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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 17, 2023

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

RE: License #: AM250402509
Investigation #: 2023A0582040
Fenton South

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 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 black ink that reads "Derrick L. Britton". The signature is written in a cursive style with a large initial 'D'.

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 #:	AM250402509
Investigation #:	2023A0582040
Complaint Receipt Date:	03/28/2023
Investigation Initiation Date:	03/30/2023
Report Due Date:	05/27/2023
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:	Fenton South
Facility Address:	Suite 2 17600 Silver Parkway Fenton, MI 48430
Facility Telephone #:	(810) 877-6932
Original Issuance Date:	03/09/2021
License Status:	REGULAR
Effective Date:	09/09/2021
Expiration Date:	09/08/2023
Capacity:	10
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED, MENTALLY ILL

II. ALLEGATIONS

	Violation Established?
Resident A and Resident B's bedrooms and bathrooms have soiled briefs and a strong odor of feces and urine.	Yes
There are cleaning liquids left out which can be dangerous if the residents got into them.	No

III. METHODOLOGY

03/28/2023	Special Investigation Intake 2023A0582040
03/28/2023	APS Referral Denied APS Referral
03/30/2023	Special Investigation Initiated - On Site Interview with Joey Hoffner, Home Manager
03/30/2023	Contact - Telephone call made To Michele Schiebel, Recipient Rights Officer
05/16/2023	Inspection Completed On-site Interviews with Direct Care Workers Autumn Connyer and Ally Garman
05/17/2023	Contact - Telephone call made With Direct Care Worker Iyanah Blanding
05/17/2023	Exit Conference With Nicholas Burnett, Licensee Designee

ALLEGATION: Resident A and Resident B's bedrooms and bathrooms have soiled briefs and a strong odor of feces and urine.

INVESTIGATION: I received this denied Adult Protective Services referral on 03/28/2023.

On 03/30/2023, I conducted an unannounced, onsite inspection at the facility. I observed Resident A's bedroom to be clean and orderly. I observed Resident A's bathroom to be clean. There were no foul smells in Resident A's bedroom or bathroom. I was unable to interview Resident A due to his diagnoses.

I observed Resident B's bedroom to be clean and orderly, except for a pair of underwear and pants on the floor. I observed Resident B's bathroom to be clean and orderly. There were no foul smells in Resident B's bedroom or bathroom. I was unable to interview Resident B due to his diagnoses.

I interviewed Joey Hoffner, Home Manager. Mr. Hoffner stated that staff on each shift are required to make sure resident rooms are cleaned. Mr. Hoffner stated that Resident A and Resident B's rooms are not regularly messy.

On 03/30/2023, I contacted Michele Schiebel, Recipient Rights Officer. Ms. Schiebel stated that when she visited Resident A and Resident B on 03/28/2023, she had concerns about the cleanliness in both rooms, with a strong odor of feces and urine. Ms. Schiebel stated that there were multiple soiled briefs throughout Resident A's room. Ms. Schiebel provided pictures that she took while at the facility. The pictures showed what appeared to be a brief on the floor in Resident A's bathroom, a cup in the bathroom sink, an empty bottle on the bathroom floor, a bowl, cup, and spoon on the floor near Resident A's bed, a brief near Resident A's bed, and another brief in a corner. Pictures of what was labeled as Resident B's bedroom showed a toilet with feces on it, crumbs on the floor, a dirty bathroom sink, spots on his sheets, clothes on his bed, and on the floor. I shared pictures with Ms. Schiebel from my unannounced onsite inspection of the facility, and Ms. Schiebel stated that the rooms look "amazing" compared to what she observed and hoped it remained the same.

On 05/16/2023, I conducted an unannounced, onsite inspection at the facility. I observed Resident A and Resident B's bedrooms and bathrooms and observed them to be clean and orderly with no foul smells.

I interviewed Direct Care Worker Autumn Connyer, who stated that she had no concerns about the cleanliness. Ms. Connyer stated that she ensures that resident rooms are cleaned before leaving her shift.

I interviewed Direct Care Worker Ally Garman, who stated that she had no concerns about the cleanliness of resident rooms. Ms. Garman stated that every shift has to complete checks to ensure room cleanliness.

I interviewed Mr. Hoffner about the pictures that were provided from Recipient Rights. Mr. Hoffner stated that Resident A goes through multiple briefs throughout the day. Mr. Hoffner stated that most briefs are not dirty, but Resident A will just change briefs and leave them on the floor. Mr. Hoffner stated that Resident B was sick when Recipient Rights came, which explained the condition of his bathroom and feces on the toilet. Mr. Hoffner stated that although the rooms were not cleaned when the Recipient Rights Officer visited, he was certain that they would have been cleaned that day.

On 05/17/2023, I interviewed Direct Care Worker Iyanah Blanding, who stated that she has no concerns with the cleanliness or smells in resident rooms. Ms. Blanding stated that staff are responsible and have to sign off each shift to verify that the rooms are clean.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.
ANALYSIS:	Based on pictures provided by the Ms. Schiebel from the Office of Recipient Rights, there is sufficient evidence to suggest that the rooms of Resident A and Resident B were not up to appropriate housekeeping standards. The pictures revealed multiple soiled briefs throughout the rooms, a dirty sink, a cup in the bathroom sink, cup and spoon on the floor, feces on the toilet, and crumbs on the floor, which suggest a lack of cleaning. It is noted that since the allegation was received, the violation does not appear to be an ongoing issue, as evidenced by two unannounced onsite inspections at the facility. Home Manager Joey Hoffner acknowledged that the rooms were not cleaned during the visit from Recipient Rights.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: There are cleaning liquids left out which can be dangerous if the residents got into them.

INVESTIGATION: I received this denied Adult Protective Services referral on 03/28/2023.

On 03/30/2023, I conducted an unannounced, onsite inspection at the facility. I did not observe any cleaning liquids in resident areas or in the kitchen area. I interviewed Joey Hoffner, Manager. Mr. Hoffner showed me a locked closet in the laundry area where cleaning supplies are kept.

On 03/30/2023, I contacted Michele Schiebel, Recipient Rights Officer. Ms. Schiebel stated that when she visited Resident A and Resident B on 03/28/2023, she had concerns about a bottle of cleaning fluid that was outside of a resident's bedroom. Ms. Schiebel provided a picture of "CaviCide," which is a disinfectant cleaner that was next to a floor cleaning push mop in a corner.

On 05/16/2023, I conducted an unannounced, onsite inspection at the facility. I observed resident areas and the kitchen and did not see any cleaning supplies out in

the open. I interviewed Mr. Hoffner about the picture of the cleaner that was on the floor. Mr. Hoffner stated that a staff member was cleaning the resident's room at the time, and the cleaner was just on the outside of the resident's room. Mr. Hoffner stated that the cleaner was in view of staff.

APPLICABLE RULE	
R 400.14401	Environmental health.
	(6) Poisons, caustics, and other dangerous materials shall be stored and safeguarded in nonresident areas and in non-food preparation storage areas.
ANALYSIS:	Based on observations, there is no evidence to suggest that cleaning supplies are left out for residents to access. While a picture of disinfectant cleaner was shown in an open area, Mr. Hoffner stated that a resident's room was being cleaned at the time and staff had sight of the disinfectant cleaner. It is noted that onsite inspections revealed no concerns of items being left out. Cleaning supplies and other caustics were appropriately stored during two onsite inspections.
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 05/17/2023, I conducted an Exit Conference with Nicholas Burnett, Licensee Designee. I informed Mr. Burnett of the findings from the investigation.

IV. RECOMMENDATION

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

Derrick L. Britton

05/17/2023

Derrick Britton
Licensing Consultant

Date

Approved By:

Jerry Hendrick

05/17/2023

Jerry Hendrick
Area Manager

Date