



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

May 31, 2022

Nicholas Burnett  
Flatrock Manor, Inc.  
2360 Stonebridge Drive  
Flint, MI 48532

RE: Application #: AS250411168  
Richfield  
6405 Richfield Road  
Flint, MI 48506

Dear Mr. Burnett:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 6 is issued.

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 (906) 226-4171.

Sincerely,

A handwritten signature in cursive script that reads "Sabrina McGowan".

Sabrina McGowan, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(810) 835-1019

enclosure

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

**I. IDENTIFYING INFORMATION**

**License #:** AS250411168

**Applicant Name:** Flatrock Manor, Inc.

**Applicant Address:** 7012 River Road  
Flushing, MI 48433

**Applicant Telephone #:** (810) 964-1430

**Administrator/Licensee Designee:** Morgan Yarkowsky

**Name of Facility:** Richfield

**Facility Address:** 6405 Richfield Road  
Flint, MI 48506

**Facility Telephone #:** (810) 877-6932  
11/29/2021

**Application Date:**

**Capacity:** 6

**Program Type:** PHYSICALLY HANDICAPPED  
DEVELOPMENTALLY DISABLED  
MENTALLY ILL

**Special Certification:** Mentally Ill  
Developmentally Disabled

## II. METHODOLOGY

11/29/2021	Enrollment
11/29/2021	SC-Application Received - Original
12/13/2021	File Transferred To Field Office Flint via SharePoint
01/21/2022	Application Incomplete Letter Sent
04/11/2022	Application Complete/On-site Needed
04/27/2022	Inspection Completed On-site
04/27/2022	SC-Inspection Completed On-Site
04/29/2022	Inspection Completed-Env. Health : A
05/10/2022	Inspection Completed-BCAL Full Compliance
05/10/2022	SC-Inspection Full Compliance
05/17/2022	Recommend License Issuance
05/23/2022	SC-Recommend MI and DD

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

The group home is located within the Township of Genesee, which is located in Genesee County, MI, in a neighborhood with similar style dwellings. It is a one (1) story house, complete with six (6) individual resident bedrooms, a combined living room/dining, a kitchen a laundry room, one (1) full and two (2) 1/2 bathrooms. There is an attached garage entry/exit door located through the kitchen. It has a spacious backyard, with an attached patio style deck. There is a circular driveway with ample space for both visitors and staff. The property is owned by Richfield LLC. Flatrock Manor, Inc. has provided a copy of a lease agreement with Richfield LLC, allowing operation an AFC home at this property.

The furnace room, located within the home, has an enclosed in a 1-3/4-inch solid core door, constructed of material that has a 1-hour-fire resistance rating, equipped with an automatic self-closing device and positive latching hardware. On 04/28/2022, the furnaces were inspected by licensed professionals, Vortex Heating and Air Conditioning, deemed to be in safe operational condition.

The home is equipped with hard-wired smoke detectors and fire extinguishers throughout the facility. It has a public water and sewer system.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	16 x 15	240 square feet	1
2	15 x 12	180 square feet	1
3	15 x 13	195 square feet	1
4	15 x 11	165 square feet	1
5	15 x 11	165 square feet	1
6	13 x 13	169 square feet	1

The multi-purpose room contains 700 square feet of indoor living space and this exceeds the requirements for six (6) residents.

The home has three (3) separate and independent means of egress to the outside. The means of egress were measured at the time of the initial inspection and exceed the 30-inch minimum width requirement. The required exit doors are equipped with positive latching non-locking against egress hardware. The facility is wheelchair accessible.

Based on the above information, it is concluded that this facility can accommodate six (6) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

## **B. Program Description**

This home is designed to help adults with mental illness and developmental disabilities discover their independence and celebrate their abilities in a family-like, home environment that adapts to their unique needs and interests.

This home assists, supports, and encourages adults with severe mental illness and developmental disabilities to achieve their goals, gain independence and to be a part of a community, with the primary goal of reduced behaviors, independence, and reintegration into the community.

The applicant intends to provide 24-hour supervision, protection, and personal care to six (6) male or female adults whose diagnosis is mentally impaired,

developmentally disabled and physically handicapped, in the least restrictive environment possible.

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

The licensee will provide all transportation for program and medical needs. The facility will make provision for a variety of leisure and recreational equipment.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources including the public schools and library, local museums, and shopping centers. These resources provide an environment to enhance the quality of life and increase the independence of each resident.

### **C. Applicant and Administrator Qualifications**

The applicant, Flatrock Manor, Inc., has provided documentation to appoint Nick Burnett as the licensee designee and Ms. Morgan Yarkosky as the license administrator. The applicant, Flatrock Manor, Inc., submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

A licensing record clearance request was completed with no LEIN convictions recorded for the licensee/administrator. The licensee /administrator submitted a medical clearance request with statements from a physician documenting her good health and current TB-test negative results.

The licensee and administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 6-bed facility is adequate and includes a minimum of 1-staff-to-3 residents per shift. All staff shall be awake during sleeping hours.

The applicant acknowledges an understanding of the training and qualification requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff -to-resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record

checks utilizing the Michigan Long Term Care Partnership website ([www.miltcpartnership.org](http://www.miltcpartnership.org)), L-1 Identity Solutions™ (formerly Identix®), and the related documents required to be maintained in each employee's record to demonstrate compliance.

The applicant acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee, can administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

#### **D. Rule/Statutory Violations**

Compliance with the physical plant rules has been determined. Compliance with Quality-of-Care rules will be assessed during the period of temporary licensing via an on-site inspection.

#### **IV. RECOMMENDATION**

I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-6) and temporary issuance for special certification for the mentally ill and developmentally disabled.



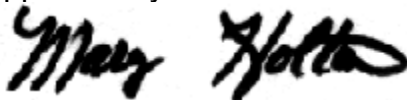
May 31, 2022

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Sabrina McGowan  
Licensing Consultant

Date

Approved By:



May 31, 2022

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Mary E Holton  
Area Manager

Date