



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 24, 2026

Shahid Imran
Hampton Manor of Taylor
13750 Pardee Rd
Taylor, MI 48180

RE: License #: AH820410005
Investigation #: 2026A0784026
Hampton Manor of Taylor

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.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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) 335-5985.

Sincerely,

A handwritten signature in cursive script that reads "Aaron 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

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

I. IDENTIFYING INFORMATION

License #:	AH820410005
Investigation #:	2026A0784026
Complaint Receipt Date:	03/19/2026
Investigation Initiation Date:	03/19/2026
Report Due Date:	05/18/2026
Licensee Name:	Hampton Manor of Taylor LLC
Licensee Address:	13750 Pardee Rd Taylor, MI 48180
Licensee Telephone #:	(989) 671-9610
Administrator/Authorized Representative	Shahid Imran
Name of Facility:	Hampton Manor of Taylor
Facility Address:	13750 Pardee Rd Taylor, MI 48180
Facility Telephone #:	(989) 971-9610
Original Issuance Date:	08/03/2023
License Status:	REGULAR
Effective Date:	08/01/2025
Expiration Date:	07/31/2026
Capacity:	102
Program Type:	AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Resident A was not administered her medication.	Yes
Additional Findings	No

III. METHODOLOGY

03/19/2026	Special Investigation Intake 2026A0784026
03/19/2026	Special Investigation Initiated - Telephone Interview with complainant
03/19/2026	Contact - Telephone call made Interview with staff 1
03/19/2026	Contact - Telephone call made Interview with staff 2
03/19/2026	Contact - Document Sent Investigative document/info request sent to staff 1 and administrator/AR Shahid Imran
03/23/2026	Contact - Document Received Email from staff 1 with investigative documents/info
04/24/2026	Exit - Email Report sent

ALLEGATION:

Resident A was not administered her medication

INVESTIGATION:

On 3/19/2026, the department received this complaint.

According to the complaint, Resident A has run out of medication. This has happened several times.

On 3/19/2026, I interviewed complainant by telephone. Complainant stated Resident A takes blood pressure medication. Complainant stated this medication recently ran out and Resident A missed a dose and that this has happened on several occasions in the past.

On 3/19/2026, I interviewed staff 1 by telephone. Staff 1 stated she was not aware Resident A had run out of her medication. Staff 1 stated the facilities computer system for tracking medications notifies staff when medications are down to the last seven days. Staff 1 stated that when this notification comes up, medication technicians (med techs) are supposed to click, a “reorder” option in the system to have the medication reordered.

On 3/19/2026, I interviewed staff 2 by telephone. Staff 2 provided statements consistent with staff 1 regarding the medication reordering process. Staff 2 stated Resident A’s blood pressure medication, Amlodipine, is a routine medication administered once a day. Staff 2 confirmed that the medication ran out. Staff 2 stated the medication ran out on 3/17/2026 and that she reordered the medication when she was notified on 3/18/2026. Staff 2 stated the medication was received today, 3/19/2026, and that Resident A was administered the medication. Staff 2 stated the medication should have been reordered sooner and could not explain why it was not. Staff 2 confirmed this is not the first time Resident A’s medication had run out.

I reviewed Resident A’s medication administration record (MAR) for March 2026. The MAR read consistently with staff 2s statements indicating Resident a did not receive her prescribed Amlodipine on 3/18/2026 due to the medication not being available.

APPLICABLE RULE	
R 325.1932	Resident medications.
	(2) Prescribed medication managed by the home must be given, taken, or applied pursuant to labeling instructions,

	orders and by the prescribing licensed healthcare professional.
ANALYSIS:	Based on the findings, the allegation is supported.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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

Aaron L. Clum

4/23/2026

Aaron Clum
Licensing Staff

Date

Approved By:

Andrea L. Moore

04/24/2026

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

Date