

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

May 1, 2025

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

RE: License #: AL470402157

Hampton Manor Of Hamburg 1 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.

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) 335-5985.

Sincerely,

Julie Elkins, Licensing Consultant

Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Julie Ellers

Lansing, MI 48909

611 W. OTTAWA • P.O. BOX 30664 • LANSING, MICHIGAN 48909 www.michigan.gov/lara • 517-335-1980

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

I. IDENTIFYING INFORMATION

License #: AL470402157

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 1

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

Dat	e of On-site Inspections:	04/25/2025						
Dat	e of Bureau of Fire Services Inspection if applicable:	04/24/2025						
Dat	e of Health Authority Inspection if applicable:	N/A						
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed O Role:							
•	Medication pass / simulated pass observed? Yes \boxtimes No \square	If no, explain.						
•	Medication(s) and medication record(s) reviewed? Yes ⊠ ↑	No 🗌 If no, explain.						
•	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \boxtimes No \square If no, explain.							
•	Fire drills reviewed? Yes ⊠ No □ If no, explain.							
•	Fire safety equipment and practices observed? Yes $oximes$ No	☐ If no, explain.						
•	E-scores reviewed? (Special Certification Only) Yes ☐ No If no, explain. Water temperatures checked? Yes ☒ No ☐ If no, explain.	_ _						
•	Incident report follow-up? Yes ⊠ No ☐ If no, explain.							
•	Corrective action plan compliance verified? Yes \boxtimes CAP da CAP 6/12/2023, 312 (2), CAP 6/15/2023, 204 (3), 301 (10), 3 (1)(g), 318 (5),401 (2) N/A \square Number of excluded employees followed-up? 1 N/A \square							
•	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.

The facility had 22 residents and the license capacity is 20.

R 400.15301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

Resident A's resident care agreement was not updated since 2/25/2024.

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 S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

Apartment #401 contained prescription medications that were not in the original pharmacy supplied container and the medications were not secured.

REPEAT VIOLATION ESTABLISHED [Reference LSR dated 6/05/2023, CAP 06/15/2023.]

R 400.15312 Resident medications.

(3) Unless a resident's physician specifically states otherwise in writing, the giving, taking, or applying of prescription medications shall be supervised by the licensee, administrator, or direct care staff.

Resident B and Resident C were self-administering medications without written authorization by a physician.

R 400.15315 Handling of resident funds and valuables.

(12) Charges against the resident's account shall not exceed the agreed price for the services rendered and goods furnished or made available by the home to the resident.

Resident A's *Funds II* form documented that charges against the account exceeded the agreed price on the written *Resident Care Agreement*.

R 400.15316 Resident records.

(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:

(g) Weight record.

Monthly weights were not documented for Resident D in January 2025, February 2025 and March 2025. Monthly weights were not documented Resident E in January 2025 and March 2025.

REPEAT VIOLATION ESTABLISHED [Reference LSR dated 6/05/2023, CAP 06/15/2023.]

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

05/01/2025

Julie Elkins Date

Licensing Consultant

Julie Ellers