



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

April 21, 2021

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

RE: Application #: AS250406894  
Lippincott  
4408 Lippincott Blvd.  
Burton, MI 48519

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 (810) 787-7031.

Sincerely,

A handwritten signature in cursive script that reads "Crecendra Brown".

Crecendra Brown, Licensing Consultant  
Bureau of Community and Health Systems  
4809 Clio Road  
Flint, MI 48504  
(810) 931-0965

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS250406894
<b>Applicant Name:</b>	Flatrock Manor, Inc.
<b>Applicant Address:</b>	7012 River Road Flushing, MI 48433
<b>Applicant Telephone #:</b>	(810) 964-1430
<b>Licensee Designee:</b>	Nicholas Burnett
<b>Administrator</b>	Carrie Aldrich
<b>Name of Facility:</b>	Lippincott
<b>Facility Address:</b>	4408 Lippincott Blvd. Burton, MI 48519
<b>Facility Telephone #:</b>	(810) 877-6932
<b>Application Date:</b>	12/17/2020
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

## II. METHODOLOGY

12/17/2020	Enrollment
01/04/2021	Application Incomplete Letter Sent 1326 for nick,afc 100 for Carrie, Additional \$25.00 application fee, Updated application
01/04/2021	Inspection Report Requested – Health
01/07/2021	Contact - Document Received App - Updated; add'l \$25 ck #12753; 1326 for Nicholas (LD); AFC100 for Carrie (Admin)
01/14/2021	Inspection Completed-Env. Health: A
02/10/2021	Application Incomplete Letter Sent
02/10/2021	SC-Application Received - Original
02/10/2021	SC-ORR Response Requested
02/19/2021	SC-ORR Response Received-Approval
04/08/2021	Inspection Completed On-site
04/08/2021	Exit Conference
04/20/2021	Application Complete/On-site Needed
04/20/2021	Inspection Completed-BCAL Full Compliance
04/20/2021	SC-Recommend MI and DD
04/20/2021	PSOR on Address Completed No Hits.
04/20/2021	Recommend License Issuance

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

Lippincott is located at 4408 Lippincott Blvd., Burton, MI in Genesee County. The physical plant is a tri-level vinyl sided structure with a basement. It consists of a living room, dining room, kitchen, staff office, laundry room, medication room, three car garage, indoor pool room, two bathrooms and a family room on the main upper level. There is a foyer when you walk in the door. The lower level consists of six single-occupancy resident bedrooms and one bathroom. One restroom on the main level has a sink and a toilet. The second restroom on the main level has a sink, toilet, and a shower. The lower-level restroom has a sink, toilet, and a shower. The driveway has adequate parking for staff and visitors. The facility is not wheelchair accessible. The home is owned by 4408 Lippincott Blvd., LLC, a domestic limited liability company and the Resident Agent is Licensee Designee Nicholas Burnett.

The furnace and hot water heater are located in a 1-hour protected enclosure with a 1¾ inch solid core door equipped with an automatic self-closing device inside Bedroom #6. The facility is equipped with interconnected, hardwire smoke detection system, with battery back-up, which was installed by a licensed electrician and is fully operational. A furnace inspection was completed on February 18, 2021. The furnace was found to be operating in safe and good condition with no signs of carbon monoxide.

The facility has a public sewer and private water system. An environmental health inspection by the Genesee County Health Department was conducted on January 14, 2021. The facility was determined to be in substantial compliance with all applicable licensing rules pertaining to environmental health.

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

<b>Bedroom #</b>	<b>Room Dimensions</b>	<b>Total Square Footage</b>	<b>Total Resident Beds</b>
Bedroom 1	14'11" x 9'8"	138	1
Bedroom 2	13'2" x 12'11"	160	1
Bedroom 3	15'1" x 13'11"	198	1
Bedroom 4	9'7" x 9'7"	94	1
Bedroom 5	9'7" x 12'5"	121	1
Bedroom 6	12'1" x 11'9"	144	1

The living and dining room areas measure a total of 1,048 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

The home has two 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. All the bedroom and bathroom doors have conforming hardware and proper door width.

The bedrooms have the proper means of egress as required by R 400.15508. The interior of the facility is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R400.15401, R 400.15402, R 400.15403, R 400.15405, R 400.15406, and R400.15407.

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**

The applicant, Flatrock Manor Inc., submitted a copy of the required documentation. Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection, and personal care to six (6) male or female ambulatory adults, 18 years of age and older, whose diagnosis is physically handicapped, developmentally disabled, and mentally impaired in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. An assessment plan will be designed and implemented for each resident's social and behavioral developmental needs.

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.

Flatrock Manor Inc. will ensure that the resident's transportation and medical needs are met. Flatrock Manor Inc. has transportation available for residents to access community-based resources and services. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

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

On December 17, 2020, Flatrock Manor Inc. submitted an application to provide foster care services to six adults at 4408 Lippincott Blvd., Burton, Michigan.

The applicant, Flatrock Manor Inc., which is a "Michigan Domestic Limited Liability

Company”, was established in Michigan, on 08/05/1998. The company is an experienced adult foster care provider, currently operating several licensed adult foster care facilities in the State of Michigan. The applicant 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. The applicant has a board of directors that oversee the company.

Flatrock Manor, Inc. submitted a written statement naming Nicholas Burnett as the licensee designee and Carrie Aldrich as the facility administrator. Nicholas Burnett and Carrie Aldrich submitted a licensing record clearance request that was completed with no LEIN convictions recorded. They also submitted a medical clearance request with statements from a physician documenting their good health and current TB-test negative results. Nicholas Burnett and Carrie Aldrich 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 2 staff to 6 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 2 to 6 resident ratios.

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 employees 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.

The applicant acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all of the documents contained within each employee’s file.

The applicant acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. The applicant indicated that it is their intent to achieve and maintain compliance with these requirements.

The applicant acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee and/or visitor.

The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

The applicant acknowledges their responsibility to obtain all of the required forms and signatures that are to be completed prior to, or at the time of each resident's admission to the home as well as the required forms and signatures to be completed for each resident on an annual basis. In addition, the applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

The applicant acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

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

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

**IV. RECOMMENDATION**

I recommend issuance of a temporary license to this AFC adult small group home (capacity 3-6).

*Crecendra Brown*

April 21, 2021

---

Crecendra Brown  
Licensing Consultant

Date

Approved By:

*Mary Holton*

April 21, 2021

---

Mary E Holton  
Area Manager

Date