



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

January 31, 2020

Shahid Imran  
Hampton Manor of Dundee LLC  
123 Waterstradt Commerce  
Dundee, MI 48131

RE: Application #: AL580396860  
**Hampton Manor of Dundee 4**  
**123 Waterstradt Commerce**  
**Dundee, MI 48131**

Dear Mr. Imran:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 20 is issued.

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 (313) 456-0380.

Sincerely,

A handwritten signature in blue ink that reads "Pandrea Robinson".

Pandrea Robinson, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 319-9682

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL580396860
<b>Applicant Name:</b>	Hampton Manor of Dundee LLC
<b>Applicant Address:</b>	123 Waterstradt Commerce Dundee, MI 48131
<b>Applicant Telephone #:</b>	(989) 971-9610
<b>Administrator/Licensee Designee:</b>	Shahid Imran
<b>Name of Facility:</b>	Hampton Manor of Dundee 4
<b>Facility Address:</b>	123 Waterstradt Commerce Dundee, MI 48131
<b>Facility Telephone #:</b>	(734) 826-9191
<b>Application Date:</b>	10/18/2018
<b>Capacity:</b>	20
<b>Program Type:</b>	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

## II. METHODOLOGY

10/18/2018	Enrollment
10/18/2018	Application Incomplete Letter Sent 1326A & AFC100
10/18/2018	Inspection Report Requested - Fire
10/18/2018	Contact - Document Sent Fire safety String and books
02/11/2019	Contact - Document Received 1326 & AFC100
02/22/2019	Application Incomplete Letter Sent
05/06/2019	Contact - Document Sent Email sent inquiring about the status of the incomplete application documents and requesting that they be sent to me lo later than 05/28/19.
05/28/2019	Contact - Telephone call received Call received from Razanne Pedawi, Administrative Executive from Hampton Manor of Dundee. Ms. Pedawi reported that she was still gathering the documents and reported she would be sending them to the printer and would overnight them to me.
06/28/2019	Contact - Document Received Received some of the requested incomplete application documents.
07/19/2019	Contact - Telephone call made Spoke with Ms. Pedawi and requested that she review the incomplete application letter previously mail and submit the documents identified on the letter as soon as possible.
08/14/2019	Contact - Document Sent 30 day continued interest letter sent to licensee designee.

09/16/2019	Contact - Document Received Received previously requested incomplete application documents.
10/08/2019	Contact - Telephone call made Spoke with Ms. Pedawi and informed her that all of the documents received were specific to HFA and not AFC. She reported she must have sent the wrong binder and would send the AFC documents by 10/18/19.
10/09/2019	Contact - Document Sent email sent to Ms. Pedawi informing her that I still need Mr. Sanford's training, proof of experience, and TB results.
10/29/2019	Contact - Document Sent 10 day continued interest letter mailed to licensee designee.
11/04/2019	Contact - Document Received
11/18/2019	Contact - Document Sent Email sent to administrator regarding missing documents and revisions required to policies and procedures.
12/10/2019	Technical Assistance Face to face TA and consultation regarding policies and procedures. They are using HFA rules not AFC.
12/19/2019	Inspection Completed-Fire Safety: A
01/08/2020	Inspection Completed On-site Preliminary walk through, facility is not resident ready, and the builders are completing finishing touches.
01/13/2020	Contact-Telephone call made Spoke with Ms. Brunette and went over final revisions required for polices/procedures.

01/17/2020	Contact-Document received Received updated policies and other previously requested documents.
01/21/2020	Inspection Completed-BCAL Full Compliance

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

Hampton Manor of Dundee #4 is located in the village of Dundee in the county of Monroe. Hampton Manor of Dundee #4 is a large facility that can accommodate up to 20 residents and will serve as the memory care unit. Hampton Manor of Dundee #4 is a blue vinyl sided and grey brick one level structure with no basement. The facility has a large parking lot with adequate parking available for staff and visitors. The facility has a large living room, dining room, warming kitchen (all meals will be prepared in Hampton Manor #2 and transported on food warmers to Hampton Manor of Dundee #4) and a nursing station with a locked medication room. Residents who reside in Hampton Manor of Dundee #4 will be able to enjoy all of the amenities housed in Hampton Manor of Dundee #2, and #3 which are adjoining licensed facilities that house a library, a full-service beauty/barber salon, a spa room, a nautical themed sunroom, and a formal dining room. Hampton Manor of Dundee #4 also has a total of 14 bedrooms, 6 will be double occupancy. All of the bedrooms at Hampton Manor of Dundee #4 are spacious and include ample closet space, as well as a full private bathroom that include walk-in showers. The facility is wheelchair accessible.

The furnace and hot water heaters are located on the main floor in a room that is constructed of material that has a 1-hour-fire-resistance rating with a 1-3/4-inch solid core door equipped with an automatic self-closing device and positive latching hardware. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational.

The facility has two separate and independent means of egress to the outside. The means of egress were measured at the time of the initial inspection and exceed the 30-inch minimum width requirement. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware and proper door width.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
501	17'8"x14'3"	252sq.ft	1
502	17'8"x14'3"	252sq.ft	2
503	17'8"x14'3"	252sq.ft	1
504	17'8"x14'3"	252sq.ft	2
505	17'8"x14'3"	252sq.ft	1
506	17'8"x14'3"	252sq.ft	2
507	17'8"x14'3"	252sq.ft	1
508	17'8"x14'3"	252sq.ft	2
509	17'8"x14'3"	252sq.ft	1
510	17'8"x14'3"	252sq.ft	2
511	17'8"x14'3"	252sq.ft	1
512	17'8"x14'3"	252sq.ft	2
513	16'8"x20.8"	344sq.ft	1
514	16'8"x20.8"	344sq.ft	1

The living, dining, and sitting room areas measure a total of **968** square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Based on the above information, it is concluded that this facility can accommodate **twenty (20)** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

## **B. Program Description**

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection and personal care to **twenty (20)** male or female ambulatory or non-ambulatory adults whose diagnosis is Aged, Alzheimer's, Physically Handicapped and those who require the regular use of a wheelchair, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills.

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

The licensee will ensure transportation is available for program and medical needs. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

### **C. Applicant and Administrator Qualifications**

The applicant is Hampton Manor of Dundee, L.L.C., which is a “Domestic Limited Liability Company”, was established in Michigan, on 07/17/2018. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The Board of Directors of Hampton Manor of Dundee, L.L.C. has submitted documentation appointing Shahid Imran as Licensee Designee for this facility and Kimberly Brunette as the Administrator of the facility.

A licensing record clearance request was completed with no lein convictions recorded for the licensee designee and the administrator. The licensee designee and administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

The licensee designee and administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 20-bed facility is adequate and includes a minimum of **1** staff-to-**15** residents per shift. The staffing pattern may change based on the needs of the residents. All staff shall be awake during sleeping hours.

The licensee designee acknowledges an understanding of the training and qualification requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff –to- resident ratio.

The licensee designee acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, “direct access” to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website ([www.miltcpartnership.org](http://www.miltcpartnership.org)), L-1 Identity Solutions™ (formerly Identix ®), and the related documents required to be maintained in each employees record to demonstrate compliance.

The licensee designee acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee, can administer medication to residents. In addition, the licensee has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The licensee designee acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the licensee designee acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all of the documents contained within each employee's file.

The licensee designee acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. The licensee designee indicated that it is their intent to achieve and maintain compliance with these requirements.

The licensee designee acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. The licensee designee has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

The licensee designee acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

The licensee designee acknowledges their responsibility to obtain all of the required forms and signatures that are to be completed prior to, or at the time of each resident's admission to the home as well as the required forms and signatures to be completed for each resident on an annual basis. In addition, the licensee designee acknowledges their responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

The licensee designee acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

#### **D. Rule/Statutory Violations**

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.



**IV. RECOMMENDATION**

I recommend issuance of a temporary license to this AFC adult large group home (capacity 13-20).



Pandrea Robinson  
Licensing Consultant

01/30/2020  
Date

Approved By:

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Ardra Hunter  
Area Manager

Date