



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

December 7, 2022

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

RE: License #: AM250388518
Investigation #: 2023A0582008
Flushing

Dear Mr. Burnett:

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) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Derrick L. Britton".

Derrick Britton, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 284-9721

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM250388518
Investigation #:	2023A0582008
Complaint Receipt Date:	10/25/2022
Investigation Initiation Date:	10/25/2022
Report Due Date:	12/24/2022
Licensee Name:	Flatrock Manor, Inc.
Licensee Address:	7012 River Road Flushing, MI 48433
Licensee Telephone #:	(810) 964-1430
Administrator:	Morgan Yarkosky
Licensee Designee:	Nicholas Burnett
Name of Facility:	Flushing
Facility Address:	7012 River Road Flushing, MI 48433
Facility Telephone #:	(810) 877-6932
Original Issuance Date:	11/09/2017
License Status:	REGULAR
Effective Date:	05/09/2022
Expiration Date:	05/08/2024
Capacity:	11
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION

	Violation Established?
On 10/24/2022, the facility was issued a disapproval from BFS due to lack of response and corrective action to fire safety deficiencies.	Yes

III. METHODOLOGY

10/25/2022	Special Investigation Intake 2023A0582008
10/25/2022	Special Investigation Initiated - Letter Email from Cory Irvin, BFS Fire Marshal
11/02/2022	Inspection Completed On-site
12/07/2022	Exit Conference With Nicholas Burnett, Licensee Designee
12/07/2022	Inspection Completed-BCAL Sub. Compliance
12/07/2022	Corrective Action Plan Requested and Due on 12/23/2022

ALLEGATION:

On 10/24/2022, the facility was issued a disapproval from BFS due to lack of response and corrective action to fire safety deficiencies.

INVESTIGATION:

I received this complaint on 10/25/2022. I received an email from Cory Irvin, State Fire Marshal Inspector. Mr. Irvin sent an inspection report from 10/24/2022. Mr. Irvin documented that he originally went to the facility on 09/22/22 and issued a temporary approval through 10/14/22. Mr. Irvin documented that he emailed the facility on 10/17/2022 asking if the issues had been addressed and have not received a response to the email. Mr. Irvin documented that all the cited deficiencies were repeats from last year's inspection. Mr. Irvin stated that he asked for a plan of correction as to how they plan to ensure that the documents are on sight and available for review at the time of inspections. Mr. Irvin documented that he issued a

disapproval of the facility due to lack of response to his inspection report and the email that he sent.

I reviewed the Inspection Report from the BFS Fire Marshal Division, which documented the following:

INSPECTOR COMMENTS:

- No annual fire alarm system report was available for review at the time of inspection. This is a repeat violation from last year.
- No annual sprinkler system inspection report was available for review at the time of inspection. This is a repeat violation from last year.
- Bedroom #7 concealed sprinkler head is missing cover.
- No documented bi-monthly review of emergency procedures by all staff was available for review. This is a repeat violation from last year.
- No documented fire drills were available for review at the time of inspection. This is a repeat violation from last year.
- No documented 30 second monthly or 90-minute annual testing of emergency lights. This is a repeat violation from last year.

On 11/02/2022, I conducted an unannounced, onsite inspection at the facility. I interviewed Ruby Taylor, Manager. Ms. Taylor stated that she was aware of the deficiencies addressed by the fire marshal, and they were working to correct the items.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
ANALYSIS:	Based on Fire Marshall Inspection Reports, the facility currently has a “D” rating. Cory Irvin, BFS Fire Marshal, reported that he issued a temporary approval that was valid through 10/14/2022, but the facility failed to address deficiencies he identified, to include Bedroom #7 having a sprinkler head that is missing a cover and fire alarm system reports for review.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14209	Home records; generally.
	(1) A licensee shall keep, maintain, and make available for department review, all the following home records:

	<p>(k) Fire drill records. (p) Fire detection and sprinkler equipment inspection and approval records, if applicable.</p>
ANALYSIS:	Based on Fire Marshall Inspection Reports, the facility currently has a "D" rating. Cory Irvin, BFS Fire Marshal, reported that he issued a temporary approval that was valid through 10/14/2022, but the facility failed to address deficiencies he identified, to include no documented fire drill records for review at the time of inspection and no annual sprinkler system inspection report for review. According to Mr. Irvin, these are repeat violations from last year's fire inspection.
CONCLUSION:	VIOLATION ESTABLISHED

On 12/07/2022, I conducted an Exit Conference with Nicholas Burnett, Licensee Designee. I informed Mr. Burnett of the findings from the investigation and the need for a corrective action plan for BFS and BCHS.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend modification of the license to provisional.

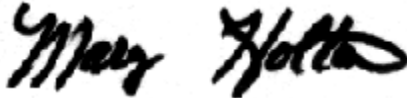


12/07/2022

Derrick Britton
Licensing Consultant

Date

Approved By:



12/07/2022

Mary E. Holton
Area Manager

Date