

GRETCHEN WHITMER
GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

December 11, 2019

Georgia Cameron & Renee Cameron 805 Okemos Rd. Mason, MI 48854

RE: License #: AF330384262

Walnut Acres AFC 805 Okemos Rd. Mason, MI 48854

Dear Georgia Cameron & Renee Cameron:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

 You are to submit documentation of compliance in the form of current resident funds form II sheets for each resident as well as the signature page of the resident care agreement for each resident by January 17, 2020.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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) 284-9730.

Sincerely,

Leslie Herrguth, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street

P.O. Box 30664 Lansing, MI 48909 (517) 256-2181

Leslie Hengich

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

#### I. IDENTIFYING INFORMATION

**License #:** AF330384262

**Licensee Name:** Georgia Cameron & Renee Cameron

**Licensee Address:** 805 Okemos Rd.

Mason, MI 48854

**Licensee Telephone #:** (517) 676-2021

Name of Facility: Walnut Acres AFC

Facility Address: 805 Okemos Rd.

Mason, MI 48854

**Facility Telephone #:** (517) 604-9492

Original Issuance Date: 06/27/2017

Capacity: 4

Program Type: AGED

## **II. METHODS OF INSPECTION**

Date	e of On-site Inspection(s):	12/03/2019			
Date	e of Bureau of Fire Services Inspection if applicable:	Not applicable			
Date	e of Health Authority Inspection if applicable:	09/04/2019			
Insp	ection Type:	⊠ Worksheet □ Full Fire Safety			
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 2 Role: licensees	0 3			
•	Medication pass / simulated pass observed? Yes $\boxtimes$	No ☐ If no, explain.			
•	Medication(s) and medication record(s) reviewed? Ye	es 🗵 No 🗌 If no, explain.			
•	Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain.  Meal preparation / service observed? Yes No If no, explain.  Inspection did not occur at meal time. Kitchen practices and equipment were observed.  Fire drills reviewed? Yes No If no, explain.				
•	Fire safety equipment and practices observed? Yes [	⊠ No  If no, explain.			
•	E-scores reviewed? (Special Certification Only) Yes \( \subseteq \text{No} \subseteq \text{N/A} \text{ \index} \) If no, explain. Water temperatures checked? Yes \( \subseteq \text{ No} \subseteq \text{ If no, explain.} \)				
•	Incident report follow-up? Yes ⊠ No ☐ If no, expla	in.			
•	Corrective action plan compliance verified? Yes ☐ C N/A ☒ Number of excluded employees followed-up?	CAP date/s and rule/s: N/A ⊠			
•	Variances? Yes ⊠ (please explain) No ☐ N/A ☐ Variance for rule 433 (3) granted 5/1/18.				

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 400.1407

Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physicians instructions; health care appraisal.

(6) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency at least annually or more often if necessary.

At the time of the onsite inspection I observed that three of three resident care agreements were not updated annually.

R 400.1421

Handling of resident funds and valuables.

(5) Except for trust fund accounts, a licensee shall not accept for safekeeping money and valuables exceeding a value of \$200.00 for any resident in the home. Trust fund accounts between the licensee and the resident are subject to a \$1,500.00 limitation.

At the time of the onsite inspection I observed that the licensee accepted well over \$200 for safekeeping for two of three residents.

A corrective action plan was requested and approved on 12/03/2019. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

### IV. RECOMMENDATION

An acceptable co	orrective action	plan has b	peen received	d. Renewal of t	he license is
recommended.					

Leslie Henguith	12/11/19
Leslie Herrguth	Date
Licensing Consultant	