



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

Addendum

December 9, 2025

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. Your license will be renewed (upon receipt of an approved environmental health inspection report). To verify your implementation and compliance with this corrective action plan: You are to submit documentation of compliance (Regarding R 400.729 (3) & R 400.647(2)(5)), and a Statement of Correction (Regarding R 400.675 (4)) by Monday, February 2, 2026.

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) 335-5985.

Sincerely,

A handwritten signature in cursive script that reads "Mahtina Rubritius".

Mahtina Rubritius, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa
P.O. Box 30664
Lansing, MI 48909

(517) 262-8604

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**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

Licensee/Licensee Designee: N/A

Administrator:

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 of On-site Inspection(s): 12/08/2025

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

Date of Health Authority Inspection if applicable: Pending

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 3

No. of others interviewed 0 Role: [REDACTED]

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication record(s) reviewed? Yes 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.
- 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 No N/A
If no, explain.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes No If no, explain.
Incident reports are no longer required to be submitted to LARA.
- 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:

R 400.647 Safety and maintenance of premises.

(2) Home furnishings and housekeeping standards must present a comfortable, clean, and orderly appearance.

- There were cobwebs observed in one resident bedroom. There were some areas of the home that required dust removal.
- The basement of the facility was cluttered with supplies, boxes, and other items, making it difficult to navigate through the area.

R 400.647 Safety and maintenance of premises.

(5) Floors, walls, and ceilings must be cleanable, maintained clean, and in good repair.

- There was a hole in the bathroom wall, which required repair.
- There was a large section of the ceiling removed in the basement (to fix a leak). The ceiling required repair.

R 400.675 Resident medications.

(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident:

(b) Complete an individual medication log that contains all of the following:

- (i) Medication name.
- (ii) Dosage.
- (iii) Label instructions for use.
- (iv) Time to be administered.
- (v) Initials of the individual who administered the medication at the time given.
- (vi) Resident's refusal to accept prescribed medication or procedures at time of refusal.

- The medication logs were not maintained for Resident A between January 12, 2025, to January 31, 2025, and for the entire month of February in 2025.

R 400.729 Heating equipment.

(3) Where conditions indicate a need for inspection, heat-producing equipment must be inspected by a qualified

inspection service. A copy of the written approval from the qualified inspection service must be submitted to the department on request.

- There was no record of the furnace inspection available for review. An updated inspection report was requested.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Contingent upon receipt of an approved environmental health inspection report, it's recommended that the license be renewed.



12/09/2025

Mahtina Rubritius
Licensing Consultant

Date