



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

November 20, 2025

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

RE: License #: AH820402181
Investigation #: 2026A0585005
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.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

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) 335-5985.

Sincerely,

A handwritten signature in cursive script that reads "Brender d. Howard".

Brender Howard, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(313) 268-1788

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH820402181
Investigation #:	2026A0585005
Complaint Receipt Date:	10/22/2025
Investigation Initiation Date:	10/24/2025
Report Due Date:	12/21/2025
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:	08/01/2025
Expiration Date:	07/31/2026
Capacity:	113
Program Type:	AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
There is ongoing abuse at the facility.	No
Management taking money out of resident's personal account without their knowledge and staff under influence.	No
Staff misuse medication.	No
The facility is poorly cleaned, and maintenance is neglected.	No
Additional Findings	Yes

III. METHODOLOGY

10/22/2025	Special Investigation Intake 2026A0585005
10/24/2025	Special Investigation Initiated - Face to Face Interviewed administrator on site and requested information.
10/24/2025	Inspection Completed On-site Completed with observation, interview and record review.
10/24/2025	Inspection Completed-BCAL Sub. Compliance
11/20/2025	Exit Conference Conducted via email to authorized representative Shahid Imran.

ALLEGATION:

There is ongoing abuse at the facility.

INVESTIGATION:

On 10/21/2025, the licensing department received a complaint via BCHS online complaint. The complaint alleged ongoing abuse. Due to the nature of the complaint, no additional information could be obtained.

On 10/24/2025, onsite was completed at the facility. I interviewed the operation manager Noor Kahn who stated that he has received no complaints from residents, staff or family regarding abuse. She said the residents are safe and there have been no issues.

On 10/24/25, I interviewed Employee #1 at the facility. Employee #1 stated that she has not heard about any residents getting abused. She said the residents will tell you if something was going on with anyone.

During the onsite visit, I interviewed Resident A who was orient of people, place and her surroundings. Resident A stated she feels safe and does not have any issues with the staff. Resident A said she loves it at the facility.

During the onsite visit, I interviewed Resident B who was orient of people, place and surroundings. Resident B stated that he feels safe. He said the staff are not mean to him and they take good care of him.

During the onsite visit, I interviewed Resident C. She said that she does not have a problem with anyone, and she feels safe at the facility.

During the onsite visit, I interviewed Relative D who stated that she is happy with the care that Resident D receives from staff. Relative D stated she does not have any issues and Resident D is safe.

APPLICABLE RULE	
MCL 333.20201	Policy describing rights and responsibilities of patients or residents; adoption; posting; contents; additional requirements; discharging, harassing, retaliating, or discriminating against patient exercising protected right; exercise of rights by patient's representative; informing patient or resident of policy; designation of person to exercise rights and responsibilities; additional patients' rights; definitions.
	<p>(2) The policy describing the rights and responsibilities of patients or residents required under subsection (1) shall include, as a minimum, all of the following:</p> <p>(I) A patient or resident is entitled to be free from mental and physical abuse and from physical and chemical restraints, except those restraints authorized in writing by the attending physician or a physician's assistant to whom the physician has delegated the performance of medical care services for a specified and limited time or as are necessitated by an emergency to protect the patient or resident from injury to self or others, in which case the restraint may only be applied by a qualified professional who shall set forth in writing the circumstances requiring the use of restraints and who shall promptly report the action to the attending physician or physician's assistant. In case of chemical restraint, a physician shall be consulted</p>

	within 24 hours after the commencement of the chemical restraint.
ANALYSIS:	The complaint alleged there is ongoing abuse at the facility. Based on interviews with the administrator, staff, residents and relatives, this claim could not be substantiated. There is no evidence to support this claim.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Management taking money out of resident’s personal account without their knowledge and staff under influence.

INVESTIGATION:

The complaint alleged management taking money out of resident personal accounts without their knowledge and staff under influence. Due to the nature of the complaint, no additional information could be obtained.

The operation manager stated that he didn’t know anything about anybody taking money from the residents. He said they have zero tolerance for alcohol and drug use.

Employee #1’s statement was consistent with the operation manager regarding money and staff being under the influence.

APPLICABLE RULE	
R 325.1921	Governing bodies, administrators, and supervisors.
	(1) The owner, operator, and governing body of a home shall do all of the following: (a) Assume full legal responsibility for the overall conduct and operation of the home.

ANALYSIS:	The complaint alleged management taking money out of resident's personal account without their knowledge and staff under influence. There is no evidence to support this claim.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Staff misuse medication.

INVESTIGATION:

The complaint alleged misuse of medication. Due to the nature of this anonymous complaint, no additional information could be obtained regarding how the medication was misused.

The operation manager stated that medication is audited twice a week. He stated that medication is given as prescribed. He stated that medications are locked in the med cart and medication is signed out in MAR.

Employee #1 stated that she has not heard of medication being misused by anyone.

APPLICABLE RULE	
R 325.1932	Resident medications.
	(2) The giving, taking, or applying of prescription medications shall be supervised by the home in accordance with the resident's service plan.
ANALYSIS:	The complaint alleged staff misuse medication. There is no evidence to support this claim.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

The facility is poorly cleaned, and maintenance is neglected.

INVESTIGATION:

The complaint alleged that there are health concerns for residents due to the poorly cleaned facility and maintenance is neglected.

The operation manager stated all residents' rooms are cleaned daily. He said they have full-time maintenance person and three full time housekeepers.

I interviewed Employee #2 who stated that he is doing maintenance full-time at the facility, and he keeps everything right. He said that if it is something he can't repair himself, he calls a contractor.

I interviewed Employee #3 and Employee #4 who stated they are full-time housekeepers. They both agreed that residents' rooms are cleaned daily which includes dusting, cleaning the bathroom, and showers. They said the common areas are cleaned daily.

During the onsite, I inspected the facility. The facility was clean, and no issues were noted at that time.

APPLICABLE RULE	
R 325.1979	General maintenance and storage.
	(1) The building, equipment, and furniture shall be kept clean and in good repair.
ANALYSIS:	The complaint alleged the facility is poorly cleaned, and maintenance is neglected. There is no evidence to support this claim.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS

A review of the MAR shows the following:

Resident A was prescribed stimulant laxative plus tablet to be given one tablet nightly by mouth. The MAR indicates that it was not given 10/2-10, 10/13-14, 10/16-20, 10/22 and marked as med not on cart. Resident A was prescribed rivastigmine to take one capsule by mouth twice a day. On 10/7, rivastigmine was not given and marked not on cart. Omeprazole was prescribed to take one capsule daily. On 10/12-16, the MAR showed it was not given and was not on cart. The September MAR shows, farxiga was prescribed to take one tablet daily. On 9/21-26, 9/29, farxiga was not given and marked as med not on cart. Sertraline was prescribed as 9/6-9/9 and marked as not on cart. Stimulant laxative was prescribed to be given

one tablet nightly. On 9/20-9/21, 9/26, 9/29-9/30, stimulant laxative was marked as med not on cart.

Resident B was prescribed farxiga to be given one tablet daily. The MAR shows that on 10/20-10/23 it was marked as not given and med not on cart and med unavailable. Januvia was prescribed to be taken once daily. The MAR showed that Januvia was not given on 10/20-10/24 and marked as not on cart and not available.

APPLICABLE RULE	
R 325.1932	Resident medications.
	(2) The giving, taking, or applying of prescription medications shall be supervised by the home in accordance with the resident's service plan.
ANALYSIS:	Based on the review of the MAR, medication was not always available for the residents.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend no change in the status of the license.

Brender d. Howard

11/20/2025

Brender Howard
Licensing Staff

Date

Approved By:

Andrea L. Moore

11/20/2025

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

Date