

GRETCHEN WHITMER
GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 31, 2023

Abdul Aleem Hampton Manor of Montrose LLC 3115 Silverwood Dr. Saginaw, MI 48603

RE: License #:	AL250414324
	Hampton Manor of Montrose
	9415 Vienna Rd.
	Montrose, MI 48457

#### Dear Mr. Aleem:

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.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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) 643-7960.

Sincerely,

Susan Hutchinson, Licensing Consultant Bureau of Community and Health Systems

Dusan Hutchinson

611 W. Ottawa Street

P.O. Box 30664 Lansing, MI 48909

(989) 293-5222

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

#### I. IDENTIFYING INFORMATION

License #:	AL250414324
Licensee Name:	Hampton Manor of Montrose LLC
Lineana Addresa.	0445 Viana Dd
Licensee Address:	9415 Vienna Rd.
	Montrose, MI 48457
Licensee Telephone #:	(810) 350-2600
Licensee/Licensee Designee:	Abdul Aleem
<b>-</b>	
Administrator:	Rachel Morgan
Name of Facility:	Hampton Manor of Montrose
Facility Address:	9415 Vienna Rd.
	Montrose, MI 48457
Facility Telephone #:	(810) 350-2600
Original Issuance Date:	12/13/2022
Capacity:	20
- Pro-	
Program Type:	PHYSICALLY HANDICAPPED
	AGED
	ALZHEIMERS

### **II. METHODS OF INSPECTION**

Date	e of On-site Inspection(s):	03/30/2	2023
Date	e of Bureau of Fire Services Inspection if appl	icable:	09/30/2022
Date	e of Health Authority Inspection if applicable:		03/30/2023
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 0 Role: N/A		3 15
•	Medication pass / simulated pass observed?	Yes ⊠	〗No □ If no, explain.
•	Medication(s) and medication record(s) revie	wed? \	∕es ⊠ No
•	Resident funds and associated documents re Yes No I If no, explain. Meal preparation / service observed? Yes		
•	Fire drills reviewed? Yes ⊠ No ☐ If no, ex	xplain.	
•	Fire safety equipment and practices observe	d? Yes	No □ If no, explain.
•	E-scores reviewed? (Special Certification On If no, explain.  Water temperatures checked? Yes ⊠ No □	• /	
•	Incident report follow-up? Yes ⊠ No ☐ If	no, expl	ain.
•	Corrective action plan compliance verified?  N/A ⊠  Number of excluded employees followed-up?		CAP date/s and rule/s: 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:		
R 400.15105	Licensed capacity.	
	(1) The number of residents cared for in a home and the number of resident beds shall not be more than the capacity that is authorized by the license.	
administrator explaempty room was be (described as inde	nspection, the facility had 21 individuals living in it. The ained that one of the rooms contained a married couple and the eing used by an individual who was not in need of AFC care pendent living). On 03/31/23, the administrator contacted me to sident moved out today, bringing the licensed capacity back to the	
R 400.15312	Resident medications.	
	(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.	
At the time of my inspection, I found non-secured medications in Resident A's room (Room #19.) All medications, prescription or over the counter, must be kept in a locked cabinet or drawer.		
R 400.15401	Environmental health.	
	(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.	
At the time of my in Fahrenheit at the k	nspection, I noted that the hot water temperature was 131 degrees kitchen faucet.	

#### IV. RECOMMENDATION

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

Dusan Hutchinson	March 31, 2023
Susan Hutchinson Licensing Consultant	Date