



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

January 17, 2024

Abdul Aleem  
3115 Silverwood Dr.  
Saginaw, MI 48603

RE: Application #: AL730417080  
Hampton Manor of Merrill  
400 N. Midland St  
Merrill, MI 48637

Dear Abdul Aleem:

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 (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, sweeping 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  
LICENSING STUDY REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL730417080
<b>Applicant Name:</b>	Abdul Aleem
<b>Applicant Address:</b>	3115 Silverwood Dr. Saginaw, MI 48603
<b>Applicant Telephone #:</b>	(989) 996-1610
<b>Licensee:</b>	Abdul Aleem
<b>Administrator</b>	Rachel Morgan
<b>Name of Facility:</b>	Hampton Manor of Merrill
<b>Facility Address:</b>	400 N. Midland St Merrill, MI 48637
<b>Facility Telephone #:</b>	(989) 996-1610 07/14/2023
<b>Application Date:</b>	
<b>Capacity:</b>	20
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODOLOGY

07/14/2023	Enrollment
07/14/2023	Comment Sent request to have fingerprints located and uploaded.
07/14/2023	Inspection Report Requested - Fire
07/20/2023	PSOR on Address Completed
07/20/2023	File Transferred to Field Office
08/16/2023	Application Incomplete Letter Sent
08/31/2023	Contact - Document Received
09/11/2023	Application Incomplete Letter Sent
10/20/2023	Application Complete/ On-site Needed
10/20/2023	Inspection Completed On-site
10/20/2023	Inspection Completed-BCAL Full Compliance
10/20/2023	Inspection Completed-Env. Health: A
12/28/2023	Inspection Completed-Fire Safety: A
01/16/2024	Recommend License Issuance

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

The property known as Hampton Manor of Merrill is located at 400 N. Midland Road, Merrill, Michigan 48637. The property is owned by Abdul Aleem. The property is situated on a large 60,705 square feet lot located in the Village of Merrill Township. The facility had previously secured zoning approval from the Village of Merrill Township on 05/10/2017. There's an abundance of parking available on a paved lot.

Hampton Manor of Merrill is barrier free and features contemporary styling with upscale furnishings and interior décor. The exterior of the home features professionally landscaped patios surrounded by attractive fencing and plenty of land where residents can watch the outdoor scenery. The facility is built upon a full basement and has a large gathering room, dining room, private dining room, kitchen, medication room, office, laundry room, beauty salon, public bathroom, employee break room, visitation room, and twenty private bedrooms. All of the private bedrooms are equipped with bathrooms, 15 of which are full bathrooms. Also, there are four bedrooms which are equipped with a kitchenette. The facility is heated and air-conditioned with separate thermostatic controls in each bedroom. The facility is serviced by public water and sewage systems. The capacity of this facility will enable twenty (20) male and female residents to utilize 20 individual bedrooms. There is ample space in the facility bedrooms for non-affected spouses to reside with prior Department approval.

The facility is equipped with five natural gas furnaces which are located in the basement of the facility with a 1-3/4-inch solid core door equipped with an automatic self-closing device and positive latching hardware located at the bottom and top of stairs. 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 is also sprinkled with a hydrant dedicated to the sprinkling system located next to the building. Fire extinguishers and emergency evacuation plans are placed throughout the facility.

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

Bedroom #	Room Dimensions	Total Square Footage	Number of beds
1	12' x 14'	168	1
2	12' x 13'	156	1
3	11'11" x 15.5'	184.71	1
4	10' x 11'	110	1
5	11'9" x 22'	258.5	1
6	10' x 11'	110	1
7	11'9" x 22'	258.5	1
8	11'9" x 21'	246.75	1
9	10 X 9.5"	95	1

10	11'9" x 21'	246.75	1
11	10 X 9.5"	95	1
12	11'11" X 14.5'	171.80	1
13	11'11" X 12.5'	147.97	1
14	11'11" X 12.5'	147.97	1
15	11'11" X 12.5'	147.97	1
16	11'11" X 12.5'	147.97	1
17	11'11" X 12.5'	147.97	1
18	11'11" X 12.5'	147.97	1
19	11'11" X 14.5'	171.80	1
20	11'11" X 14.5'	171.80	1

The gathering room, dining room, and private dining room areas measure a total of 1205.78 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

On 10/20/2023, it was determined that Hampton Manor of Merrill was in compliance with the Environmental Health Rules for Adult Foster Care Large Group Homes.

On 12/28/2023, the Bureau of Fire Services determined Hampton Manor of Merrill in compliance with the Fire Safety Rules for Adult Foster Care Large Group Homes.

On 01/05/2024, I determined that Hampton Manor of Merrill was in compliance with the Maintenance of Premises Rules for Adult Foster Care Large Group Homes.

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, Alzheimer's services disclosure statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. Hampton Manor of Merrill intends to provide 24-hour supervision, protection, and personal care to twenty (20) male and female adults who may be Aged and or diagnosed with Alzheimer's disease or related dementias, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. Residents may be referred from Commissions on Aging, waiver programs, hospitals, clinics, and the community at large.

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 either arrange or provide all transportation for program and medical needs. Hampton Manor of Merrill 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 Abdul Aleem is the owner of Hampton Manor of Merrill. 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. Abdul Aleem has submitted documentation appointing Rachel Morgan as the Administrator for this facility.

A licensing record clearance request was completed with no lien convictions recorded for both Abdul Aleem and Rachel Morgan. Medical Clearance records were submitted and a medical clearance request with a statement from a physician documenting good health and current TB-tine negative results.

The applicant has 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 4 staff to 20 residents on the first and second shifts with 3 staff on the third shift. All staff shall be awake during sleeping hours.

The applicant 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 applicant acknowledges 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 offered 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)), and the related documents required to be maintained in each employee's record to demonstrate compliance.

The applicant 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 applicant has indicated resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The applicant acknowledges his 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 applicant acknowledges his 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 applicant 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 applicant indicated that it is his intent to achieve and maintain compliance with these requirements.

The applicant 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 applicant has indicated his intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

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

The applicant acknowledges his 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 applicant acknowledges his 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 applicant acknowledges his 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. Compliance with the physical plant rules has been determined. Compliance with Quality-of-Care rules will be assessed during the period of temporary licensing via an on-site inspection.

**IV. RECOMMENDATION**

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



01/16/2024

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Anthony Humphrey  
Licensing Consultant

Date

Approved By:



01/17/2024

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Mary E. Holton  
Area Manager

Date