

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

June 28, 2024

Shahid Imran Hampton Manor of Brighton 1320 Rickett Road Brighton, MI 48116

> RE: License #: AH470412880 Investigation #: 2024A0784057 Hampton Manor of Brighton

Dear Shahid 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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

Please review the enclosed documentation for accuracy and contact me with any questions. If I am not available, and you need to speak to someone immediately, please contact the local office at (517) 284-9730.

Sincerely,

Varon L. Clum

Aaron Clum, Licensing Staff Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (517) 230-2778

enclosure

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

#### I. IDENTIFYING INFORMATION

icense #:	AH470412880
license #:	ΑΠ470412000
erre etimeticus #.	202440704057
nvestigation #:	2024A0784057
Complaint Receipt Date:	05/15/2024
nvestigation Initiation Date:	05/16/2024
Report Due Date:	07/14/2024
•	
icensee Name:	Brighton Comfort Care, LLC
icensee Address:	2635 Lapeer Road
	Auburn Hills, MI 48326
iconcos Tolonhono #:	(090) 607 0001
icensee Telephone #:	(989) 607-0001
dministrator/Authorized	Shahid Imran
Representative:	
lame of Facility:	Hampton Manor of Brighton
acility Address:	1320 Rickett Road
	Brighton, MI 48116
acility Telephone #:	(810) 247-8442
Driginal Issuance Date:	04/10/2023
icense Status:	REGULAR
icense Status.	IN OULAR
Effective Date:	10/10/2022
	10/10/2023
instruction Data	4.0/00/0004
xpiration Date:	10/09/2024
Capacity:	93
Program Type:	ALZHEIMERS
	AGED

# II. ALLEGATION(S)

	Violation Established?
Medications were administered late.	Yes
Associate 1 lives at the facility amongst residents.	No
The memory care (MC) has uncontrolled pests.	No
The facility is filthy.	No
Additional Findings	No

### III. METHODOLOGY

05/15/2024	Special Investigation Intake 2024A0784057
05/16/2024	Special Investigation Initiated - On Site
05/16/2024	Inspection Completed On-site
05/16/2024	Exit Conference Conducted with administrator Altaf Veryamani

#### ALLEGATION:

#### Medications were administered late.

#### **INVESTIGATION:**

According to the complaint, on 5/13/2024, medications were administered over an hour after the prescribed time. No resident names were provided within the allegations.

On 5/16/2024, I interviewed supervisor Altaf Veryamani at the facility. Resident care coordinator Darrien Vaughn was present for the interview. Ms. Veryamani stated the was not aware of any issues of late medications on 5/13/2024. Mr. Veryamani stated no staff, residents or family members have brought concerns to him. Mr. Vaughen stated he was also unaware of an y complaints or issues related to medication. Mr. Vaughen stated he just started working with the facility recently.

I reviewed the facility *Med Variance* report for 5/13/2024, provided by Mr. Veryamani. Under a section of the report titled Early/Late items, the report included multiple medications for Residents A through U which were administered at least an hour before or after the scheduled time for administration. According to several of the listed times for administration, several of these medications were administered between an hour and a half to two hours early and late.

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 that on 5/13/2024, medications were administered over an hour late. Review of the facility med variance record for 5/13/2024 revealed that not only were several medications administered over an hour after the scheduled time, but several medications were also administered over an hour before the scheduled time. Based on the findings the facility is not in compliance with this rule.
CONCLUSION:	VIOLATION ESTABLISHED

# ALLEGATION:

#### Associate 1 lives at the facility amongst the residents.

#### **INVESTIGATION:**

According to the complaint, Associate 1 lives at the facility in a licensed resident apartment. No additional information was provided regarding this complaint.

When interviewed, Mr. Veryamani stated Associate 1 does not live at the facility. Mr. Veryamani stated staff are not permitted to live at the facility. Mr. Veryamani stated he has had this concern brought to him before and that it appears to be based off of a misunderstanding. Mr. Veryamani stated that as a part of Associate 1's religious practice, he adheres to the observance of Ramadan which took place from 3/10/2024 to 4/09/2024. Mr. Veryamani stated that during this time, Associate 1, who works third shift, would pray during the night on his breaks as a part of the observance of Ramadan. Mr. Veryamani stated Associate 1 would sometimes use an empty room to pray in and that it appeared someone must have thought he was living at the facility.

APPLICABLE RULE	
R 325.1964	Interiors.
	(18) A home shall provide functionally separate living, sleeping, dining, handwashing, toilet, and bathing facilities for employees and members of their families who live on the premises.
ANALYSIS:	The complaint alleged Associate 1 lived at the facility. The investigation did not reveal evidence to support this allegation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

### ALLEGATION:

#### The Memory Care has uncontrolled pests.

#### INVESTIGATION:

According to the complaint, there is an uncontrolled pest problem at the facility.

When interviewed, Mr. Veryamani stated that over the past couple months, pest control services, provided by *ORKIN*, have been called to the facility provided services. Mr. Veryamani stated that recently, ants were observed in the kitchen/dining area of the memory care and that this issue was addressed by *ORKIN*. During the onsite, I walked through the MC area of the facility. I did not observe any ants or pests of any kind in any of the common areas or in the kitchen.

I reviewed service receipts from ORKIN, provided by Mr. Veryamani. A receipt dated 4/17/2024 indicated an *ORKIN* representative was at the facility in relation to "rodent control" around the perimeter of the building. According to the receipt this issued was "resolved". A receipt dated 5/09/2024, indicated an ORKIN representative provided services as the facility due to the presence of ants in the dining area of the MC.

APPLICABLE RULE	
R 325.1978	Insect and vermin control.
	(1) A home shall be kept free from insects and vermin

ANALYSIS:	The complaint alleged the facility has uncontrolled pests. While pests have been present at the facility, appropriate actions have been taken by the facility to address the issue.
CONCLUSION:	VIOLATION NOT ESTABLISHED

### ALLEGATION:

#### The facility is filthy.

#### **INVESTIGATION:**

According to the complaint, the facility is filthy.

When interviewed, Mr. Veryamani stated he is not aware of any issues related to housekeeping at the facility. Mr. Veryamani stated he has not observed anything he would be concerned about personally and has not had anyone report any concerns to him. Mr. Veryamani stated the facility schedules housekeeping staff Monday through Friday to clean rooms and common areas of the facility and that care staff also provide cleaning as needed.

During the onsite, I walked through all common areas of the assisted living (AL) and MC and observed multiple resident rooms during that time. The facility appeared clean with no noticeable issues.

I reviewed the facilities May 2024 housekeeping staff schedule, provide by Mr. Veryamani. The schedule read consistently with his statements.

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 was filthy. The investigation did not reveal evidence to support the allegation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

# **IV. RECOMMENDATION**

Upon receipt of an acceptable corrective action plan, it is recommended that the status of the license remain unchanged.

Daron L. Clum

6/12/2024

Aaron Clum Licensing Staff Date

Approved By:

Maron e

06/28/2024

Date

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