



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 2, 2025

Steven Tyshka
Waltonwood at Royal Oak
3450 W. 13 Mile Road
Royal Oak, MI 48073

RE: License #: AH630336552
Waltonwood at Royal Oak
3450 W. 13 Mile Road
Royal Oak, MI 48073

Dear Steven Tyshka:

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 home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. 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 feel free to contact the local office at (517) 335-5985.

Sincerely,

Kimberly Horst, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH630336552
Licensee Name:	Waltonwood at Royal Oak, L.L.C.
Licensee Address:	Suite 200 7125 Orchard Lake Road West Bloomfield, MI 48322
Licensee Telephone #:	(248) 865-1606
Authorized Representative:	Steven Tyshka
Administrator:	Taylor Obomsawin
Name of Facility:	Waltonwood at Royal Oak
Facility Address:	3450 W. 13 Mile Road Royal Oak, MI 48073
Facility Telephone #:	(248) 549-6400
Original Issuance Date:	11/28/2012
Capacity:	105
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/30/2025

Date of Bureau of Fire Services Inspection if applicable:

Inspection Type: ☐ Interview and Observation ☒ Worksheet
☐ Combination

Date of Exit Conference: 07/02/2025

No. of staff interviewed and/or observed 10

No. of residents interviewed and/or observed 25

No. of others interviewed 0 Role N/A

- Medication pass / simulated pass observed? Yes ☒ No ☐ If no, explain.
- Medication(s) and medication records(s) reviewed? Yes ☒ No ☐ If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes ☐ No ☒ If no, explain. Resident funds not kept in trust.
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.
- Fire drills reviewed? Yes ☐ No ☒ If no, explain.
Disaster plans reviewed.
- Water temperatures checked? Yes ☒ No ☐ If no, explain.
- Incident report follow-up? Yes ☐ IR date/s: N/A ☒
- Corrective action plan compliance verified? Yes ☐ CAP date/s and rule/s: 2025A078416 dated 12/20/2024; CAP dated 01/03/2025
- Number of excluded employees followed up? 6 N/A ☐

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
R 325.1921	Governing bodies, administrators, and supervisors.
	<p>(1) The owner, operator, and governing body of a home shall do all of the following:</p> <p>(b) Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.</p>
	<p>(p) "Protection" means the continual responsibility of the home to take reasonable action to ensure the health, safety, and well-being of a resident as indicated in the resident's service plan, including protection from physical harm, humiliation, intimidation, and social, moral, financial, and personal exploitation while on the premises, while under the supervision of the home or an agent or employee of the home, or when the resident's service plan states that the resident needs continuous supervision.</p>
<p>Review of Resident F's medication administration record (MAR) revealed Resident F was prescribed Lorazepam 2mg with instruction to apply one syringe topically to inner wrist every six hours as needed for agitation. Review of Resident F's service plan lacked detailed information on how the resident demonstrates anxiety/agitation and what behaviors require the administration of the medication or if staff can use nonpharmaceutical interventions. Similar findings were noted with Resident C and G.</p>	
R 325.1932	Resident medications.
	<p>(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.</p>
<p>Review of Resident D's MAR revealed Resident D was prescribed Levothyroxine 175mcg tablet with instructions to administer one tablet by mouth on an empty stomach. Review of June 2025 MAR revealed Resident D received this medication 06/22/2025-06/24/2025 but did not on 06/25/2025-06/28/2025, due to waiting for medication delivery. In addition, Resident D had multiple other medications that were not administered due to waiting for medication delivery. By waiting multiple days for a medication delivery, Resident D did not receive this medication as prescribed by the licensed health care professional.</p>	

R 325.1932	Resident medications.
	(3) Staff who supervise the administration of medication for residents who do not self-administer shall comply with all of the following: (b) Complete an individual medication log that contains all of the following information: (v) The initials of the individual who administered the prescribed medication.
Review of Resident F's MAR revealed Resident F was prescribed Lorazepam 0.5mg tablet with instructions to administer one tablet by mouth every six hours. On 06/27/2025 at 6:00am, there were no initials of the individual that administered this medication.	
R 325.1976	Kitchen and dietary.
	(8) A reliable thermometer shall be provided for each refrigerator and freezer.
Inspection of the facility kitchen revealed there was no internal thermometer located in the walk-in freezer.	

IV. RECOMMENDATION

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

Kimberly Host

07/02/2025

Date

Licensing Consultant