

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

January 5, 2023

Louis Andriotti, Jr. Vista Springs Holland Meadows LLC Ste 110 2610 Horizon Dr. SE Grand Rapids, MI 49546

> RE: License #: AH700397994 Vista Springs Holland Meadows 445 104th Avenue Holland, MI 49423

Dear Mr. Andriotti, Jr.:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific dates for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan and an approved BFS fire safety rating, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. Please review the enclosed documentation for accuracy and contact me with any questions. In the event I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (616) 356-0100.

Sincerely, Julie Viviano, Licensing Staff Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503 Cell (616) 204-4300

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

I. IDENTIFYING INFORMATION

License #:	AH700397994
Licensee Name:	Vista Springs Holland Meadows LLC
Licensee Address:	Ste 110
	2610 Horizon Dr. SE
	Grand Rapids, MI 49546
Licences Telenhouse #	
Licensee Telephone #:	(616) 259-8659
Authorized Representative:	Louis Andriotti, Jr.
Administrator/Licensee Designee:	Ashlyn Postma
Name of Facility:	Vista Springs Holland Meadows
Facility Address:	445 104th Avenue
	Holland, MI 49423
Facility Telephone #:	(616) 795-9693
Original Jacuanas Data:	06/04/2020
Original Issuance Date:	00/04/2020
Capacity:	56
Program Type:	AGED
	ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 1/4/2023

Date of Bureau of Fire Services Inspection if applicable: BFS – A 12/9/2021 (Expired as of 12/9/2022)

Inspection Type:	⊠Interview and Observation	Worksheet
	Combination	

Date of Exit Conference: 1/4/2023

No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed 0 Role N/A

• Medication pass / simulated pass observed? Yes ⊠ No □ If no, explain.

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- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident?
 Yes No X If no, explain. The home does not hold resdient funds in trust.
- Meal preparation / service observed? Yes 🛛 No 🗌 If no, explain.
- Fire drills reviewed? Yes □ No ⊠ If no, explain.
 Reviewed disaster plans along with interviewed staff on policies and procedures.
- Water temperatures checked? Yes 🛛 No 🗌 If no, explain.
- Incident report follow-up? Yes 🛛 IR date/s:Last IR received 5/10/2022. N/A 🗌
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A
- Number of excluded employees followed up? 0 N/A X

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 325.1924	Reporting of incidents, accidents, elopement.	
	(3) The home shall report an incident/accident to the department within 48 hours of the occurrence. The incident or accident shall be immediately reported verbally or in writing to the resident's authorized representative, if any, and the resident's physician.	
ANALYSIS:	Review of facility file prior to on-site inspection revealed no incident report(s) had been submitted to the department since 5/10/2022.	
	On-site inspection and interviews revealed staff were unaware of reporting guidelines. Review of files revealed multiple resident incidents have occurred since May 2022 to include a recent death in January 2023. No reports have been submitted to the department pertaining to any of the prior resident incidents or recent death.	
CONCLUSION:	VIOLATION ESTABLISHED	

R 325.1970	Water supply systems.	
	(7) The temperature of hot water at plumbing fixtures used by residents shall be regulated to provide tempered water at a range of 105 to 120 degrees Fahrenheit.	
ANALYSIS:	Review of hot water temperature documentation revealed temperatures well below 105 degrees Fahrenheit for September 2022 to December 2022 for resident rooms, the memory care bathroom, and guest restrooms. Also, in October 2022, room 15 hot water temperature was documented at 129.3 degrees Fahrenheit. This is potential risk of harm or burns. Hot water temperatures must be regulated between 105 to 120 degrees Fahrenheit.	

CONCLUSION:	VIOLATION ESTABLISHED
R 325.1976	Kitchen and dietary.
	(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.
ANALYSIS:	On-site inspection revealed food items (jam, olives, milk, ice cream, soda etc.) in the community kitchenettes refrigerators that were unlabeled. An open date must be placed on all food items once opened. It could not be determined if the food items were safe for human consumption.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1979	General maintenance and storage.	
	(3) Hazardous and toxic materials shall be stored in a safe manner.	
ANALYSIS:	On-site inspection revealed industrial chemicals under the community kitchenette cabinet easily accessible to anyone. This presents a potential risk of ingestion and harm to residents in the home with impaired cognition and function.	
CONCLUSION:	VIOLATION ESTABLISHED	

IV. RECOMMENDATION

Contingent upon receipt of an approved corrective action plan and an approved BFS fire safety rating, renewal of the license is recommended.

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1/5/2023

Date

Licensing Consultant