



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

July 9, 2024

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

RE: License #: AL580396858  
**Hampton Manor of Dundee 2**  
**123 Waterstradt Commerce**  
**Dundee, MI 48131**

Dear Mr. Imran:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (313) 456-0380.

Sincerely,

A handwritten signature in blue ink that reads "Pandrea Robinson". The signature is fluid and cursive, with the first name "Pandrea" and last name "Robinson" clearly distinguishable.

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

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL580396858
<b>Licensee Name:</b>	Hampton Manor of Dundee LLC
<b>Licensee Address:</b>	123 Waterstradt Commerce Dundee, MI 48131
<b>Licensee Telephone #:</b>	(734) 673-3130
<b>Licensee/Licensee Designee:</b>	Shahid Imran
<b>Administrator:</b>	Shahid Imran
<b>Name of Facility:</b>	Hampton Manor of Dundee 2
<b>Facility Address:</b>	123 Waterstradt Commerce Dundee, MI 48131
<b>Facility Telephone #:</b>	(734) 826-9191
<b>Original Issuance Date:</b>	01/31/2020
<b>Capacity:</b>	20
<b>Program Type:</b>	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/08/2024

Date of Bureau of Fire Services Inspection if applicable: 03/04/2024

Date of Health Authority Inspection if applicable: 07/08/2024

No. of staff interviewed and/or observed 4  
No. of residents interviewed and/or observed 15  
No. of others interviewed Role:

- Medication pass / simulated pass observed? Yes ☒ No ☐ If no, explain.
- Medication(s) and medication record(s) reviewed? Yes ☒ No ☐ If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes ☒ No ☐ If no, explain.
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.
- Fire drills reviewed? Yes ☒ No ☐ If no, explain.
- Fire safety equipment and practices observed? Yes ☒ No ☐ If no, explain.
- E-scores reviewed? (Special Certification Only) Yes ☐ No ☐ N/A ☒  
If no, explain.
- Water temperatures checked? Yes ☒ No ☐ If no, explain.
- Incident report follow-up? Yes ☒ No ☐ If no, explain.
- Corrective action plan compliance verified? Yes ☒ CAP date/s and rule/s:  
R 301(4), 301 (6) and 301 (10) CAP dated 07/01/22. N/A ☐
- Number of excluded employees followed-up? N/A ☒
- Variances? Yes ☐ (please explain) No ☐ N/A ☒

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was determined to be in substantial compliance with rules and requirements.

This facility was found to be in non-compliance with the following rules:

**R 400.15301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

**(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.**

At the time of inspection, Resident A did not have an annual health care appraisal for 2023. Resident B did not have an annual health care appraisal for 2024. Resident B's health care appraisal was due in February of 2024 and has not been completed to date.

**\*Repeat violation established\* LSR dated 07/01/22; CAP dated 07/12/2022\***

**R 400.15301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

**(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.**

At the time of inspection, Resident B did not have an annual assessment plan completed for 2023 or 2024. Resident B's 2024 assessment plan was due to be completed in April of 2024.

**R 400.15318      Emergency preparedness; evacuation plan; emergency transportation.**

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

At the time of inspection, I observed the following;

- No fire drills were conducted during the 4th quarter of 2022.
- No fire drills were conducted during 2023 that could be counted as they did not contain license numbers, times that the drills were conducted, residents who participated, or the residents were not actually evacuated.
- No fire drills were conducted for this building individually in 2024. Four fire drills were completed and combined with the three other licensed adjoining buildings. Further, residents were not being evacuated for all drills as required. This practice is prohibited as each licensed building is required to complete fire drills and to document them. Residents are also required to evacuate during every emergency and evacuation drill.

#### **IV. RECOMMENDATION**

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.



Pandrea Robinson  
Licensing Consultant

07/09/24  
Date