



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 2, 2025

Louis Andriotti, Jr.
IP Vista Springs Timber Ridge Opco, LLC
PO Box 4338
East Lansing, MI 48823-9998

RE: License #: AL190383349
Investigation #: 2026A0622004
Vista Springs Lakeside Gardens at Timber Ridge

Dear Mr. Andriotti, Jr.:

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable 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 time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days.

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) 335-5985.

Sincerely,

A handwritten signature in black ink, appearing to read 'Amanda Blasius', written in a cursive style.

Amanda Blasius, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL190383349
Investigation #:	2026A0622004
Complaint Receipt Date:	10/27/2025
Investigation Initiation Date:	10/28/2025
Report Due Date:	12/26/2025
Licensee Name:	IP Vista Springs Timber Ridge Opco, LLC
LicenseeAddress:	1140 Abbot Rd East Lansing, MI 48823-9998
Licensee Telephone #:	(303) 929-0896
Administrator:	Erin Witter, Administrator
Licensee Designee:	Louis Andriotti, Jr., Designee
Name of Facility:	Vista Springs Lakeside Gardens at Timber Ridge
Facility Address:	16260 Park Lake Road East Lansing, MI 48823
Facility Telephone #:	(517) 339-2322
Original Issuance Date:	11/14/2016
License Status:	REGULAR
Effective Date:	05/14/2025
Expiration Date:	05/13/2027
Capacity:	20
Program Type:	ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Disapproved Bureau of Fire Services Inspection completed on 10/23/2025.	Yes

III. METHODOLOGY

10/27/2025	Special Investigation Intake 2026A0622004
10/28/2025	Special Investigation Initiated. Phone call made to Bureau of Fire Services Inspector, Cory Irvin
11/18/2025	Inspection Completed-BCAL Sub. Non-Compliance
11/19/2025	Telephone call made to Bureau of Fire Services Inspector, Cory Irvin
12/01/2025	Exit Conference with licensee designee, Louis Andriotti, Jr.

ALLEGATION: Disapproved Bureau of Fire Services Inspection completed on 10/23/2025.

INVESTIGATION:

On 10/27/2025, I was assigned this complaint after LARA Bureau of Community and Health Systems received a Bureau of Fire Services inspection report, which documented a disapproval rating from an inspection conducted on 10/23/2025. According to the Bureau of Fire Services (BFS) Inspection Report dated 10/23/25, it stated that BFS Inspector Cory Irvin completed an annual re-check at Vista Springs Lakeside Gardens at Timber Ridge and found the following violations:

1. The adult foster care licensee or designated representative shall ensure that the installation, modification, testing, servicing, inspection or maintenance of a fire alarm or fire suppression system required by these rules shall be in compliance with the provisions of 1941 PA 207, MCL 29.1. Rule 110.

INSPECTOR COMMENTS:

Fire alarm system is in trouble and has a bad control panel. Plans shall be submitted to the Bureau of Fire Services for the replacement of the fire alarm panel.

2. To ensure operational integrity, the fire alarm system shall have an approved maintenance and testing program complying with the applicable requirements of NFPA 70 and NFPA 72. 9.6.1.5

INSPECTOR COMMENTS:

Fire alarm panel is in Trouble. Per February 2025 annual inspection report from Summit Fire, fire alarm system was unable to be tested due to bad control panel and batteries. (THIS IS A REPEAT VIOLATION FROM 2024)

3. Facility was placed on Fire Watch effective 10/23/2025 until fire alarm panel is replaced and fully operational.

On 10/28/2025, I interviewed Bureau of Fire Services Inspector, Cory Irvin via phone. Mr. Irvin reported that a repeat violation occurred from an inspection conducted in 2024 and little progress had been made to correct the violation, therefore a disapproval was given. Mr. Irvin reported that he informed administrator Erin Witter that a staff member would need to be on fire watch duty at all times and was not allowed to have any other duties during their shift besides completing the fire watch protocols. Mr. Irvin provided documentation of corrective action plans completed by administrator Erin Witter for 2024 and 2025. According to the corrective action plan from 2024 submitted to Cory Irvin, it stated the following: "Fire watch protocol has been implemented and residential service director has contacted Summit Fire Protection to repair fire alarm panel." The corrective action plan was dated 11/7/24 by administrator, Erin Witter and stated that the fire panel would be repaired by 12/31/24.

On 11/18/2025, I completed an unannounced onsite investigation to Vista Springs Lakeside Gardens at Timber Ridge. During the unannounced onsite investigation, I interviewed administrator, Erin Witter, direct care workers, and viewed fire watch documentation.

On 11/18/2025, I viewed fire watch logs completed by direct care workers hourly from 10/23/2025-11/18/2025.

On 11/18/2025, I interviewed administrator Erin Witter in person and she reported that the medication technician on each shift is completing the fire watch checks hourly. Ms. Witter reported that fire inspector, Cory Irvin was vague about who needed to complete the fire watch checks each hour. Ms. Witter stated that staff have been completing fire watch checks since 2024, and documentation has always been completed. Ms. Witter reported that management has been attempting to work with Summit Fire Protection since 2024 to have the fire panel fixed and have the correct plans submitted to the Bureau of Fire Services for approval. Ms. Witter reported that during this time, their maintenance staff has changed. She also reported that staff at Summit Fire Protection were giving them "the run around" on what was needed for floor plans. Ms. Witter stated that she called the supervisor at Summit Fire Protection and a new staff member has been assigned to the project as of 11/7/25. Ms. Witter reported that she signed an electronic proposal with Summit Fire Protection at the end of October 2025 therefore she is hoping progress is being made and the project will be submitted for approval to the Bureau of Fire Services soon.

I interviewed direct care worker, Marlene Hutmacher in person. She reported that she took over this project in August 2025 as the previous worker was no longer there. DCW Hutmacher stated that she has been working hard to get the correct floor plans Summit Fire Protection has requested. DCW Hutmacher reported that she found old drawings of floor plans and also went to the township to obtain the correct floor plans too. DCW Hutmacher reported that she submitted floor plans electronically and physical papers to Summit Fire Protection.

On 11/18/2025, I interviewed facility director, Glen Canning at Vista Springs. He reported that he has been working there for the past three weeks and is following up with Summit Fire Protection daily via email or phone. Mr. Canning provided email confirmation that he has been following up with Summit Fire Protection and according to an email he received on 11/18/25, Summit Fire Protection was working on the drawings. According to the email, once the drawings are completed, the plans can be submitted to the Bureau of Fire Services for approval. Once approval is given, then the technicians can be scheduled to start the project of installing a new fire panel.

On 11/18/2025, I interviewed direct care worker, Jaquetta Speed in person and observed her complete the fire watch protocol. She confirmed that she is the medication technician on duty and administers the medication to residents and also assists with direct care duties as needed. DCW Speed stated that she completes her fire watch rounds hourly and documents them on the log provided. I observed DCW Speed walk through the entire facility checking for areas of potential fires and potential fire smells.

On 11/19/2025, I contacted Bureau of Fire Services Inspector, Cory Irvin via phone. Mr. Irvin confirmed that the staff member who is completing fire watch should not have any other duties besides completing the fire watch checks hourly. Mr. Irvin stated that if they complete the fire watch checks before the next hour is up, they should re-start their checks, instead of caring for residents within the building.

On 12/01/25, LARA Bureau of Community and Health Systems received a Bureau of Fire Services inspection report. The report stated that Cory Irvin completed an annual re-check on 11/24/25 and gave another recommendation of disapproval, as the deficiencies cited on 10/23/25 had yet to be repaired.

APPLICABLE RULE	
R 400.647	Safety and maintenance of premises.
	Rule 647. (1) A facility must be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

ANALYSIS:	Based upon the corrective action plan administrator, Erin Witter signed on 11/07/2024, Vista Springs Lakeside Gardens at Timber Ridge and the licensee were aware and agreed to work with Summit Fire Protection to repair the fire alarm panel, with a target date of completing this by 12/31/2024. According to the Bureau of Fire Services inspection report, dated 10/23/2025, a disapproval rating was given to Vista Springs Lakeside Gardens at Timber Ridge, as a repeat violation was found due to the fire alarm panel not being repaired/replaced still one year after the 2024 inspection. Little progress has been made to start the repair, as Summit Fire Protection has not submitted approved plans to the Bureau of Fire Services as of 11/18/2025. It was also found during the investigation on 11/18/2025, that Vista Springs Lakeside Gardens at Timber Ridge was not following the fire watch protocol recommendation to have one specific direct care worker on fire watch duty, without having any other resident care or facility responsibilities. Due to not following through with their corrective action plan submitted on 11/07/2024 to Bureau of Fire Services and also not following the direction of one staff per shift designated to only fire watch duties, which created an unsafe environment for residents, a violation has been established.
CONCLUSION:	VIOLATION ESTABLISHED

On 12/01/2025, I completed an exit conference with licensee designee, Louis Andriotti, Jr. He confirmed that the fire panel had not been fixed, and he stated that it's his understanding was that the required paperwork has been recently submitted to the Bureau of Fire Services, but he needed to confirm these details. Licensee designee, Andriotti confirmed this has been an ongoing project since 2024, when a violation was cited by the Bureau of Fire Services. Licensee designee, Andriotti reported that the building now has directed one staff to remain on fire watch duties, without any responsibilities. Mr. Andriotti reported that he is assisting with the fire watch duties also.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend modification of the license to provisional status due to the physical plant violations.

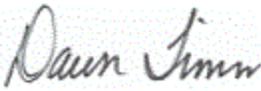


12/01/2025

Amanda Blasius
Licensing Consultant

Date

Approved By:



12/01/2025

Dawn N. Timm
Area Manager

Date