



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

November 21, 2025

Abdul Aleem  
3115 Silverwood Dr.  
Saginaw, MI 48603

RE: License #: AL730417080  
Investigation #: 2026A0572003  
Hampton Manor of Merrill

Dear Abdul Aleem:

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.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

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. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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) 643-7960

Sincerely,

A handwritten signature in black ink that reads "Anthony Humphrey". The signature is written in a cursive style with a large, looping flourish at the end.

Anthony Humphrey, Licensing Consultant  
Bureau of Community and Health Systems  
411 Genesee  
P.O. Box 5070  
Saginaw, MI 48605  
(810) 280-7718

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL730417080
<b>Investigation #:</b>	2026A0572003
<b>Complaint Receipt Date:</b>	10/13/2025
<b>Investigation Initiation Date:</b>	10/17/2025
<b>Report Due Date:</b>	12/12/2025
<b>Licensee Name:</b>	Abdul Aleem
<b>LicenseeAddress:</b>	3115 Silverwood Dr. Saginaw, MI 48603
<b>Licensee Telephone #:</b>	(989) 996-1610
<b>Administrator:</b>	Rachel Morgan
<b>Licensee Designee:</b>	N/A
<b>Name of Facility:</b>	Hampton Manor of Merrill
<b>Facility Address:</b>	400 N. Midland Road Merrill, MI 48637
<b>Facility Telephone #:</b>	(989) 715-2060
<b>Original Issuance Date:</b>	01/17/2024
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	07/17/2024
<b>Expiration Date:</b>	07/16/2026
<b>Capacity:</b>	20
<b>Program Type:</b>	ALZHEIMERS AGED

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
This facility received a disapproved fire inspection with a D-rating from the Bureau of Fire Services.	Yes

**III. METHODOLOGY**

10/13/2025	Special Investigation Intake 2026A0572003
10/17/2025	Special Investigation Initiated - On Site Staff, Jessica Metiva.
10/29/2025	Contact - Face to Face Administrator, Rachel Morgan.
10/29/2025	Contact - Document Sent State Fire Marshal Inspector, Brandon Breneman.
11/04/2025	Contact - Document Received Re-Inspection Report.
11/21/2025	Inspection Completed-BCAL Sub. Compliance
11/21/2025	Exit Conference Administrator, Rachel Morgan.
11/21/2025	APS referral An APS referral was made.

**ALLEGATION:**

This facility received a disapproved fire inspection with a D-rating from Bureau of Fire Services.

**INVESTIGATION:**

On 10/13/2025, the local licensing office received notice that Hampton Manor of Merrill did not pass their Bureau of Fire Services (BFS) inspection which was conducted on 10/09/2025. According to the BFS Inspection Report, the noted deficiencies:

1. Any device, equipment, system, condition, arrangement, level of protection, fire resistive construction, or any other feature requiring periodic testing, inspection, or operation to ensure its maintenance shall be tested, inspected, or operated as specified elsewhere in this code or as directed by the authority having jurisdiction.
  - a. No documentation of 4-year fire damper test
  - b. No documentation of annual generator service
2. For large facilities, the required fire alarm system shall be initiated by all of the following:
  - (1) Manual means in accordance with 9.6.2.
  - (2) Manual fire alarm box located at a convenient central control point.
  - (3) Required automatic sprinkler system.
  - (4) Required detection system.
3. Manual pull station located at the exit near room 18 is inoperable.
  - a. Testing of required emergency lighting systems shall be tested in accordance with one of the three options offered.
4. No documentation of annual emergency light testing.
  - a. For large facilities, cooking facilities, other than those within individual residential units, shall be protected in accordance with 9.2.3.32.3.3.8.
5. No documentation of Annual service or duct inspection for hood suppression system.

On 10/17/2025, an unannounced onsite was conducted at Hampton Manor of Merrill, located in Saginaw County Michigan. Onsite was Staff, Jessica Metiva. I spoke with Jessica Metiva briefly and she informed me that management was not available today. I will make another attempt within the next couple of weeks.

On 10/29/2025, I made another unannounced onsite to Hampton Manor of Merrill and interviewed Administrator, Rachel Morgan regarding the failed BFS inspection. Rachel Morgan informed me that the BFS Inspector came out on 09/09/2025 and 10/09/2025 for the re-inspection. Rachel Morgan did not have a timeframe for when the BFS inspector would be coming back out as they conduct unscheduled visits. They were initially given 30 days to correct all the deficiencies, but they did not get them done in time. The reason for not getting everything completed is they thought Cintas Fire Protection could fix all the deficiencies, but they only do certain things that were on the list, so they had to contact another company to complete the other

deficiencies. As of now, they have some of the deficiencies completed and the others are scheduled to be completed this week.

On 10/29/2025, I contacted BFS Inspector Brandon Breneman regarding having a timeframe for Hampton Manor of Merrill to be in compliance and if he has any concerns with this facility's ability to come into compliance. Brandon Breneman responded, "I do not have a timeframe for compliance. I am concerned with their ability to comply due to their failure to meet the initial 30-day window for compliance." Brandon Breneman plans on stopping tomorrow to confirm what has been completed and what is being scheduled.

On 11/04/2025, I received the BFS report for the re-inspection dated for 10/30/2025. Hampton Manor of Merrill received an A-Rating as all the deficiencies have been resolved.

On 11/21/2025, a referral was made to Adult Protective Services. This referral was made per policy due to deficiencies that could potentially place the residents at risk of a safe environment.

<b>APPLICABLE RULE</b>	
<b>R 400.647</b>	<b>Safety and maintenance of premises.</b>
	<b>(1) A facility must be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.</b>
<b>ANALYSIS:</b>	Based on my interview with the Administrator, Rachel Morgan and review of the BFS report, there is evidence that there was a licensing rules violation. On 10/13/2025, I received a BFS report indicating that Hampton Manor of Merrill received a D-Rating. In speaking with Rachel Morgan, she informed me that they were in the process of correcting all of the deficiencies as some had been taken care of and the others had already been scheduled.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 11/21/2025, an exit conference was held with Administrator, Rachel Morgan, in place of Licensee, Abdul Aleem. Rachel Morgan was informed of the findings of this special investigation.

**IV. RECOMMENDATION**

I recommend that no changes be made to the licensing status of this large adult group home, pending receipt of an acceptable corrective action plan (capacity 13-20).



11/21/2025

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Anthony Humphrey  
Licensing Consultant

Date

Approved By:



11/21/2025

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Mary E. Holton  
Area Manager

Date