

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 #: AL580396860

Hampton Manor of Dundee 4 123 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,

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

License #: AL580396860

Licensee Name: Hampton Manor of Dundee LLC

Licensee Address: 123 Waterstradt Commerce

Dundee, MI 48131

Licensee Telephone #: (734) 673-3130

Licensee/Licensee Designee: Shahid Imran

Administrator: Shahid Imran

Name of Facility: Hampton Manor of Dundee 4

Facility Address: 123 Waterstradt Commerce

Dundee, MI 48131

Facility Telephone #: (734) 826-9191

Original Issuance Date: 01/31/2020

Capacity: 20

Program Type: PHYSICALLY HANDICAPPED

AGED

ALZHEIMERS

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	07/08/2	2024
Date of Bureau of Fire Services Inspection if applicable: 03/07/2024			
Date	e of Health Authority Inspection if applicable:		07/08/2024
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed Role:		2 9
•	Medication pass / simulated pass observed?	Yes ⊠	No ☐ If no, explain.
•	Medication(s) and medication record(s) revie	wed? Y	'es ⊠ No □ If no, explain.
•	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \square No \boxtimes If no, explain.		
•	Fire drills reviewed? Yes ⊠ No ☐ If no, ex	cplain.	
•	Fire safety equipment and practices observe	d? Yes	No □ If no, explain.
•	E-scores reviewed? (Special Certification On If no, explain. Water temperatures checked? Yes ⊠ No □		
•	Incident report follow-up? Yes No If	no, expl	ain.
•	Corrective action plan compliance verified? R 304 (4) CAP dated 07/01/22 N/A Number of excluded employees followed-up?		CAP date/s and rule/s: 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 and C did not have health care appraisals completed within the 90 days prior to admission.

Resident B did not have an annual health care appraisal completed for 2023.

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, I observed the following;

- Resident A did not have an assessment plan completed at the time of admission.
- Resident B did not have an annual assessment plant for 2023.
- Resident C did not have and annual assessment plan for 2024. Resident C's assessment plan was due in January of 2024.

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

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 conducted during the 4th guarter of 2022.
- No day or sleep fire drills conducted during the 1st quarter of 2023.
- No sleep or evening drills conducted during the 2nd quarter of 2023.
- No evening or sleep drills conducted during 3rd quarter of 2023.
- No evening or sleep drills conducted during the 4th quarter of 2023.
- 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