
Library		Not available.
Activity Room	Y	Available.

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Garden/outdoor spaces	Y	Outdoor space available.
Chapel		Not available.
Private entertaining space	Y	Available.
Communal Dining room	Y	Available.
Beauty/Barber Shop		Not available.
Parking available for residents	Y	Available.
Parking available for guests	Y	Available.
Guest accommodations		Not available.
Laundry Room accessible to Residents	Y	Available.
Washer-Dryer in units	Y	Available.
Central Air Conditioning	Y	Available.
Fully sprinklered building	Y	Available.
Designated smoking area inside (not apartment space)	Y	Available.
Designated smoking area outside	Y	Available.
Other amenity; specify in comments		Not available.
Other amenity; specify in comments		None.

## 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](http://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)

05/29/2022  
05/29/2022  
\_\_\_\_\_  
Individual or Legal/Designated Representative