



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

April 26, 2023

Carla Hicks  
Manoogian Manor  
15775 Middlebelt Road  
Livonia, MI 48154

RE: License #: AH820236836  
Investigation #: 2023A1019037  
Manoogian Manor

Dear Ms. Hicks:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 authorized representative and a date.

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) 284-9730.

Sincerely,

A handwritten signature in blue ink, appearing to read "Elizabeth Gregory-Weil".

Elizabeth Gregory-Weil, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(810) 347-5503

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH820236836
<b>Investigation #:</b>	2023A1019037
<b>Complaint Receipt Date:</b>	04/17/2023
<b>Investigation Initiation Date:</b>	04/18/2023
<b>Report Due Date:</b>	06/17/2023
<b>Licensee Name:</b>	Michigan Home for the Armenian Aged Inc.
<b>Licensee Address:</b>	15775 Middlebelt Rd. Livonia, MI 48154
<b>Licensee Telephone #:</b>	(734) 522-5780
<b>Administrator and Authorized Representative:</b>	Carla Hicks
<b>Name of Facility:</b>	Manoogian Manor
<b>Facility Address:</b>	15775 Middlebelt Road Livonia, MI 48154
<b>Facility Telephone #:</b>	(734) 522-5780
<b>Original Issuance Date:</b>	06/01/1999
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	06/07/2022
<b>Expiration Date:</b>	06/06/2023
<b>Capacity:</b>	76
<b>Program Type:</b>	AGED ALZHEIMERS

## II. ALLEGATION(S)

	<b>Violation Established?</b>
The licensee changed the facility's licensed bed capacity without notifying or receiving approval from LARA.	Yes
Additional Findings	No

## III. METHODOLOGY

04/18/2023	Special Investigation Intake 2023A1019037
04/18/2023	Special Investigation Initiated - Letter Email correspondence with facility AR, correspondence is ongoing.
04/21/2023	Inspection Completed-BCAL Sub. Compliance

### **ALLEGATION:**

The licensee changed the facility's licensed bed capacity without notifying or receiving approval from LARA.

### **INVESTIGATION:**

On 2/27/23, an invoice was mailed to the facility in the amount of \$476.22 for their annual fee to cover the cost of their 75 beds. On 4/03/23, LARA received the licensee's check, however it was only a partial payment and was written out for \$407.55. On the invoice itself, the licensee crossed out the licensed bed capacity of 76 and hand wrote in a bed capacity of 65. Licensing staff was notified of this on 4/17/23 and immediately contacted the facility authorized representative Carla Hicks. Ms. Hicks reported that the facility had changed their licensed bed capacity to 65 sometime between their fiscal year 2021 payment and the payment for fiscal year 2022 but could not provide a specific date this occurred. Ms. Hicks stated that she was unaware that LARA needed to be notified of this change and affirmed that nothing was submitted to LARA in order for this change to be approved and documented on record.

Licensing staff reviewed the licensee's payment history, and it was noted that a partial payment was also made for fiscal year 2022. Licensing staff explained to Ms. Hicks that LARA would need an operational narrative outlining the capacity decrease

request along with a floor plan identifying which rooms had a reduced capacity to start the process of formally changing the bed capacity, to which Ms. Hicks replied that they will return their capacity to 76. Ms. Hicks was unable to identify how the licensee got to 65 beds when they changed their capacity and was unsure which rooms were affected by this change.

<b>APPLICABLE RULE</b>	
<b>R 325.1913</b>	<b>Licenses and permits; general provisions.</b>
	<b>(2) The applicant or the authorized representative shall give written notice to the department within 5 business days of any changes in information as submitted in the application pursuant to which a license, provisional license, or temporary nonrenewable permit has been issued.</b>
<b>ANALYSIS:</b>	The licensee changed their bed capacity without providing any notification to the department.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 325.1961</b>	<b>Plans and specifications.</b>
	<b>(1) A floor plan of the home, with a description of rooms showing size, use, door locations, window area, and number of beds, shall be on file in the home.</b>
<b>ANALYSIS:</b>	The licensee did not submit a floor plan outlining the change in licensed beds for each room.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 325.1961</b>	<b>Plans and specifications.</b>
	<b>(2) Complete plans, specifications, and an operational narrative for new buildings, additions, major building changes, and conversion of existing facilities to use as a home shall be submitted to the department for review to assure compliance with the law and these rules.</b>

<b>ANALYSIS:</b>	The licensee did not submit an operational narrative requesting a decrease in capacity.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 325.1961</b>	<b>Plans and specifications.</b>
	<b>(4) Plans and specifications meeting the requirements of the law and these rules shall be approved by the department.</b>
<b>ANALYSIS:</b>	The department did not approve the facility's occupancy decrease.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

#### IV. RECOMMENDATION

Contingent upon approval of an acceptable corrective action plan, I recommend the status of the license remain unchanged.



04/21/2023

Elizabeth Gregory-Weil  
Licensing Staff

Date

Approved By:



04/26/2023

Andrea L. Moore, Manager  
Long-Term-Care State Licensing Section

Date