



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

April 7, 2022

Shahid Imran
Hampton Manor of Woodhaven LLC
7560 River Rd
Flushing, MI 48433

RE: License #: AH820402181
Investigation #: 2022A1027045
Hampton Manor of Woodhaven

Dear Mr. Imran:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed by the authorized representative and dated.

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) 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
Lansing, MI 48909
(517) 241-1970

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH820402181
Investigation #:	2022A1027045
Complaint Receipt Date:	03/22/2022
Investigation Initiation Date:	03/23/2022
Report Due Date:	05/21/2022
Licensee Name:	Hampton Manor of Woodhaven LLC
Licensee Address:	22125 Van Horn Woodhaven, MI 48183
Licensee Telephone #:	(734) 673-3130
Administrator/Authorized Representative:	Shahid Imran
Name of Facility:	Hampton Manor of Woodhaven
Facility Address:	22125 Van Horn Woodhaven, MI 48183
Facility Telephone #:	(734) 673-3130
Original Issuance Date:	06/25/2021
License Status:	REGULAR
Effective Date:	12/25/2021
Expiration Date:	12/24/2022
Capacity:	113
Program Type:	ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Employee #1 was injured while administering medications at the facility and a health care professional evaluation was not sought.	Yes
Additional Findings	No

III. METHODOLOGY

03/22/2022	Special Investigation Intake 2022A1027045
03/23/2022	Special Investigation Initiated - Telephone Telephone interview conducted with complainant
03/23/2022	Contact - Document Received Requested documentation received from complainant
04/07/2022	Inspection Completed On-site
04/07/2022	Inspection Completed-BCAL Sub. Compliance
05/11/2022	Exit Conference Conducted with authorized representative Shahid Imran by voicemail

ALLEGATION:

Employee #1 was injured while administering medications at the facility and a health care professional evaluation was not sought.

INVESTIGATION:

On 3/22/2022, the department received a complaint which read Employee #1 completed a medication pass in which she administered insulin and while disposing of the needle, stabbed her finger with the used needle on 2/28/2022. The complaint alleged facility staff did not refer Employee #1 for a health care professional evaluation afterward.

On 3/23/2022, I conducted a telephone interview with the complainant which was consistent with the complaint. The complainant stated Employee #1 was advised by facility management to wipe her finger off with alcohol and wash her hands after the

incident. The complainant stated Employee #2 informed Employee #1 that they “technically did not have to send her out” to be seen after the incident, then later stated Employee #1 declined to be evaluated. The complainant stated Employee #1 had a previously scheduled physician appointment on 3/3/2022 in which her physician ordered blood work as follow up to the incident.

On 4/7/2022, I conducted an on-site inspection at the facility. I interviewed interim business office manager Employee #3 who stated Employee #1 was stuck by a used needle and offered to be evaluated at “Concentra,” but she declined because she was going to her own physician in a few days. I interviewed regional director Carol Cancio. Ms. Cancio stated Employee #2 had notified her of the Employee #1’s incident one week after it had happened. Ms. Cancio stated she instructed Employee #2 to investigate and complete the workers’ compensation documentation even though the incident had taken place one week prior. Ms. Cancio stated the Employee #2 had not completed an investigation nor the workers’ compensation documentation. Ms. Cancio stated Employee #2 was terminated. Additionally, Ms. Cancio stated Employee #1 involved in the incident was also terminated for other reasons so they would be unable to investigate further. Ms. Cancio stated Employee #2 had not followed the facility’s procedure for the incident and the facility had no documentation of Employee #1’s incident to provide to the department. Ms. Cancio provided the facility’s injury/accident procedure binder. While on-site, I reviewed the procedure which read

Step-by-Step Workers’ Comp. Information

1. *The day of injury- the employee MUST complete the following forms*
 - a. *“Employee’s Report of Injury/Accident*
 - b. *Must take a(n) “Concernta Authorization” for Examination or Treatment from to our Brighton location*
 - c. *Complete the “The ProSure Fund” Authorization for Treatment Form*
2. *Instruct Employee to go to Urgent Care and present forms.*
 - a. *Best advice is a supervisor to go with employee*
 - i. *Especially if for drug suspicions*

Employer Filing:

1. *Employer MUST send information to Prosure Fund within 24 hours of incident*
 - a. *Log-in information is located on second page (Labeled “Claim Reporting-backside”. There are 3 different ways to report the incident, choose 1 option.*
2. *Employer MUST complete OCR 100 “Employer’s Basic Report of Injury”*
 - a. *Employer will send to ProSure Fund as well as keep a copy for employee records.*

APPLICABLE RULE	
R 325.1923	Employee's health.
	(1) A person on duty in the home shall be in good health. Files shall be maintained containing evidence of adequate health, such as results of examinations by a qualified

	health care professional and tuberculosis screening which consists of an intradermal skin test or chest x-rays, or other methods recommended by the local health authority. Records of accidents or illnesses occurring while on duty that place others at risk shall be maintained in the employee's file.
ANALYSIS:	Complainant and staff interviews along with review of facility documentation revealed the facility did not follow their policy for staff injury/accident and thus lacked the ability to ensure the Employee #1 was in good health.
CONCLUSION:	VIOLATION ESTABLISHED

On 5/11/2022, I shared the findings of this report with authorized representative Shahid Imran by voicemail.

IV. RECOMMENDATION

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



4/11/2022

Jessica Rogers
Licensing Staff

Date

Approved By:



05/10/2022

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

Date