



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

February 20, 2026

Dionne Morgan
320 Commonwealth
FLINT, MI 48503

RE: License #: AS250419210
Commonwealth AFC
320 Commonwealth
Flint, MI 48503

Dear Dionne Morgan:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 licensee or licensee designee or home for the aged authorized representative and a date.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan within 15 days.

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (517) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Kent W. Gieselman". The signature is written in a dark ink and is positioned below the word "Sincerely,".

Kent W Gieselman, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 931-1092

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

I. IDENTIFYING INFORMATION

License #:	AS250419210
Licensee Name:	Dionne Morgan
Licensee Address:	320 Commonwealth FLINT, MI 48503
Licensee Telephone #:	(810) 293-9861
Administrator:	Dionne Morgan
Name of Facility:	Commonwealth AFC
Facility Address:	320 Commonwealth Flint, MI 48503
Facility Telephone #:	(810) 293-9861
Original Issuance Date:	08/21/2025
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/03/2026

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: 02/03/2026

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 0

No. of others interviewed 0 Role: [REDACTED]

- Medication pass / simulated pass observed? Yes No If no, explain. No Residents have been admitted since the original license was issued on 08/21/2025.
- Medication(s) and medication record(s) reviewed? Yes No If no, explain. No Residents have been admitted since the original license was issued on 08/21/2025.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. No Residents have been admitted since the original license was issued on 08/21/2025.
- Meal preparation / service observed? Yes No If no, explain. No Residents have been admitted since the original license was issued on 08/21/2025.
- Fire drills reviewed? Yes No If no, explain. No Residents have been admitted since the original license was issued on 08/21/2025.
- Fire safety equipment and practices observed? Yes No If no, explain.
- E-scores reviewed? (Special Certification Only) Yes No N/A If no, explain. No Residents have been admitted since the original license was issued on 08/21/2025.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes No If no, explain. No Residents have been admitted since the original license was issued on 08/21/2025.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes (please explain) No N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

MCL 400.717 Provisional license

(1) A provisional license may be issued to an adult foster care facility that has previously held a temporary or regular license under this act or an act repealed by this act. A provisional license may be issued for 6 months if an adult foster care facility is temporarily unable to conform to the requirements of this act for a regular license and may be renewed not more than 2 consecutive times as provided in subsections (2) and (4). The issuance of a provisional license shall be contingent upon the submission to the department of an acceptable plan of correction for the adult foster care facility within the time limitations of the provisional period.

No Residents have been admitted since the original license was issued on 08/21/2025.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.



Kent W Gieselman
Licensing Consultant

02/20/2026
Date

Approved by:



Mary E. Holton
Area Manager

02/20/2026
Date