GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

October 12, 2023

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

RE: License #: AH580402179
Hampton Manor of Bedford
3099 W Sterns Rd
Lambertville, MI 48182

Dear Licensee:

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 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 877-458-2757.

Sincerely,

Jessica Rogers

Jessica Rogers, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, 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 #:** | AH580402179 |
| **Licensee Name:** | Hampton Manor of Bedford LLC |
| **Licensee Address:** | 3099 W Sterns Rd<br>Lambertville, MI 48182 |
| **Licensee Telephone #:** | (989) 971-9610 |
| **Authorized Representative:** | Shahid Imran |
| **Administrator/Licensee Designee:** | Carol Cancio |
| **Name of Facility:** | Hampton Manor of Bedford |
| **Facility Address:** | 3099 W Sterns Rd<br>Lambertville, MI 48182 |
| **Facility Telephone #:** | (734) 807-5800 |
| **Original Issuance Date:** | 04/09/2021 |
| **Capacity:** | 114 |
| **Program Type:** | ALZHEIMERS<br>AGED |

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/11/2023

Date of Bureau of Fire Services Inspection if applicable: 10/09/2023

Inspection Type: ☐ Interview and Observation ☒ Worksheet ☐ Combination

Date of Exit Conference: 10/12/2023

No. of staff interviewed and/or observed 16
No. of residents interviewed and/or observed 44
No. of others interviewed One Role A resident's son

- 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: Corrective Action Plan (CAP) dated 6/21/2022 to SIR 2022A0784047 dated 6/16/2022: R 325.1921(1)(b)
- CAP dated 6/21/2023 to SIR 2022A1022032 dated 6/7/2023: 333.20201(2)(d)
- Number of excluded employees followed up? Three N/A ☐

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

**R 325.1932 Resident medications.**

**(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.**

The medication administration records (MARs) were not always completed per the licensed health care professional orders in which some were left blank. For example, Resident A's September 2023 MARs read one or more doses of medications were left blank on 9/1/2023. Review of Resident B's August 2023 MARs read one or more doses of medications were left blank on 8/11/2023, 8/30/2023, and 8/31/2023. Review of Resident C's August and September 2023 MARs read one or more doses of medications were left blank on 8/11/2023, 9/1/2023, 9/11/2023, and 9/24/2023. Review of Resident D's September 2023 MARs read one or more doses of medications were left blank on 9/15/2023 and 9/24/2023.

Review of Resident C's August and September 2023 MARs revealed he was prescribed Novolin R, inject subcutaneously with meals per sliding scale 200-250=1 unit, 251-300=2 units, 301-350=3 units, and 351-400=4 units in which staff initialed when the medication was administered and staffs' initials were circled when the medication was not administered due to a blood sugar reading of less than 200. However, some staff initialed the medication as administered when the resident's blood sugar reading was less than 200. For example, on 8/3/2023 at 4:30 PM, Resident C's blood sugar reading was 168; and staff initialed the medication as administered, thus it could not be confirmed if medication was administered or not. Resident C's MARs read the same as the above example on the following dates 8/5/2023, 8/12/2023, 8/16/2023, 8/17/2023, 8/21/2023, 9/9/2023, 9/10/2023, 9/12/2023, 9/19/2023, 9/20/2023, and 9/21/2023, 9/24/2023, and 9/25/2023. Also, review of Resident C's MARs revealed staff did not always write the number for units of insulin administered. For example, on 8/3/2023, the MAR read at 4:30 PM Resident C's blood sugar was 203, so per the sliding scale, he would have received 1 unit; however, the amount given was left blank. Resident C's MARs read the same as the above example on the following dates 8/4/2023, 8/8/2023, 8/11/2023, 8/13/2023, 8/22/2023, 8/24/2023, 8/31/2023, 9/4/2023, 9/6/2023, 9/11/2023, 9/14/2023, 9/15/2023, and 9/23/2023.

Like Resident C's MARs, review of Resident D's August and September 2023 MARs revealed she was prescribed Novolin R per sliding scale for each meal in which she did not require insulin if her blood sugar reading was less than 150; however, staff

initialed the medication as administered on the following dates 8/2/2023, 9/12/2023, 9/25/2023, 9/27/2023, and 9/28/2023.

Like Residents C and D MARs, review of Resident E's August and September 2023 MARs revealed she was prescribed Humalog insulin per sliding scale and did not require medication if her blood sugar reading was less than 150; however staff initialed the medication as administered for a blood sugar reading of less than 150 on the following dates 8/4/2023, 8/18/2023, 8/24/2023, 9/9/2023, 9/12/2023, 9/19/2023, 9/20/2023, 9/21/2023 and 9/29/2023.

Furthermore, review of Resident E's August and September 2023 MARs read she was prescribed Metoprolol, take one tablet by mouth twice daily, hold for a systolic blood pressure less than 110 and heart rate less than 65 in which staff documented her medication was held per the physician's orders on 8/18/2023 and 8/27/2023; however, her blood pressure and heart rate were both greater than 110 and 65, consecutively.

Additionally, review of Resident A's August and September 2023 MARs revealed she was prescribed the following as needed pain medications Acetaminophen, Hydrocodone, Hydromorphone, and Morphine sulfate. Although the order for Hydrocodone specified it was to be administered for severe pain, the orders for the four pain medications lacked sufficient instructions to determine whether the medications were to be given together, separately, in tandem, or one instead of the other according to the severity of pain.

**VIOLATION ESTABLISHED.**

**R 325.1953 Menus.**

**(1) A home shall prepare and post the menu for regular and therapeutic or special diets for the current week. Changes shall be written on the planned menu to show the menu as actually served.**

**(2) A home shall maintain a copy of all menus as actually served to residents for the preceding 3 months.**

Interview with Employee #1 revealed the facility served therapeutic and special diets such as but not limited to diabetic, mechanical soft, and pureed; however, those diet menus were not prepared nor posted.

Additionally, Employee #1 stated although he could print copies of the menus, he frequently made changes to the menu and did not maintain a copy of the menus actually served for the preceding three months.

**VIOLATION ESTABLISHED.**

**R 325.1954 Meal and food records.**

**The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.**

Observation of the production sheets revealed they were incomplete. For example, on the following dates 9/22/2023, 10/8/2023, 10/7/2023, the number of residents served for each meal was left blank.

**VIOLATION ESTABLISHED.**

**R 325.1976 Kitchen and dietary.**

**(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.**

Observation of the refrigerator in the Café revealed expired food such as potato salad and chicken, as well as coffee that leaked to the bottom shelf.

**VIOLATION ESTABLISHED.**

## IV. RECOMMENDATION

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

Jessica Rogers 10/12/2023

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Date

Licensing Consultant