



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 2, 2023

Benjamin McKinnon
The Manor at Glacier Hills Home for the Aged
1200 Earhart
Ann Arbor, MI 48105

RE: License #: AH810236789
The Manor at Glacier Hills Home for the Aged
1200 Earhart
Ann Arbor, MI 48105

Dear Mr. McKinnon:

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 home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, 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 that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (517) 241-1970.

Sincerely,

A handwritten signature in cursive script that reads "Jessica Rogers".

Jessica Rogers, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansin-g, MI 48909
(517) 285-7433
enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH810236789
Licensee Name:	Glacier Hills Inc.
Licensee Address:	1200 Earhart Rd. Ann Arbor, MI 48105
Licensee Telephone #:	(734) 769-6410
Authorized Representative:	Benjamin McKinnon
Administrator:	Kathleen Butler
Name of Facility:	The Manor at Glacier Hills Home for the Aged
Facility Address:	1200 Earhart Ann Arbor, MI 48105
Facility Telephone #:	(734) 769-6410
Original Issuance Date:	09/11/2000
Capacity:	116
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/02/2023

Date of Bureau of Fire Services Inspection if applicable: 10/19/2022

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 03/02/2023

No. of staff interviewed and/or observed 20

No. of residents interviewed and/or observed 15

No. of others interviewed One Role a resident's daughter

- 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. No resident funds held.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Bureau of Fire Services reviews fire drills. Disaster plan reviewed and staff interviewed regarding disaster plan.
- 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:
Renewal LSR dated 6/24/2021 to CAP dated 7/9/2021: R 325.1931(6), R 325.1913(2), R 325.1964(9), R 325.1923(2), R 325.1922(5), R 325.1921(1)
- SIR 2022A1021009 dated 12/22/2021 to CAP dated 1/5/2022: R 325.1951, R 325.1931(2)
- Number of excluded employees followed up? Four N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 325.1931 Employees; general provisions.

(3) The home shall designate 1 person on each shift to be supervisor of resident care during that shift. The supervisor of resident care shall be fully dressed, awake, and on the premises when on duty.

Review of the staff schedules dated 2/22/2023, 2/28/2023 and 3/2/2023 revealed a supervisor of resident care was not designated for third shift.

VIOLATION ESTABLISHED

R 325.1932 Resident medications.

(1) Medication shall be given, taken, or applied pursuant to labeling instructions or orders by the prescribing licensed health care professional.

Review of Resident A's January and February 2023 medication administration records (MARs) revealed staff documented the reasons for administration of as needed medications were not pursuant to licensed health care professional orders. For example, the January 2023 MARs read Resident A was prescribed as needed morphine sulfate for dyspnea or pain, however staff documented the reason for administration was anxiety. Additionally, the February 2023 read Resident A was prescribed as needed lorazepam for anxiety disorder in which staff documented the reason for administration as unable to sleep.

VIOLATION ESTABLISHED

IV. RECOMMENDATION

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



03/03/2023

Date

Licensing Consultant