



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

August 28, 2025

Shahid Imran
Hamburg Investors Holdings LLC
7560 River Rd
Flushing, MI 48433

RE: License #: AL470402157
Investigation #: 2025A0466038
Hampton Manor Of Hamburg 1

Dear Mr. 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. In the event that 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 "Julie Elkins".

Julie Elkins, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL470402157
Investigation #:	2025A0466038
Complaint Receipt Date:	06/03/2025
Investigation Initiation Date:	06/03/2025
Report Due Date:	08/02/2025
Licensee Name:	Hamburg Investors Holdings LLC
Licensee Address:	7244 E M36 Hamburg, MI 48139
Licensee Telephone #:	(313) 645-3595
Administrator:	Shahid Imran
Licensee Designee:	Shahid Imran
Name of Facility:	Hampton Manor Of Hamburg 1
Facility Address:	7300 Village Center Dr. Whitmore Lake, MI 48189
Facility Telephone #:	(734) 673-3130
Original Issuance Date:	11/20/2020
License Status:	REGULAR
Effective Date:	05/20/2025
Expiration Date:	05/19/2027
Capacity:	20
Program Type:	ALZHEIMERS AGED

II. ALLEGATION:

	Violation Established?
Resident A requires assistance from two direct care workers and the facility does not always have the required staffing.	Yes

III. METHODOLOGY

06/03/2025	Special Investigation Intake 2025A0466038.
06/03/2025	Special Investigation Initiated – Telephone Complainant interviewed.
06/17/2025	Inspection Completed On-site.
08/26/2025	Contact- Document sent to Altaf Veryamani requested/received documents.
08/28/2025	Exit conference with Shahid Imran.
08/28/2025	APS Referral- not required no suspected abuse/neglect.

ALLEGATION: Resident A requires assistance from two direct care workers and the facility does not always have the required staffing.

INVESTIGATION:

On 06/03/2025, Complainant reported that the facility is chronically understaffed, and management consistently fails to provide support during critical shortages. Complainant reported that Resident A requires two direct care workers (DCWs) to transfer. Complainant reported that when staff raise concerns about being overworked or experiencing burnout, they are frequently ignored or, in some cases, terminated for speaking up. Complainant reported that this culture of fear and retaliation prevents necessary issues from being addressed. Complainant reported that the administrator routinely walks the building to monitor staff and assigns housekeeping tasks during downtime, including dusting and vacuuming, despite staff already being overextended with care responsibilities. Complainant reported that staff are underpaid, underappreciated, and forced to take on additional responsibilities when others fail to perform their duties with no compensation or acknowledgment. Complainant reported that repeated concerns brought to management about unfair workloads and inadequate staff performance are dismissed or ignored. Complainant reported that the current working conditions are unsustainable and directly affect both the quality of resident care and staff well-being. Complainant reported that although there may be two DCWs during the day, by 5pm there is typically just one DCW on duty.

On 06/17/2025, I conducted an unannounced investigation and I reviewed the *building census* provided by executive director (ED) Altaf Veryamani who confirmed that the facility has 20 residents and had more than 15 residents between 4/28/2025 through 6/17/2025.

I interviewed Caren Reyes, Residential Care Manager/Scheduler, who reported that the facility operates with several different shifts: 7am-7pm, 7am-3:30pm, 7am-5:30p, 7am-3pm, 3pm-11pm and 7pm-7am or 11pm-7am. Ms. Reyes reported that it is difficult to hire staff so sometimes she must schedule the DCW for the hours that they are willing to work even if it does not fall within the “ideal” staffing shifts. Ms. Reyes reported there are four individually licensed facilities that are all connected and at night each building has one DCW that is trained in medication administration assigned to each facility. Ms. Reyes reported that there is a fifth DCW on the schedule working as a “float” to assist all DCWs on duty to meet the resident needs that require two-person assistance. Ms. Reyes reported that sometimes she documents the “float” on the lines in-between facilities on the list or the “float” is the second DCW on duty in Hampton Manor of Hamburg #3. Ms. Reyes reported DCWs have complained to her that there are not enough DCWs each shift however she reported that administration “follows the state requirements as much as possible” regarding staffing ratios. Ms. Reyes reported that when DCWs call in that can cause difficulty with the staffing ratios.

Ms. Reyes reported that Resident A requires the assistance of two DCWs to be transferred to the toilet before bed and during the day as she is very stiff. Ms. Reyes reported that Resident A’s brief is changed in bed every two hours at night and this requires only one DCW to complete.

At the time of the investigation, I reviewed Resident A’s *Assessment Plan* which was dated 06/17/2024. This document is signed by facility nurse Julie Toering and in the “comment” section it states, “Will need one assist with toileting, dressing and undressing. Will need help changing brief. Is able to use call light without difficulty.” Resident A’s *Assessment Plan* did not address that Resident A’s brief is changed at night in bed.

I reviewed the *Health Care Appraisal* that was in Resident A’s record but it did not have a name on it. It was dated 07/02/2024. It documented that Resident A is “frail in appearance.” In the “diagnosis” section of the report it stated, “Parkinsons, anxiety, urinary retention, hypothyroidism, lymphedema, venous insufficiency.” In the “mobility” section it documented the use of a “walker and wheelchair.”

I reviewed the Hampton Manor Shift daily assignment schedule or staff schedule dated 4/28/2025 through 6/17/2025. I noted that on 04/30/2025, 05/03/2025, 05/04/2025, 05/09/2025, 5/11/2025, 05/13/2025, 05/17/2025, 05/18/2025, 05/25/2025, 06/08/2025 and 06/16/2025 there were not two DCWs working during

waking hours even though the facility had more 15 residents admitted between those dates.

The Hampton Manor Shift daily assignment schedule or staff schedule dated 4/28/2025 through 6/17/2025 documented that there was one DCW assigned to the facility during sleeping hours.

On 08/26/2025, ED Veryamani emailed me an updated *Assessment Plan* for Resident A dated 6/20/2025. The comment section stated, "Has Puree diet. Has ensure for meal replacement and to prevent further weight loss."

ED Veryamani emailed me an updated *Health Care Appraisal* for Resident A which was dated 08/11/2025. The appraisal documented that Resident A was "frail in appearance, requires assistance with feeding, requires 24/7 care with all ADL's and weak upper and lower extremities."

APPLICABLE RULE	
R 400.15206	Staffing requirements.
	(1) The ratio of direct care staff to residents shall be adequate as determined by the department, to carry out the responsibilities defined in the act and in these rules and shall not be less than 1 direct care staff to 15 residents during waking hours or less than 1 direct care staff member to 20 residents during normal sleeping hours.
ANALYSIS:	Hampton Manor Shift assignments or staff schedule dated 4/28/2025 through 6/17/2025 documented that on 04/30/2025, 05/03/2025, 05/04/2025, 05/09/2025, 5/11/2025, 05/13/2025, 05/17/2025, 05/18/2025, 05/25/2025, 06/08/2025 and 06/16/2025, there were not two direct care workers during waking hours even though the facility census was over 15 residents. Two direct care staff are required during waking hours when there is more than 15 residents admitted to the facility.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.15206	Staffing requirements.
	(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.

ANALYSIS:	Although Complainant and Ms. Reyes both reported Resident A requires assistance from two direct care workers for transferring, Resident A's <i>Assessment Plan</i> and her <i>Health Care Appraisal</i> did not document the need for two direct care staff to assist with transferring Resident A, therefore there is not enough evidence to establish a violation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Contingent upon the receipt of an acceptable corrective action plan I recommend no change in license status.

Julie Elkins

08/28/2025

Julie Elkins Date
Licensing Consultant

Approved By:

Dawn Timm

08/28/2025

Dawn N. Timm Date
Area Manager