



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 30, 2025

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

RE: License #: AH580402179
Investigation #: 2026A0628017
Hampton Manor of Bedford

Dear Licensee:

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 authorized representative 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) 335-5985.

Sincerely,

A handwritten signature in black ink that reads "Rebekah Looney".

Rebekah Looney, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH580402179
Investigation #:	2026A0628017
Complaint Receipt Date:	12/15/2025
Investigation Initiation Date:	12/22/2025
Report Due Date:	02/14/2026
Licensee Name:	Hampton Manor of Bedford LLC
Licensee Address:	3099 W Sterns Rd Lambertville, MI 48182
Licensee Telephone #:	(989) 971-9610
Administrator:	Reggie Parish
Authorized Representative:	Shahid Imran
Name of Facility:	Hampton Manor of Bedford
Facility Address:	3099 W Sterns Rd Lambertville, MI 48182
Facility Telephone #:	(734) 807-5800
Original Issuance Date:	04/09/2021
License Status:	REGULAR
Effective Date:	08/01/2025
Expiration Date:	07/31/2026
Capacity:	114
Program Type:	ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
There was no kitchen staff to feed residents.	No
Residents aren't given food on the menu.	Yes
Additional Findings	No

III. METHODOLOGY

12/15/2025	Special Investigation Intake 2026A0628017
12/22/2025	Special Investigation Initiated - On Site
12/30/2025	Exit Conference conducted with Shahid Imran

ALLEGATION: There were no kitchen staff to feed the residents.

INVESTIGATION:

On 12/15/2025, the department received a complaint alleging that there were two days with no kitchen staff to feed the residents.

On 12/22/2025, while onsite, I interviewed the administrator. She reported that there were two days the prior week when the kitchen staff did not show up to work. However, she reported that meals were still served and that she, along with Employee #1 and care staff covered the shifts in the kitchen and all meals were served on those days. Additionally, she reported that the meals served were not necessarily consistent with the posted menu. The administrator reported what meals were served and they were adequate to meet nutritional needs.

APPLICABLE RULE	
R 325.1931	Employees; general provisions.
	(5) The home shall have adequate and sufficient staff on duty at all times who are awake, fully dressed, and capable of providing for resident needs consistent with the resident service plans.

ANALYSIS:	Through an interview with the administrator, it was determined that the kitchen staff all failed to show up to work for two days. However, it was established that care staff, the administrator and Employee #1 worked in the kitchen to provide meals for the residents on both days in question. Since the residents' needs were met, this violation was not substantiated.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: Residents are given the food on the menu.

INVESTIGATION:

On 12/15/2025, the department received a complaint that alleged the residents were not getting good food. The complaint stated that the residents are served a lot of macaroni and cheese, grilled cheese and soup and crackers.

While onsite, on 12/22/2025, I interviewed the administrator. She reported that in the past the cooks had served a lot of macaroni and cheese, grilled cheese and soup. She also reported that recently she has had to terminate two kitchen managers for theft, insubordination, and not following the menus. The administrator has switched over to using Gordon Food Service menus. Additionally, the administrator is ordering all the food. However, she is still struggling to get the staff to follow the menus.

While onsite, I interview Employee #2 with the administrator in attendance. He stated that he was not serving baked beans for lunch but would be replacing them with coleslaw. When asked why he was not serving baked beans, he stated, "because we don't have enough". I asked Employee #2 if he had made that change to the posted menu and he said, "no". I asked if changes like that are usually made to the posted menu and he said, "I don't do it".


I asked the administrator about the shortage of baked beans, and she reported that they are short because they used them two days prior instead of making baked potatoes.

I inspected the dry storage, cooler, and freezer and found there to be ample food, including the baked potatoes that were supposed to be served two days prior.

APPLICABLE RULE	
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.
ANALYSIS:	Through an interview with staff and review of the menu, it was determined that the staff is not following the menu and is not updating the posted menu with changes. Therefore, this violation was substantiated.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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


12/29/2025

Rebekah Looney
Licensing Staff
Date

Approved By:


12/30/2025

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