

RICK SNYDER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

SHELLY EDGERTON DIRECTOR

November 14, 2016

Louis Andriotti
IP Vista Springs Timber Ridge Opco, LLC
Ste 300
2090 Celebration Drive
Grand Rapids, MI 49525

RE: Application #: AL190383347

Vista Springs Timber Ridge, LLC (#1)

16260 Park Lake Road East Lansing, MI 48823

Dear Mr. Andriotti:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 20 is issued.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (517) 284-9720.

Sincerely,

Dawn N. Timm, Licensing Consultant

Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909

(517) 899-5675

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF COMMUNITY AND HEALTH SYSTEMS LICENSING STUDY REPORT

I. IDENTIFYING INFORMATION

License #: AL190383347

Applicant Name: IP Vista Springs Timber Ridge Opco, LLC

Applicant Address: Ste 300

2090 Celebration Drive Grand Rapids, MI 49525

Applicant Telephone #: (303) 929-0896

Licensee Designee: Louis Andriotti

Administrator: Patricia Weaver

Name of Facility: Vista Springs Timber Ridge, LLC (#1)

Facility Address: 16260 Park Lake Road

East Lansing, MI 48823

Facility Telephone #: (517) 339-2322

Application Date: 06/17/2016

Capacity: 20

Program Type: AGED

ALZHEIMERS

II. METHODOLOGY

09/22/2015	Inspection Completed-Fire Safety: A Used inspection from existing license due to no changes in the structure of building and inspection less than one year old.
04/19/2016	Inspection Completed-Env. Health: A Able to use the inspection completed for existing AFC Timber Ridge because less than one year old at the time of application.
06/17/2016	Enrollment
06/21/2016	Comment Fire & environmental inspections ok per consultant
06/21/2016	Contact - Document Sent Rules & Act booklets
06/21/2016	Application Incomplete Letter Sent
07/11/2016	Inspection Completed On-site
07/15/2016	Contact - Document Received
07/18/2016	Contact - Document Received
08/10/2016	Application Incomplete Letter Sent
08/10/2016	Inspection Completed-BCAL Full Compliance
09/26/2016	Contact- Documents Received- required qualifications documents for new administrator.
10/13/2016	Contact- Documents Received- required qualifications documents for third new administrator.
11/03/2016	Contact- Telephone call made to Lou Andriotti.
11/09/2016	Inspection Completed- Fire Safety: A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Vista Springs Timber Ridge, LLC (#1) is a single story, large brick and vinyl ranch style facility located in Bath Township in the city of East Lansing, Michigan. The facility is located on the west side of Park Lake Road and has ample parking for visitors and staff members. The facility grounds are tastefully decorated and well-maintained throughout

all seasons and have many flowers during the spring and summer months. There is a sidewalk that travels around the front and sides of the facility allowing residents and visitors the ability to navigate easily around the property and enjoy the flowers and gardens.

The facility is close to Michigan State University, the city of Lansing and many smaller cities that surround the greater Lansing area allowing for the opportunity to utilize many medical resources, shopping centers, and various forms of entertainment.

The front entrance leads to a foyer area that connects to a large living and dining area where residents can sit and watch television, enjoy the large aquarium, or venture out onto the large deck located off of the living area. The large commercial kitchen is open with an area for residents to sit and enjoy a beverage or small snack as they watch meals being prepared. The facility also has a small library located off of the foyer entrance that residents may enjoy or sit with their family members for additional privacy. In addition, there is a small sunroom located off of the living area that residents may also enjoy if they like a quieter more peaceful setting. The facility has a separate room specifically designed for crafts, games, and any other resident related activity. The activity room is located down one of the wings of the facility. There is also a large laundry room, locked medication room, hair salon, and food pantry along with a staff office used for meetings and trainings.

With regard to resident bedrooms, there are four double resident bedrooms with full bathrooms and 12 single resident bedrooms with half-bathrooms. The facility also has three shower rooms with full bathrooms available for resident use. The bedrooms are tastefully decorated with large closets and adequate storage for resident belongings. The facility is wheelchair accessible and has multiple means of egress that are located at grade. The facility utilizes a municipal water supply and municipal sewage disposal system. The Mid-Michigan Health Department conducted an on-site inspection at the facility on 04/19/2016 and determined the facility to be in substantial compliance with applicable rules.

The facility utilizes a boiler system to heat the facility, but also has a back-up gas furnace. The facility also uses gas water heaters as well. The furnaces and water heating units are located on the basement level of the facility, which is accessed through a locked, 1 ¾ inch solid wood core door equipped with an automatic self-closing device with positive-latching hardware. This door is kept locked at all times and residents do not access this area. There is a smoke detector as well as a fire extinguisher located in the basement area.

The facility is equipped with an interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician and is fully operational. The facility is also fully sprinkled and has been determined by the Bureau of Fire Services to be in compliance with the applicable fire safety administrative rules.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
#1	17'0" x 13'6"	230 square feet	1 resident
#2	17'0" x 13'6"	230 square feet	1 resident
#3	17'0" x 13'6"	230 square feet	1 resident
#4	17'0 x 13'6"	230 square feet	1 resident
#5	17'0 x 13'6"	230 square feet	1 resident
#6	17'0" x 13'6"	230 square feet	1 resident
#7	17'0" x 13'6"	230 square feet	1 resident
#8	18'0" x 13'8"	245 square feet	1 resident
#9	18'0" x 13'8"	245 square feet	1 resident
#10	17'0" x 13'6"	230 square feet	1 resident
#11	18'6" x 16'0"	296 square feet	2 residents
#12	18'6" x 16'0"	358 square feet	2 residents
#13	18'6" x 16'0"	349 square feet	2 residents
#14	18'6" x 16'0"	349 square feet	2 residents
#15	17'0" x 13'6"	230 square feet	1 resident
#16	17'0 x 13'6"	230 square feet	1 resident
Living Area		1889 square feet	
+ Dining			
Area	4.410" 4.010"		
Library	11'8" x 19'0"	222 square feet	
Sun room	9'4" x 13'0"	121 square feet	
Activity	16'6" x 19'6"	321 square feet	
Room			

The indoor living and dining areas measure a total of 2,553 square feet of living space. This greatly exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate twenty residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The applicant intends to provide 24-hour supervision, protection and personal care to twenty male and/or female residents who are aged and/or diagnosed with Alzheimer's disease. The program will include social interaction such as activities, games, movies, group exercise and other activities of interest to the residents. The applicant intends to accept residents with private sources for payment.

If needed by residents, behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including the public schools and library, local museums, shopping centers, churches, etc. The facility is located close to East Lansing and Lansing as well as the smaller communities of Haslett and Okemos. These communities many specialty restaurants, sporting events, shopping options, and outdoor events. These resources provide an environment to enhance the quality of life and increase the independence of residents.

C. Applicant and Administrator Qualifications

The applicant is IP Vista Springs Timber Ridge Opco, L.L.C., a "Foreign Limited Liability Company", established in Delaware on 04/27/2016. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility. This is an established currently licensed and successfully run AFC facility with residents living in the facility.

The members of IP Vista Springs Timber Ridge Opco, L.L.C. have submitted documentation appointing Louis Andriotti as licensee designee for this facility and Patricia Weaver as the administrator of the facility.

Criminal history background checks of the licensee designee and administrator were completed and they were determined to be of good moral character to provide licensed adult foster care. The licensee designee and administrator submitted statements from a physician documenting their good health and current negative tuberculosis test results.

Mr. Andriotti and Ms. Weaver have provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Mr. Andriotti has over ten years of experience as the licensee designee in a number of adult foster care facilities around the state of Michigan that served the aged population. Mr. Andriotti has completed all of the training requirements as identified in the group home administrative rules and has been deemed qualified by multiple AFC licensing consultants due to his years of experience working with elderly individuals and those diagnosed with Alzheimer's disease. Ms. Weaver has been working in skilled nursing care for the past 18 years mainly with elderly individuals. She has previous experience working as a CNA, activities director, and is Eden certified. Ms. Weaver stated she enjoys working with elderly individuals and has spent her career with this population group including those diagnosed with Alzheimer's disease. She reported being a licensed nursing home administrator and believes this experience will assist her in this new role of AFC administrator. Ms. Weaver submitted documentation verifying her qualifications and completed training requirements.

The staffing pattern for the original license of this twenty bed facility is adequate and includes a minimum of two staff for 20 residents per shift. The applicant acknowledged that the staff to resident ratio may need to be decreased in order to provide the level of

supervision or personal care required by the residents due to the increased personal care and supervision needs of residents.

The applicant acknowledged an understanding of the qualifications, suitability, and training requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff to resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees. The applicant acknowledges the requirement for obtaining criminal record checks of employees and contractors who have <u>regular</u>, <u>ongoing</u> "direct access" to residents or resident information or both utilizing the Michigan Long Term Care Partnership website (<u>www.miltcpartnership.org</u>) and the related documents required to demonstrate compliance.

The applicant acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by the licensee designee and administrator will administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The applicant acknowledged the responsibility to obtain all required good moral character, medical, and training documentation and signatures that are to be completed prior to each direct care staff or volunteer working directly with residents. In addition, the applicant acknowledged the responsibility to maintain all required documentation in each employee's record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

The applicant acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the adult foster care home.

The applicant acknowledge the responsibility to obtain the required written assessment plan, resident care agreement, and health care appraisal forms and signatures that are to be completed prior to, or at the time of, each resident's admission to the home as well as updating and completing those forms and obtaining new signatures for each resident on an annual basis.

The applicant acknowledged the responsibility to maintain a current resident record on file in the home for each resident and follow the retention schedule for all of the documents that are required to be maintained within each resident's file.

The applicant acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledged that a separate *Resident Funds Part II BCAL-2319* form will be created

for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the resident's personal money transactions that have been agreed to be managed by the applicant.

The applicant acknowledged an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights. The applicant indicated the intent to respect and safeguard these resident rights.

The applicant acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

The applicant acknowledged the responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

The applicant acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

D. Rule/Statutory Violations

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a six-month temporary license to this adult foster care large group home with a capacity of twenty residents.

Dawn Jimm	11/10/2016
Dawn N. Timm Licensing Consultant	Date
Approved By: Betey Montgomery	11/14/16
Betsy Montgomery Area Manager	Date