

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

MARLON I. BROWN, DPA DIRECTOR

November 1, 2024

Ginger Nahikian Niche Aging Center Hampton LLC 581 Scheurmann Rd Bay City, MI 48708

RE: License #:	AL090409334
	Niche Aging Center Hampton
	581 Scheurmann Rd
	Bay City, MI 48708

Dear Ginger Nahikian:

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 (517) 643-7960.

Sincerely,

and and

Shamidah Wyden, Licensing Consultant Bureau of Community and Health Systems 411 Genesee P.O. Box 5070 Saginaw, MI 48607 989-395-6853

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

I. IDENTIFYING INFORMATION

License #:	AL090409334
Licensee Name:	Niche Aging Center Hampton LLC
Licensee Address:	581 Scheurmann Rd
	Bay City, MI 48708
Licensee Telephone #:	(989) 737-2355
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Licensee Designee:	Ginger Nahikian
Administrator:	Ginger Nahikian
Name of Facility:	Niche Aging Center Hampton
Facility Address:	581 Scheurmann Rd
	Bay City, MI 48708
Facility Telephone #:	(989) 737-2355
	05/00/0000
Original Issuance Date:	05/20/2022
Capacity:	20
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED
	DEVELOPMENTALLY DISABLED
	MENTALLY ILL
	AGED
	ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/25/2024				
Date of Bureau of Fire Services Inspection if applicable: 10/24/2024				
Date of Health Authority Inspection if applicable: N/A				
No. of staff interviewed and/or observed3No. of residents interviewed and/or observed14No. of others interviewed1Role:Licensee Designee				
● Medication pass / simulated pass observed? Yes ⊠ No □ If no, explain.				
 Medication(s) and medication record(s) reviewed? Yes X No I If no, explain. 				
 Resident funds and associated documents reviewed for at least one resident? Yes X No I If no, explain. Meal preparation / service observed? Yes X No I 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. There were no recent incident reports requiring follow-up. Corrective action plan compliance verified? Yes ⊠ CAP date/s and rule/s: CAP Date: 07/09/2024 R305(3); CAP Date:10/04/2022 R311(1)(b), R302(6), R301(4), R310(4) 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 found to be in non-compliance with the following rules:		
R 400.15313	Resident nutrition.	
	(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.	
At the time of ins corrected during	pection, the facility's menu was not posted. This rule violation was the on-site.	
R 400.15318	Emergency preparedness; evacuation plan; emergency transportation.	
	(5) 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.	
	pection, there was no documented fire drill conducted during or the second quarter of 2023.	
R 400.15316	Resident records.	
	(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:	
	(a) Identifying information, including, at a minimum, all of the following: (viii) Funeral provisions and preferences.	
At the time of inspection, there were no documented funeral provisions for Resident A and Resident B.		
R 400.15401	Environmental health.	
	(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.	

At the time of inspection, the water temperature in resident room #22, #14, and #9 were not within the 105- and 120-degree Fahrenheit range.		
R 400.15401	Environmental health.	
	(4) All garbage and rubbish that contains food wastes shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.	
At the time of inspection, the kitchen's garbage can was not equipped with a lid.		
R 400.15402	Food service.	
	 (3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers. 	
At the time of inspection, resident room #9 had a personal refrigerator that was not equipped with a thermometer. This rule violation was corrected during the inspection.		
R 400.15403	Maintenance of premises.	
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.	
At the time of ins metal duct work.	pection, the dryer in the laundry room was not equipped with solid	

IV. RECOMMENDATION

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

Naintelips

11/01/2024

Shamidah Wyden Licensing Consultant Date