



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

September 1, 2023

Louis Andriotti, Jr.  
IP Vista Springs Trillium Village Op Co  
2610 Horizon Dr. SE Suite 110  
Grand Rapids, MI 49546

RE: License #: AH630401935  
Vista Springs Trillium Village Estate  
6800 Trillium Dr  
Clarkston, MI 48346

Dear Louis 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, a regular license will be 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 feel free to contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Aaron L. Clum".

Aaron Clum, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(517) 230-2778

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH630401935
<b>Licensee Name:</b>	IP Vista Springs Trillium Village OpCo
<b>Licensee Address:</b>	2610 Horizon Dr. SE Suite 110 Grand Rapids, MI 49546
<b>Licensee Telephone #:</b>	(616) 259-8659
<b>Authorized Representative:</b>	Louis Andriotti, Jr.
<b>Administrator:</b>	Jennifer Bishop
<b>Name of Facility:</b>	Vista Springs Trillium Village Estate
<b>Facility Address:</b>	6800 Trillium Dr Clarkston, MI 48346
<b>Facility Telephone #:</b>	(248) 878-5266
<b>Original Issuance Date:</b>	01/21/2020
<b>Capacity:</b>	99
<b>Program Type:</b>	ALZHEIMERS AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 7/19/2023

Date of Bureau of Fire Services Inspection if applicable: 2/09/2023

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 7/19/2023

No. of staff interviewed and/or observed 10

No. of residents interviewed and/or observed 20

No. of others interviewed N/A Role

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- 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  If no, explain. Facility does not maintain resident funds
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  IR date/s: N/A
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s: SI#2022A1027080/1932(1), SI#2023A1019007/1913(2)
- Number of excluded employees followed up? 1 N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

<b>This facility was found to be in non-compliance with the following rules:</b>	
<b>R 325.1953</b>	<b>Menus.</b>
	<b>(2) A home shall maintain a copy of all menus as actually served to residents for the preceding 3 months.</b>
Upon request, the facility was unable to provide a copy of all menus as served for the preceding 3 months.	
<b>R 325.1954</b>	<b>Meal and food records.</b>
	<b>The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.</b>
Upon request, the facility was unable to provide a copy of the meal census for the preceding three-month period.	
<b>R 325.1976</b>	<b>Kitchen and dietary.</b>
	<b>(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.</b>
Several food items within the refrigerators of the memory care (MC) and assisted living (AL) areas of the facility were observed to be uncovered and undated including cups of juice, milk, cupcakes and a fruit. Additionally, kitchen staff were unable to provide any documentation showing the dishwasher was being tested to ensure sanitation of dishes and reported this task was not being completed.	

### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

*Daron L. Chum*

9/01/2023

Date

Licensing Consultant