



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

May 17, 2021

Shahid Imran  
Hamburg Investors Holdings LLC  
7560 River Rd  
Flushing, MI 48433

RE: License #: AL470402207  
**Hampton Manor of Hamburg 4**  
**7300 Village Center Dr.**  
**Whitmore Lake, MI 48189**

Dear Mr. Imran:

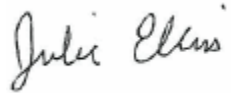
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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.

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 within 15 days.

Please contact me with any questions. In the event that I am not available, and you need to speak to someone immediately, you may contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Julie Elkins".

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

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

**I. IDENTIFYING INFORMATION**

**License #:** AL470402207

**Licensee Name:** Hamburg Investors Holdings LLC

**Licensee Address:** 7244 E M36  
Hamburg, MI 48139

**Licensee Telephone #:** (313) 645-3595

**Licensee Designee:** Shahid Imran

**Administrator:** Shahid Imran

**Name of Facility:** Hampton Manor of Hamburg 4

**Facility Address:** 7300 Village Center Dr.  
Whitmore Lake, MI 48189

**Facility Telephone #:** (734) 673-3130

**Original Issuance Date:** 11/20/2020

**Capacity:** 20

**Program Type:** AGED  
ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspections: 05/14/2021

Date of Bureau of Fire Services Inspection if applicable: 11/19/2020

Date of Health Authority Inspection if applicable: N/A

Inspection Type:  Interview and Observation  Worksheet  
 Combination  Full Fire Safety

No. of staff interviewed and/or observed 0

No. of residents interviewed and/or observed 0

No. of others interviewed 1 Role: Licensee Designee/Admin

- Medication pass / simulated pass observed? Yes  No  If no, explain.  
No residents in the facility for the six-month duration of the license.
- Medication(s) and medication record(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident?  
Yes  No  If no, explain. No residents in the facility for the six-month duration of the license.
- Meal preparation / service observed? Yes  No  If no, explain.  
No residents in the facility for the six-month duration of the license.
- Fire drills reviewed? Yes  No  If no, explain.  
No residents in the facility for the six-month duration of the license.
- Fire safety equipment and practices observed? Yes  No  If no, explain.  
No residents in the facility for the six-month duration of the license.
- E-scores reviewed? (Special Certification Only) Yes  No  N/A   
If no, explain.
- Water temperatures checked? Yes  No  If no, explain.  
No residents in the facility for the six-month duration of the license.
- Incident report follow-up? Yes  No  If no, explain.
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:  
No residents in the facility for the six-month duration of the license. N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes  (please explain) No  N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

**MCL 400.713** License required; application; forms; investigation; on-site evaluation; issuance or renewal of license; disclosures; maximum number of persons; stating type of specialized program; issuance of license to specific person at specific location; transferability of license; sale of facility; notice; items of noncompliance; refusal by department to issue or renew license; conditions; unlicensed facility; violation as misdemeanor; penalty; receipt of completed application; issuance of license within certain time period; inspections; report; criminal history and records check; storage of fingerprints in automated fingerprint identification system database; convictions; "completed application" defined.

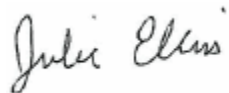
**(3) Before issuing or renewing a license, the department shall investigate the activities and standards of care of the applicant and shall make an on-site evaluation of the facility. On-site inspections conducted in response to the application may be conducted without prior notice to the applicant. On-site inspections conducted for renewing a license may be conducted within 12 months before the expiration date of the current license without impact on the license renewal date or the license fee. Subject to subsections (9), (10), and (11), the department shall issue or renew a license if satisfied as to all of the following:**

**(b) The applicant's compliance with this act and rules promulgated under this act.**

Residents were not admitted to the facility during the initial six-month duration of the license therefore the quality of care cannot be assessed for renewal.

**IV. RECOMMENDATION**

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.



05/14/2021

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Julie Elkins  
Licensing Consultant

Date

Approved:



05/18/2021

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Dawn Timm  
Area Manager

Date