



STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

GRETCHEN WHITMER
GOVERNOR

ORLENE HAWKS
DIRECTOR

April 8, 2020

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

RE: Application #: AL410400138
Vista Springs Terrace Cove
3740 Vista Springs Ave NE
Grand Rapids, MI 49525

Dear Mr. Andriotti, Jr.:

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 (616) 356-0100.

Sincerely,

Arlene B. Smith

Arlene B. Smith, MSW, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 916-4213

enclosure

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

I. IDENTIFYING INFORMATION

License #: AL410400138

Applicant Name: Vista Springs Northview, LLC

Applicant Address: Ste 110
2610 Horizon Dr. SE
Grand Rapids, MI 49546

Applicant Telephone #: (616) 259-8659

Administrator/Licensee Designee: Louis J. Andriotti, Jr., Designee
Susan Alveshere, Administrator

Name of Facility: Vista Springs Terrace Cove

Facility Address: 3740 Vista Springs Ave NE
Grand Rapids, MI 49525

Facility Telephone #: (616) 364-4690

Application Date: 05/29/2019

Capacity: 20

Program Type: AGED, ALZHEIMER'S

II. METHODOLOGY

02/10/2002	Inspection Completed On-site
04/09/2019	Inspection Completed-Fire Safety: A Completed for AL410337473
05/29/2019	Enrollment
06/12/2019	Application Incomplete Letter Sent 1326/Fingerprint/RI 030 for Louis Andriotti and AFC 100 for Michelle Rashid
10/01/2019	Contact - Document Received Letter signed by Lou Andriotti Jr. saying that he is allowing Administrator, Michelle Rashid, will be able to sign documents for Vista Springs Northview Terrace North.
10/22/2019	Contact - Document Received 1326 & RI-030 for Louis (LD)
10/23/2019	Lic. Unit file referred for background check review Louis Andriotti
10/28/2019	Lic. Unit received background check file from review NS and cont. processing for Louis Andriotti
10/28/2019	Contact - Document Received AFC 100 for Michelle Rashid
10/28/2019	File Transferred To Field Office Grand Rapids
10/31/2019	Contact - Document Received Email form Karen Hodge.
10/31/2019	Contact - Document Received E-mail authorizes communication regarding licensing matters we can deal with Michelle Rashid, Administrator, and Karen Hodge, Corporate Compliance Officer.
12/17/2019	Contact - Document Received Asking about the renewal for the faculty which is due 2/12/20. I checked the last fire inspection on 04/09/2019 which has an A rating. This will speed the opening process.
12/17/2019	Contact - Document Received

	Email received from Karen Hodge about the renewal of North and the planned opening.
12/20/2019	Contact - Telephone call received From Karen Hodge to discuss the required paper work for the new license.
12/20/2019	Application Incomplete Letter Sent
01/23/2020	Contact - Document Received Letter received that the Terrace North should be program types should be "Aged," and Alzheimer's. and "Wheelchair Accessible." from Karen Hodge and signed by Louis Andriotti, President and CEO Licensee Designee.
01/23/2020	Contact - Document Received Email received from Karen Hodge,
02/04/2020	Contact - Document Received Letter from Mr. Lou Andriotti, CEO President, Vista Springs, Informing, us that they have changed Administrators to Ms. Susan Alveshire.
02/07/2020	Contact - Document Received Susan Alveshire's, Executive Summary
02/10/2020	On-site Inspection completed.
02/10/2010	Contact Document Receive Service/Plan, Care/Plan that they will be using in their facilities.
02/10/2020	Contact Document Received Application for Vista Springs Northview Terrace North
02/10/2020	Inspection Completed Full Compliance.
02/12/2020	Contact Document Received Zoning Packet Received.
02/12/2020	Contact Document Received Floor plans.
02/12/2020	Contact Document Received LARA Corporations Online Filing System Annual Statement 2020 Limited Liability Company Name

02/12/2020	Contact Document Received Memo received from Lou Andriotti, PH.D.NHA, President & CEO Vista Springs: Change the name of the facility, to Vista Springs Terrace Cove. (This was the formerly north side.)
02/12/2020	Contact Document Received Information on the corporations.
02/16/2020	Contact Document Sent Requested letter for Lou Andriotti to be the Licensee Designee.
02/16/2020	Contact Document Received Management Services Agreement, First Amendment to Management Services Agreement, and Articles of Organization For use by Domestic Limited Liability Company.
02/19/2020	Contact Document Received LARA Corporations Online Filing System, Annual Statement Identification Number 802188551
03/08/2020	Contact Document Received Discharge Policy, Lou Andriotti's resume, Vista Springs Northview Personnel Policies and Vista Springs Admission Policy.
03/08/2020	Contact Document Received Memo from Karen Hodge on Fire Inspections.
03/08/2020	Contact Document Received Training certificate's for Lou Andriotti and Susan Alreshere.
03/09/2020	Contact Document Received Employee Handbook received.
03/09/2020	Contact Document Received The qualifications for the Chef for all three facilities.
03/12/2020	Contact Document Received Letter from Lou Andriotti, for a Substitution forms for Resident Funds.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This one-story facility was built specifically as an adult foster care home. It is a wood framed structure on a cement slab, located in a residential area on the north side of the city of Grand Rapids. The facility is attached to a 20-bed licensed Adult Foster Care facility with a fire wall between them. This facility has two wings of resident's bedrooms which are off from the center part of the facility. The front hall contains ten resident's bedrooms and the rear hall contains ten resident bedrooms. All if these residents, rooms are designed for one resident. The facility contains a laundry room, dining room/terrace, a full kitchen, an activity room, a nurse's office, a nurse's station, and two full baths. There are five resident bedrooms that contain a full bath and fifteen rooms with a half bath. The facility is on one level and therefore is wheelchair accessible and it has two approved means of egress. The facility will utilize public water and sewage system.

The facility was previously licensed to Northview Care Corporation from 12/13/1989 until 09/16/2013. It was then purchased by Vista Springs Northview Operations LLC, and opened on 09/17/2013, License # AL410337473.

The boiler and hot water heater are located on the main floor, in a mechanical room off the kitchen hallway, that is constructed of materials that provide a 1 hour-fire-resistance with a 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware, in a fully stopped frame. The facility is equipped with interconnected, hardwire smoke detection system, with a battery back-up, which was installed by a licensed electrician and is fully operational. The facility is equipped with an approved pull station alarm system and a sprinkler system installed throughout the facility and there are heat detectors located in the attic of the home.

When

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	12' 10" x 13' 1'	167.8	1
2	12' 11" x 13'	168	1
3	12' 11" x 13'	168	1
4	12' 9" x 13' 2"	168	1
5	12' 9" x 13'	165.75	1
6	12' 10" X 14' 2"	181.80	1
7	10' 10" X 13'	140.79	1
8	12' 11" X 12' 4"	159.30	1
9	12' 10" X 12' 5"	159.35	1
10	12' 11" X 12' 6"	161.5	1
11	12' 11" X 12' 6"	161.5	1

12	12' 10" X 12' 5"	159.35	1
13	12' 9" X 12' 5"	158.36	1
14	12' 9" X 12' 5"	158.36	1
15	16' 2" X 12' 10"	207.46	1
16	12'10" X 12' 10"	164.61	1
17	12' 9" X 14' 1"	179.52	1
18	12' 9" x 14' 1"	179,52	1
19	12' 9" x 14' 1"	179.52	1
20	10' 5" x 14' 1"	146.71	1

The dining room the terrace and the activity room areas measure a total of 1,249.68 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

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

B. Program Description

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection and personal care to twenty male or female adults whose diagnosis is Aged or Alzheimer's in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. The applicant intends to accept residents that are private pay individuals.

The licensee will provide all transportation for program activities. They will help to find transportation for Residents for medical needs with the residents along with their family members. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

The applicant is Vista Springs Northview, LLC, Inc., which is a "For Profit Corporation" and a "Domestic Limited Liability Company," and it was established in Michigan, on 11/01/2018. 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.

Vista Springs Northview LLC is a single member LLC, owned 100% by Vista Michigan Operations LLC which is an S Corp owned solely by Louis J. Andriotti Jr. Their attorneys are simply the registered agent, not a member of the entity, which is required to have under Michigan Law. Therefore, Mr. Andriotti is able to appoint himself as the

Licensee Designee for is corporation and he has appointed the Administrator, as Susan Alveshire.

A licensing record clearance request was completed with no LEIN convictions recorded for the licensee designee, and the administrator. The applicant licensee designee and administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

The licensee designee and administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 20-bed facility is adequate and includes a minimum of staff 2 to 20 residents per shift. The applicant acknowledges that the staff -to- resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents. The applicant has indicated that direct care staff will be awake during sleeping hours.

The applicant acknowledged that at no time will this facility rely on “roaming” staff or other staff that are on duty and working at another facility to be considered part of this facility’s staff -to- resident ratio or expected to assist in providing supervision, protection, or personal care to the resident population.

The applicant acknowledges 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 and contractors who have regular, ongoing, “direct access” to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to be maintained in each employee’s record to demonstrate compliance.

The applicant acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee, can 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 acknowledges their 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 acknowledges their 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 acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

The applicant acknowledges their responsibility to obtain the required written assessment, 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 acknowledges their 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 acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledges 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. The Licensee has chosen not to handle any of the residents' personal money transactions.

The applicant acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. The applicant indicated that it is their intent to achieve and maintain compliance with these requirements.

The applicant acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

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

D. Rule/Statutory Violations

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult large group home capacity 20.

Arlene B. Smith

04/08/2020

Arlene B. Smith, MSW
Licensing Consultant

Date

Approved By:

Jerry Hendrick

04/08/2020

Jerry Hendrick
Area Manager

Date