

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA ACTING DIRECTOR

August 10, 2023

Manda Ayoub Pomeroy Living Sterling Assisted 2200 15 Mile Road Sterling Heights, MI 48310

RE: License #: AH500317073

Pomeroy Living Sterling Assisted

2200 15 Mile Road

Sterling Heights, MI 48310

Dear Ms. Ayoub:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. Your license is renewed, effective, 6/26/2023. It is valid only at your present address and is nontransferable.

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) 284-9730.

Sincerely,

Brender Howard, Licensing Staff

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Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909

(313) 268-1788

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH500317073
Licensee Name:	Pomkal Sterling Assisted LLC
I to a second and second	0
Licensee Address:	Suite 100
	25480 Telegraph Rd Southfield, MI 48033
	Soutilield, Mi 46033
Licensee Telephone #:	(248) 356-4060
Authorized Representative:	Manda Ayoub
7.d	manda / tycaz
Administrator:	Mary Zolno
Name of Facility:	Pomeroy Living Sterling Assisted
Facility Addition	0000 45 Mil D
Facility Address:	2200 15 Mile Road
	Sterling Heights, MI 48310
Facility Telephone #:	(586) 554-7200
Original Issuance Date:	02/27/2014
Capacity:	74
Program Type:	ALZHEIMERS
	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection	on(s): 8/10/2023			
Date of Bureau of Fire S	Services Inspection if applicable:	12/27/2022		
Inspection Type:	☐Interview and Observation ☐Combination	⊠Worksheet		
Date of Exit Conference: 8/10/2023				
No. of staff interviewed No. of residents interviewe No. of others interviewe	wed and/or observed	10 52 nbers		
Medication pass / s	imulated pass observed? Yes $oxtime$	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. No funds held for residents Meal preparation / service observed? Yes ⋈ No ☐ If no, explain. 				
 Fire drills reviewed? Yes ☐ No ☒ If no, explain. Interviewed family on the policy and procedures. 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: 3/7/2022 2022A1021033 1922(5); 5/4/2022 2022A0585053 21321(1) C Number of excluded employees followed up? 2 N/A ☐ 				

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

Renewal of the license is recommended.

The facility was found to be in substantial compliance with the public health code and administrative rules regulating home for the aged facilities.

IV. RECOMMENDATION

Grender J. Howard	8/10/2023	
Licensing Consultant	Date	