

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): 11/03/2025

Name of Assisted Living: New Perspective – Arden Hills

HFID: 39608

Unique building/unit description (if applicable): _____

Facility Address: 3565 Pine Tree Drive, Arden Hills, MN 55112

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 _____

Evening Shift: ⁵ _____

Night shift: ³ _____

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	Persuant to payment terms of residency agreement
Sliding Scale		Not accepted
Housing Support (formerly Minnesota Group Residential Housing) Payments		Not accepted
Federal rent subsidy		Not accepted
Other; explain:		N/A

Payment Options for Services

Payment Option	Accepted	Comments
Waivered Services (EW, CADI, BI); specify any limitations	X	EW
Private Pay	X	Persuant to payment terms of residency agreement
Long Term Care Insurance	X	Resident responsible for payment processing
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	Memory Care courtyard
Individualized digital/alarm monitoring for wandering or exit-seeking behavior		Not available
Prepared to manage challenging behaviors	X	Available to residents receiving med management services
Other; specify:	Prepared to manage challenging behaviors: MC situational only. Will be assessed for management abilities. Not applicable to aggressive behaviors.	

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		Not available
Communication with physician/pharmacy about ordering or refill requests	X	If community manages medications (med management required in Memory Care)
Medication administration by licensed or unlicensed personnel	X	If community manages medications (med management required in Memory Care)
Delivery of medication to resident previously set up by the facility nurse		Not available
Medications set up by nurse for resident to self-administer		Not available
Delivery of medication from the original containers to resident	X	Medications administered from approved pharmacy dispensed containers only
Delivery of liquid or food to resident if required to ingest medication	X	Available to residents receiving med management services
Delegation of medication management services by licensed health professional to unlicensed staff	X	Available to residents receiving med management services
Central storage of medication	X	Available to residents receiving med management services
Diabetic Care: insulin pen dosing	X	Available to residents receiving med management services
Diabetic Care: insulin pump management		Not available
Diabetic Care: insulin syringe dosing		Not available
Diabetic Care: sliding scale insulin management	X	Available to residents receiving med management services
Clinical monitoring of labs related to medications	X	Available to residents receiving med management services
Anticoagulant medication management	X	Oral only, Available to residents receiving med management services
B-12 injections	X	Administered by licensed nurse only; Available to residents receiving med management services

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Service	Available	Comments
Nutritional supplement administration	X	Available to residents receiving med management services
(IV) Intravenous management		Not available
PICC lines (Peripherally Inserted Central Catheter)		Not available
Injections; specify types or limits in comments (IM, SQ)	X	IM B12 by licensed nurse for additional charge, Insulin or Epi-pen by ULP. Med plan required.
Nebulizers	X	Available to residents receiving med management services
Inhalers	X	Available to residents receiving med management services
Ear drops	X	Available to residents receiving med management services
Eye drops	X	Available to residents receiving med management services
Topicals	X	Includes non-sterile topical medications such as creams, ointments, or patches not related to complex wound care
Patches	X	Available to residents receiving med management services
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
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		Not available
Wound care: basic	X	Available to residents receiving med/treatment management services (such as bandaid, gauze)
Wound care: complex		Not available, may be available through 3rd party provider
Diabetic care: blood glucose monitoring	X	Available to residents receiving med management services
Diabetic care: foot/nail care	X	Unlicensed staff may file only, diabetic nail care by nurse for additional charge
C-PAP	X	Available to residents receiving med/ treatment management services
Bi-PAP		Not available
Oxygen Management; specify any delivery system limitations	X	Available to residents receiving med/ treatment management services
Oxygen saturation checks	X	For resident who elect AL services
Ventilators		Not available
Suctioning		Not available
Tracheostomy Care: cleaning of site and tube		Not available
Tracheostomy Care: showering assistance		Not available
Tracheostomy Care: suctioning assistance		Not available
Pacemaker Checks	X	
Arrange for On-Site Dialysis		Not available
Arrange for/set-up Off-Site Dialysis		Not available

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Service	Available	Comments
Peritoneal Dialysis (on-site)		Not available
Compression stockings	X	Limited to TEDS, zip up, and Tubigrips. No wraps of any kind.
Lymphedema wraps		Not available
Fall Prevention: balance assessments		Not 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	X	For resident who elect AL services
Daily weight check		Not available
Indwelling urinary catheter care; emptying and bag changes	X	For resident who elect AL services
Indwelling urinary catheter replacement by nurse		Not available. May be available through 3rd party provider.
Straight (intermittent) catheter assistance		Not available. May be available through 3rd party provider.
Suprapubic catheter care	X	For resident who elect AL services
Ostomy care	X	For resident who elect AL services
Arrangements for and coordination with hospice care	X	For resident who elect AL services
End-of-life palliative care	X	For resident who elect AL services in coordination with outside provider

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Service	Available	Comments
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:		

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	For resident who elect AL services
Bathing: shower	X	For resident who elect AL services
Bathing: bathtub	X	For resident who elect AL services
Oral hygiene	X	For resident who elect AL services
Denture care	X	For resident who elect AL services
Cuing/reminders for self-cares	X	For resident who elect AL services
Use of special utensils	X	Pursuant to health care provider order
Feeding assistance for residents with complicated eating problems		Not available
Set-up and cut food at meals	X	For resident who elect AL services
Manual Feeding; specify limits in comments	X	Limited to Memory Care and Enhanced Care only
Tube Feeding; specify limits in comments		Not available
Feeding in common area with one staff member per resident		Not available

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Service	Available	Comments
Feeding in resident's apartment with one staff member per resident	X	Limited to memory care only, isolation/ quarantine/ acute illness/ end-of-life
Grooming: hair care, make-up, shaving, application of lotion, etc.	X	For resident who elect AL services
Nail care: toenails, fingernails	X	For resident who elect AL services
Toileting: standby assistance/supervision	X	Standby assistance not available, supervision and assist for residents electing AL services
Changing incontinence products; perineal care	X	For resident who elect AL services
Ordering replacement incontinence products	X	For resident who elect AL services
Assistance with bowel and bladder control, devices, and training programs		Not available
Other; specify:		

Section 5: Mobility Support

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

Mobility Services Available

Service	Available	Comments
Standby Assistance		Not available
Transfers with assist of one staff	X	For resident who elect AL services. Gait belt transfer only.
Transfers with assist of two staff	X	For resident who elect AL services. Requires ability to bear weight at all times.
Transfers utilizing sit-to-stand lifts	X	Residents electing AL services only; must bear wt/ maintain grip on hand bars at all times
Transfers utilizing sliding boards		Not available
Transfers utilizing bariatric equipment		Not available
Ceiling lift transfers		Not available

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Service	Available	Comments
Non-mechanical transfers (trapeze)		Not available
Mechanical lift: assist of 1 transfer		Not available
Mechanical lift: assist of 2 transfer	X	For resident who elect AL services
Ambulation with assist of 1	X	For resident who elect AL services
Bed mobility	X	For resident who elect AL services
Assistance with chair mobility	X	For resident who elect AL services
Chair Glide System		Not available
Mechanical Stair Lift System		Not available
Handrails; in personal space	X	In bathrooms
Elevators	X	In Assisted Living
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		Not available
Every 30-minutes safety checks		Not available
Hourly safety checks		Not available
Every two-hours safety checks		Not available

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Service	Available	Comments
Daily safety checks		Not available
Emergency call system; specify type in comments		Not available
Non-emergency call system; specify type in comments	X	Bathroom pull cords, pendants based on assessment
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		Not available
Visitor check-in/check-out at facility main entrance	X	
Bed alarms or movement sensing technology		Not available
Door sensors: specify locations (unit, resident room, exits, etc.)	X	Memory Care alarmed emergency egress doors
Security Guard		Not available
Security cameras in common spaces	X	Exterior/ interior entryways
Key card/fob access: specify locations (unit, resident room, exits, etc.)	X	Key card/fob for AL apartments and Memory Care entry/access
Other lock systems: specify locations (unit, resident room, exits, etc.)	X	Apartments have lockable doors with keys, community entrance/ exit
Emergency generator(s) to power the facility during power outages	X	
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	Based on resident meal plan election.
Breakfast available in community space	X	
Breakfast available; delivered to apartment	X	Available for additional fee if not for acute illness
Lunch available in community space	X	
Lunch available; delivered to apartment	X	Available for additional fee if not for acute illness
Dinner available in community space	X	
Dinner available; delivered to apartment	X	Available for additional fee if not for acute illness
Meal tray delivery and pick-up from resident's unit		Not available
Meal preparation in resident's unit		Not available
Thickened Liquids; specify limits in comments	X	Pre-thickened, thickened with powder or gel, resident cost for thickening agent
Modified Texture Diets; specify limits in comments	X	Mechanical soft, minced and moist, soft and bite sized, and pureed
Therapeutic Diets: cardiac		Not available
Therapeutic Diets: diabetic or calorie controlled		Not available
Therapeutic Diets: gluten-free		Not available
Therapeutic Diets: high fiber		Not available
Therapeutic Diets: low fat/low cholesterol		Not available
Therapeutic Diets: low sodium		Not available

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Service	Available	Comments
Therapeutic Diets: no added salt	X	
Therapeutic Diets: renal diet		Not available
Other special diets: kosher		Not available
Other special diets: (vegetarian, vegan, etc.) specify in comments		Not available
Dietitian or Nutritionist Services		Not available
Carbohydrate intake/tracking		Not available
Meal consumption tracking		Not available
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	Available for residents electing AL services, for additional fee, not to exceed 1 per shift
Assistance with meals or food preparation		Not available
Daily Social and Recreational Services	Required	
Housekeeping: bed making	X	Available for residents who elect AL services
Housekeeping: defrost and clean refrigerator		Not available
Housekeeping: dusting	X	Light dusting
Housekeeping: organize closets and drawers		Not available

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Service	Available	Comments
Housekeeping: trash removal; specify frequency in comments	X	MC daily trash removal, AL weekly trash removal
Housekeeping: weekly general cleaning (clean floors, sinks, shower/tub, toilet, and vacuum)	X	
Housekeeping: other; specify in comments		Not available
Laundry: linen (change bed, launder sheets, towels)	X	One load/ week, additional loads for fee
Laundry: wash, dry, and fold clothing; specify loads per week in comments	X	One load/ week, additional loads for fee
Laundry: other; specify in comments		Not available
Schedule offsite social and recreational activities	X	Activities scheduled by the community
Schedule medical and social service appointments	X	Assistance with scheduling appointments for residents who elect AL services
Assistance with arranging transportation for personal, social, and recreational activities	Required	Assistance available upon request for residents who elect A
Assistance with arranging transportation to medical and social services appointments	Required	Assistance available upon request for residents who elect A
Provide transportation to social and recreational activities	X	Community scheduled outings
Provide transportation to medical and social service appointments		Not available
Assistance accessing community resources and social services	Required	
Shopping: facility sponsored	X	Community scheduled shopping events, community assistance with shopping not available
Spiritual Care/Religious Services; on-site	X	
Assistance with bill paying/budgeting		Not available
Communication boards or other supplemental communication devices	X	Available for residents who elect AL services at resident cost
Primary languages spoken by staff		English
Supervision of smoking		Not available

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		Not available
One-to-One staffing for special circumstances		Not available
Overnight companion		Not available
Registered Nurse: on-site “part time”		Not available
Registered Nurse: on-site “full time”	X	
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”		Not available
Assisted Living Director: on site “full time”	X	
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
Activities Director: Full Time	X	
Dietician/Nutritionist consultant available or can be arranged		Not available

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Staffing	Available	Comments
Physical Therapist available or can be arranged		May be available through 3rd party provider
Respiratory Therapist available or can be arranged		Not available
Occupational Therapist available or can be arranged		May be available through 3rd party provider
Speech Language Pathologist available or can be arranged		May be available through 3rd party provider
Social Worker available or can be arranged		Not available
Other Licensed Professional available; specify type in comments		Not 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	X	
Semi-private units	X	Memory Care only
Studio/efficiency units	X	
One-bedroom units	X	
Two-bedroom units	X	Assisted Living Only
Kitchen/Kitchenettes in units	X	Not available in all Memory Care units
Internet access	X	At additional cost to resident

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Amenity	Available	Comments
Cable (television)	X	At additional cost to resident
Pets allowed	X	Assisted Living only, per pet policy
Pet care; specify in comments		Not available
Pool	X	
Whirlpool	X	Spa Tub
Exercise Room	X	Available to residents who elect therapy services
Library	X	
Activity Room	X	
Garden/outdoor spaces	X	
Chapel	X	
Private entertaining space	X	Private dining room
Communal Dining room	X	
Beauty/Barber Shop	X	
Parking available for residents	X	Covered parking for additional fee
Parking available for guests	X	
Guest accommodations	X	Available for additional fee
Laundry Room accessible to Residents	X	Available in Assisted Living only
Washer-Dryer in units	X	Assisted Living only
Central Air Conditioning	X	
Fully sprinklered building	X	

Amenity	Available	Comments
Designated smoking area inside (not apartment space)		Not available
Designated smoking area outside		Not available
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/) (<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